

**NR 511/NR 511 MIDTERM EXAM NEWEST 2024 WITH 800+ WELL VERIFIED DETAILED ANSWERS, DIFFERENTIAL DIAGNOSIS & PRIMARY CARE PRACTICUM**

Which treatment is considered the gold standard in tissue-conserving skin cancer removal?

1. Cryosurgery.
2. Simple excision.
3. Photodynamic therapy.
4. Mohs micrographic surgery (MMS).

**RATIONALE**

MMS is considered the gold standard in tissue-conserving skin cancer removal. MMS is a specialized type of surgery consisting of the removal of the entire tumor with the smallest possible margin of normal skin

What is the most important thing a person can do to maintain healthy skin and hopefully reduce wrinkles?

1. Keep well hydrated.
2. Use sunscreen with a sun protection factor (SPF) of at least 45.
3. Avoid smoking.
4. Use mild defatted or glycerin soap

**RATIONALE**

The most important thing a person can do to maintain healthy skin is not smoke. Smokers develop more wrinkles and have elastosis, decreased tissue perfusion and oxygenation, and an adverse exposure to free radicals on elastic tissue.

You suspect a platelet abnormality in a 40-year-old woman who presents to your clinic with:

1. Red to blue macular plaques.
2. Multiple freckle-like macular lesions in sun-exposed areas.
3. Numerous small, brown, nonscaly macules that become more prominent with sun exposure.

#### 4.Red, flat, nonblanchable petechiae.

### **RATIONALE**

A client with a platelet abnormality may present with red, flat, nonblanchable petechiae.

You are teaching Harvey, age 55, about the warts on his hands. What is included in your teaching?

- 1.Treatment is usually effective, and most warts will not recur afterward.
- 2.Because warts have roots, it is difficult to remove them surgically.
- 3.Warts are caused by the human papillomavirus.
- 4.Shaving the wart may prevent its recurrence

### **RATIONALE**

Warts are caused by the human papillomavirus. One in four people is infected with this virus, and most warts recur despite treatment.

Jill, age 29, has numerous transient lesions that come and go, and she is diagnosed with urticaria. What do you order?

- 1.Aspirin.
- 2.Ibuprofen.
- 3.Opioids.
- 4.Antihistamines

### **RATIONALE**

Transient urticaria requires antihistamines on a regular basis.

Ashley, age 6 months, has a Candida infection in the diaper area. What do you suggest to the parent?

- 1."Use rubber or plastic pants to contain the infection and prevent it from getting to the thighs."
- 2."Keep the area as dry as possible."
- 3."Use baby powder with cornstarch."
- 4."Keep Ashley away from other babies until the infection is cleared up."

## **RATIONALE**

Clients must be taught to decrease favorable environmental conditions for Candida (eg, moisture, warmth, and poor air circulation)

Michael, a 25-year-old military reservist, presents to your clinic for a rash that began on his chest and has since developed into smaller lesions that are more concentrated on the lower abdomen and pubic area. In obtaining a history of the present illness, he reports that he had an upper respiratory infection 1 month before the rash developed. He tells you it started with 1 large oval-shaped lesion on his left chest, and 1 to 2 weeks later he developed numerous smaller lesions on the lower abdomen and groin. It has been 2 weeks since the smaller lesions developed, and he tells you he is concerned that the rash isn't improving. As you examine the patient, you note that the lesions are salmon-colored and have a thin collarette of scale within them. The original lesion is still present. You suspect Michael has:

1. Guttate psoriasis.
2. Tinea versicolor.
3. Secondary syphilis.
4. Pityriasis rosea

## **RATIONALE**

Pityriasis rosea is a common, self-limiting, usually asymptomatic eruption with a distinct initial lesion. This "herald patch," which appears suddenly and without symptoms, usually is on the chest or back. Secondary lesions appear 1 to 2 weeks later while the herald patch remains. The collarette scaling is another classic symptom of pityriasis rosea. The lesions usually resolve spontaneously in 4 to 12 weeks without scarring. Outbreaks have been known to occur in close quarters like military barracks and dormitories.

A mother complains that her newborn infant, while lying on his side, appears red on the dependent side of the body and pale on the upper side. When she picks up the baby, this coloring disappears. You explain to her about which of the following?

1. A temporary hemangioma.
2. Hyperbilirubinemia.
3. Harlequin sign.

#### 4. Mongolian spots.

### **RATIONALE**

The harlequin sign is a transient phenomenon in a newborn who has been lying on one side. The dependent side is red while the upper side is pale, as if a line has been drawn down the middle of the body. This disappears when the infant's position is changed

Candidiasis may occur in many parts of the body. James, age 29, has it in the glans of his penis. What is your diagnosis?

1. Balanitis.

2. Thrush.

3. Candidal paronychia.

4. Subungual Candida

### **RATIONALE**

Candidiasis of the glans of the penis is balanitis

Mr. Swanson, age 67, presents to the clinic for his annual health exam. He asks you if there is anything he can do to prevent the painful, blistering sores that develop on his lip in the summertime when he plays golf. You explain to Mr. Swanson that the way to prevent the development of these lesions is to:

1. Protect the lips from sun exposure with a blocking agent, such as zinc oxide, or a lip balm that contains a broad-spectrum sunscreen.

2. Apply acyclovir 5% cream 5 times a day for 4 days.

3. Take acyclovir 500 mg 1 tablet 5 times a day for 5 days.

4. Wear a visor

### **RATIONALE**

Mr. Swanson has recurrent herpes simplex virus type 1 (HSV-1), ie, orolabial herpes. Factors that trigger reactivation include local skin trauma, sunlight exposure, and systemic changes, such as menses, fatigue, and fever. In this question, the clinician is teaching prevention. Protecting the lips from sun exposure is a preventive measure