



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

North American Pharmacist Licensure Examination

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### QUESTION 1

What is the Osmolarity of NS with KCL 40 meq/L? (MW of KCl: 74.55 g/mol) (MW of NaCl: 58.44 g/mol)

- A. 800 mOsm/L
- B. 308 mOsm/L
- C. 1108 mOsm/L
- D. 830 mOsm/L
- E. 388 mOsm/L

Correct Answer: E

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### QUESTION 2

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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### QUESTION 3

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 20 mg iv q12hr, Metoclopramide 10mg iv q6h, Metformin 500mg po bid, D51/2NS with 20K at 125 mls/hour and Hydromorphone PCA at 0.2 mg/hour of basal rate, demand dose 0.1mg. lock-out 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. Day 3 post-operation LN's pain was much better and only used 3 mg of hydromorphone in the 24hrs.

Physician wants to change to oral morphine. What would be your best recommendation?



- A. Morphine SR 10mg po daily and morphine 5mg po q6h prn for breakthrough pain
- B. Morphine 60mg ER po daily and morphine 15mg po q6h prn breakthrough pain
- C. Morphine 30mg ER po q6hr and morphine 5mg q6h prn for breakthrough pain
- D. Morphine 15mg ER po q12hr and morphine 15mg po q6h prn for breakthrough pain
- E. Morphine 15mg ER po q12hr and morphine 5mg po q6h prn breakthrough pain

Correct Answer: E

Since LN used 3 mg of hydromorphone, this would be equivalent to a total of morphine 60 mg po daily. Since you would start with 70-80% of that dose, Morphine 15mg ER po q12hr and morphine 5mg po q6h prn breakthrough pain would be appropriate regimen.

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#### QUESTION 4

What indication usually requires higher dose of proton pump inhibitor?

- A. Helicobacter pylori
- B. Esophagitis
- C. Duodenal ulcer
- D. Stress ulcer prophylaxis
- E. Zollinger-Ellison syndrome

Correct Answer: E

The diagnosis of Zollinger-Ellison syndrome is suggested when plasma gastrin is > 1000 pg/ml and the basal acid output is > 15 mEq/h or when associated with a pH andlt; 2. The treatment is focused on controlling gastric acid hypersecretion and localisation of the tumour and its metastases. Proton pump inhibitors are the most effective antisecretory drugs and can be administered at high dosages

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#### QUESTION 5

Which of the following is/are ordinal data?

- A. NYHA I-IV
- B. Grade of breast cancer
- C. Sex
- D. Improvement Yes/No
- E. Alive or Dead

Correct Answer: B



Categorical data includes ordinal (ordered categories) and nominal (unordered categories). NYHA I-IV and grade of breast cancer are considered ordinal data because the categories for the answer choice are in order, you can have NYHA class I, II, III, or IV. Grade of breast cancers are also in order, grade 1, 2, or 3. Sex, Improvement Yes/No, Alive or Dead is considered nominal, unordered data because the answer choices are female or male, and do not have a set order.

Reference: <http://www.bmj.com/about-bmj/resources-readers/publications/statistics-square-one>

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