

1. A 68-year-old male presents with a worsening headache that has changed in intensity and character over the past week. He reports increased difficulty concentrating, occasional blurred vision, and a few instances of imbalance. What is the MOST appropriate next step in the evaluation of this patient?

- A. Order urgent neuroimaging to evaluate for intracranial pathology
- B. Recommend rest, hydration, and follow-up in 48–72 hours
- C. Initiate migraine treatment and refer to outpatient neurology
- D. Assess for depression and start antidepressant therapy

**Answer: A**

2. A 35-year-old female presents with pelvic pain that has progressively worsened over the past 5 days. She also reports fever, unintentional weight loss over the last month, and intermittent urinary incontinence. On the physical exam, she has suprapubic tenderness and decreased strength in her left lower extremity. Which of the following is the MOST appropriate clinical action?

- A. Refer to urology
- B. Prescribe antibiotics
- C. Recommend supportive care and follow-up in one week
- D. Order imaging and laboratory work

**Answer: D**

3. A 42-year-old female presents with lower back and pelvic pain for the past week. She reports weakness and numbness in her left foot and she had an unexpected episode of incontinence this morning. Upon examination, the NP observes weakness (3/5) in the left foot with dorsiflexion & plantarflexion and there is a diminished patellar reflex on the left. Which of the following is the MOST appropriate next step in the management of this patient?

- A. Initiate NSAIDs and schedule physical therapy
- B. Order a pelvic ultrasound and refer to gynecology
- C. Monitor symptoms and re-evaluate in 48 hours
- D. Obtain urgent MRI of the lumbosacral spine

**Answer: D**

4. A 36-year-old female presents with fever, myalgia, and confusion. She recently returned from a camping trip in the Midwest and reports multiple

tick bites. Physical exam reveals petechial rash on the wrists and ankles. Laboratory tests show thrombocytopenia and elevated liver enzymes. Which of the following is the most appropriate next step in management?

- A. Start doxycycline empirically
- B. Order serologic testing and wait for results before starting treatment
- C. Initiate corticosteroids for possible autoimmune encephalitis
- D. Refer for lumbar puncture to rule out meningitis

**Answer: A**

5. A 56-year-old male presents with a new-onset headache that is progressively worsening. He denies nausea or vomiting but does report recent unintentional weight loss and persistent fatigue. He smokes 3 cigarettes a day and drinks no alcohol. On physical examination, there is mild papilledema. Which of the following combinations of clinical features raises the GREATEST concern for a secondary headache disorder requiring further evaluation?

- A. Smoking and normal fundoscopy exam
- B. Headache in a male patient over 50
- C. Progressive headache, systemic symptoms, and papilledema
- D. Sudden onset headache described with nausea and vomiting

**Answer: C**

6. A patient reports new-onset confusion and difficulty recalling recent events along with a worsening headache. Which of the following best explains why these symptoms require immediate evaluation?

- A. They may indicate intracranial pathology or evolving neurological dysfunction
- B. They are common signs of medication noncompliance in elderly patients
- C. These symptoms are expected after bereavement and should be monitored over time
- D. They are likely related to dehydration and should improve with fluids

**Answer: A**

7. A 29-year-old patient presents for follow-up care one week after experiencing a spontaneous miscarriage. She reports feeling emotionally overwhelmed, fatigued, and having little appetite. In addition to gynecologic care, which of the following assessments is the most critical to prioritize at this stage to ensure comprehensive care without complications?