

# NAPLEX<sup>Q&As</sup>

North American Pharmacist Licensure Examination

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**QUESTION 1**

Which of the following are non-pharmacological measure that may control symptoms of gastroesophageal reflux disease?

- A. Remain upright after a meal
- B. Increase fat intake to reduce gastric emptying time Reduce intake of food or beverage that may reduce
- C. lower esophageal sphincter tone
- D. Wear tight fitted cloths to increase intra-abdominal pressure.
- E. Discontinue nicotine use in patients that uses tobacco product.

Correct Answer: E

Non-pharmacological measure that may control symptoms of gastroesophageal reflux disease are: Avoid aggravating foods/beverages that may reduce LES pressure alcohol, citrus juices caffeine, garlic, onions or cause direct irritation such as spicy foods or tomato juice should be avoided. Reduce fat intake, remain upright after meals, avoid meal before bedtime. Avoid tight fitted cloths, decrease intra-abdominal pressure. Discontinue nicotine use. Reduce intake of food or beverage that may reduce lower esophageal sphincter tone.

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**QUESTION 2**

JT is a 58-year-old women who is on vancomycin empirically for pyomyositis confirmed by MRI. Surgical debridement has successfully removed infected tissue and pus. CandS of the infected tissue comes back MSSA sensitive to everything on the panel. JT is allergic to PCN (rash), she has had cephalosporin for her UTI in the past with no problem.

What would be the most appropriate antibiotics to switch to while JT is still in the hospital?

- A. Oxacillin
- B. Doxycycline
- C. Ceftaroline
- D. Daptomycin
- E. Cefazolin

Correct Answer: E

Cefazolin or an antistaphylococcal penicillin (oxacillin or nafcillin) is recommended for this patient because the CandS results indicate MSSA. Since the patient develops a rash to penicillins, it would be acceptable to use cefazolin in this case.

Reference: <https://academic.oup.com/cid/article/59/2/e10/2895845/Practice-Guidelines-for-the-Diagnosis-and>

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**QUESTION 3**

What is the mechanism of action of the active ingredient found in Zyflo?

- A. Ultra-long-acting beta-2 agonist
- B. 5-lipoxygenase inhibitor
- C. Leukotriene D4 inhibitor
- D. Long-acting anticholinergic

Correct Answer: B

Zileuton is the active ingredient found in the medicine Zyflo; a medicine that works as a 5-lipoxygenase inhibitor. As such, zileuton inhibits leukotrienes (LTB<sub>4</sub>, LTC<sub>4</sub>, LTD<sub>4</sub>, and LTE<sub>4</sub>) formation, and is used for the maintenance treatment of asthma in patients older than the age of 12. In 2 percent of patients, it raises liver enzymes. Sinusitis and nausea are the most common side effects.

#### QUESTION 4

LN is 84 YOM who is in hospital for a back surgery. His height is 5 feet and 4 inches, weight 85 kg and NKDA.

His past medical history includes hypertension, diabetes mellitus, major depression, hypothyroidism and chronic back pain. Post-op day 1, LN's medication includes Dexamethasone 8mg iv q6h with taper dosing, Ondansetron 4mg iv q6h prn for N/V, Levothyroxine 0.075mg po daily, Lisinopril 10mg po daily, Citalopram 20mg po daily, Docusate sodium / Senna 1 tab po twice a day, Bisacodyl 10mg suppository daily prn for constipation, Famotidine 20mg iv q12hr, Metoclopramide 10mg iv q6h, Metformin 500mg po bid, D51/2NS with 20K at 125mls/hour and Hydromorphone PCA at 0.2mg/hour of basal rate, demand dose 0.1mg. lockout every 6min, one hour limit 2.2mg/hour. Pertinent morning labs includes serum creatinine 1.4mg/dl, Mg 1.5mg/dl, K 5.0mmol/L, Na 135mmol/L.

LN used 5 on-demand bolus doses from the hydromorphone PCA, how much hydromorphone did the patient get in 24 hours?

- A. 10mg
- B. 5.3mg
- C. 4.8mg
- D. 0.5mg
- E. 52.8mg

Correct Answer: B

0.2 mg/hour basal rate = 0.2mg/hour (24 hours) = 4.8 mg Demand dose of 0.1 mg  $\times$  5 = 0.5 mg 4.8 mg +

0.5 mg = 5.3 mg

#### QUESTION 5

Which of these ranges reflects normal serum creatinine levels?

- A. 0.2 - 0.5 mg/dL

B. 0.6 - 1.2 mg/dL

C. 1.5 - 2.0 mg/dL

D. 2.4 - 3.2 mg/dL

E. 3.5 - 5.0 mg/dL

Correct Answer: B

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