

ARIZONA STATE UNIVERSITY (ASU) NUR 325 HEALTH AND ILLNESS CONCEPTS I EXAM 1 PRACTICE (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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THE FULL VERSION STUDY GUIDE

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Table of Contents

Copyright	1
Table of Contents	2
Introduction	3
How to Use This Guide	4
Questions	5
Answers	8
Explanations	10
Next Steps	15

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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.

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!

Questions

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- 1. What is the purpose of measuring the peak level in therapeutic drug monitoring?**
 - A. To determine dose schedule
 - B. To ensure drug concentration stays within the therapeutic range and avoid toxicity
 - C. To measure onset time
 - D. To estimate half-life

- 2. Which is NOT a nurse's role during vaccination administration?**
 - A. Assess contraindications
 - B. Administer vaccines
 - C. Monitor for adverse reactions
 - D. Prescribe vaccines

- 3. What is the correct order of abdominal examination and why?**
 - A. Auscultate First
 - B. Palpate First
 - C. Inspect, Auscultate, Percuss, Palpate to Avoid Disturbing Bowel Sounds
 - D. Percuss First

- 4. Which of the following is NOT a nursing or collaborative intervention to manage pain?**
 - A. Schedule pain interventions as needed.
 - B. Be proactive (less medication to prevent pain than to treat pain).
 - C. Instruct clients to report recurring pain.
 - D. Avoid using any non-pharmacological measures.

- 5. Which statement best describes the musculoskeletal effect of chronic stress?**
 - A. Short-term muscle fatigue
 - B. Decreased muscle tension and atrophy
 - C. No musculoskeletal effects
 - D. Chronic stress can cause taut muscles, leading to pain in the head, neck, and shoulders

- 6. How does renal function influence acid-base balance and electrolyte homeostasis?**
- A. Hormones regulate all.
 - B. The liver does acid-base control; kidneys do nothing.
 - C. The lungs regulate bicarbonate; kidneys only excrete urea.
 - D. The kidneys regulate bicarbonate reabsorption and hydrogen ion excretion, maintaining pH; they also regulate potassium and other electrolytes; dysfunction can cause acidosis and electrolyte disturbances.
- 7. What characterizes the physiological effect of acute stress?**
- A. Response is delayed and mild
 - B. Response is immediate, often intense, and necessary for survival
 - C. No physiological change occurs
 - D. Only affects the skin
- 8. Which statement best defines the concept of stress?**
- A. Stress is a one-time event that ends with fight-or-flight activation
 - B. Stress is a continual process involving appraisal and coping that ideally ends in homeostasis and well-being
 - C. Stress only affects the immune system
 - D. Stress is purely psychological with no physiological changes
- 9. To recognize cognitive impairment, which components are used?**
- A. History and examination only
 - B. Physical examination only
 - C. Neuroimaging studies alone
 - D. History, examination, diagnostic tests, and mental status exam
- 10. Breakthrough pain is defined as what?**
- A. Pain that occurs only after medication stops.
 - B. Temporary flare-up of moderate to severe pain that occurs even when around-the-clock medication for persistent pain.
 - C. Pain only at night.
 - D. Pain that responds quickly to acetaminophen.

Answers

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

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Explanations

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1. What is the purpose of measuring the peak level in therapeutic drug monitoring?

- A. To determine dose schedule
- B. To ensure drug concentration stays within the therapeutic range and avoid toxicity**
- C. To measure onset time
- D. To estimate half-life

Peak level shows the highest concentration of the drug in the blood after a dose. Its main purpose is to ensure the drug stays within the therapeutic window and to avoid toxicity, especially for medicines with a narrow therapeutic index. If the peak is too high, the dose or dosing interval may be adjusted to prevent adverse effects; if it's within the target range, the regimen is appropriate. Onset time isn't determined by peak concentration, and half-life is estimated from multiple measurements over time to understand clearance. Dosing schedules come from overall pharmacokinetics and patient factors, not just a single peak value.

2. Which is NOT a nurse's role during vaccination administration?

- A. Assess contraindications
- B. Administer vaccines
- C. Monitor for adverse reactions
- D. Prescribe vaccines**

The main idea is understanding what tasks fall within a nurse's scope during vaccination administration. Nurses are responsible for screening and assessing for contraindications or precautions to ensure vaccines are safe for the patient, delivering the vaccine with correct technique, and monitoring the patient afterward for any adverse reactions or events. Prescribing vaccines, on the other hand, is not typically a nurse's role; prescribing requires prescriptive authority usually held by physicians or certain advanced practice clinicians, or is done via standing orders established by a licensed provider. So while assessing contraindications, administering the vaccine, and observing for adverse effects fit a nurse's duties, the act of prescribing vaccines does not.

3. What is the correct order of abdominal examination and why?

- A. Auscultate First
- B. Palpate First
- C. Inspect, Auscultate, Percuss, Palpate to Avoid Disturbing Bowel Sounds**
- D. Percuss First

The main idea is to assess the abdomen in a way that preserves the natural bowel activity and avoids causing misleading findings. Start with a careful visual inspection to note contour, symmetry, skin changes, and any distension or masses. Then listen with the stethoscope before touching the abdomen to hear bowel sounds and vascular sounds without having action on the gut that palpation or percussion might cause. After auscultation, use percussion to gauge what's under the surface—air-filled loops produce tympany, while dullness can indicate fluid, mass, or consolidated tissue, and you can estimate liver span or detect splenic enlargement. Finally, palpate to assess texture, tenderness, guarding, and masses, but doing so last minimizes the chance of artificially altering sounds or peristalsis and reduces patient discomfort that could skew findings. This sequence avoids disturbing bowel sounds and peristalsis, which is why inspecting, auscultating, percussing, and palpating in that order is the most accurate approach.

4. Which of the following is NOT a nursing or collaborative intervention to manage pain?

- A. Schedule pain interventions as needed.
- B. Be proactive (less medication to prevent pain than to treat pain).
- C. Instruct clients to report recurring pain.

D. Avoid using any non-pharmacological measures.

Pain management works best with a multimodal approach that combines medications with non-pharmacologic strategies such as positioning, relaxation, distraction, heat or cold, music, and massage. Nursing and collaborative interventions are about implementing and coordinating all parts of that plan, not restricting yourself to medications alone. Scheduling pain interventions as needed, taking a proactive stance to prevent pain, and teaching patients to report recurring pain are all practical, collaborative actions that help control pain effectively and tailor care to the individual. The option that says to avoid using any non-pharmacologic measures goes against this holistic approach. It would limit relief and overlook safe, complementary methods that can reduce pain intensity and medication needs. That's why it isn't considered a nursing or collaborative intervention.

5. Which statement best describes the musculoskeletal effect of chronic stress?

- A. Short-term muscle fatigue
- B. Decreased muscle tension and atrophy
- C. No musculoskeletal effects

D. Chronic stress can cause taut muscles, leading to pain in the head, neck, and shoulders

Chronic stress keeps the body's stress response activated, which raises muscle tone and causes muscles to stay contracted for longer periods. That persistent contraction most often affects the muscles of the head, neck, and shoulders, producing taut, aching muscles and headaches—classic tension-type headaches and shoulder/neck pain. Over time, reduced blood flow from continuous contraction can worsen discomfort and limit movement. This fits the scenario of a musculoskeletal effect from ongoing stress better than short-term fatigue, muscle thinning or atrophy, or no effect. Chronic stress can also contribute to jaw clenching (bruxism), which can worsen facial and neck muscle pain.

6. How does renal function influence acid-base balance and electrolyte homeostasis?

- A. Hormones regulate all.
- B. The liver does acid-base control; kidneys do nothing.
- C. The lungs regulate bicarbonate; kidneys only excrete urea.
- D. The kidneys regulate bicarbonate reabsorption and hydrogen ion excretion, maintaining pH; they also regulate potassium and other electrolytes; dysfunction can cause acidosis and electrolyte disturbances.**

The kidneys keep acid-base balance and electrolyte levels by handling hydrogen ions and bicarbonate, and by tightly regulating potassium and other electrolytes. In the proximal tubule, most filtered bicarbonate is reabsorbed as hydrogen ions secreted into the tubule combine with bicarbonate to form water and CO₂, which is then turned back into bicarbonate and returned to the blood. In the distal nephron and collecting ducts, the kidney also generates new bicarbonate while excreting hydrogen ions, partly through ammonium production, which adds to the body's buffer pool. This combination of reclaiming and generating bicarbonate, along with hydrogen ion excretion, maintains a near-normal blood pH. Potassium balance is closely linked to this process. The distal nephron often excretes potassium as it handles sodium and responds to aldosterone; shifts in hydrogen ions can move potassium in or out of cells, influencing serum potassium levels. The kidneys also regulate other electrolytes—sodium, chloride, calcium, phosphate, and magnesium—and dysfunction can disrupt these balances, leading to hyperkalemia, hyperphosphatemia, hypocalcemia, and fluid disturbances. When kidney function declines, the ability to excrete acid and generate bicarbonate diminishes, causing metabolic acidosis, and accompanying electrolyte disturbances (notably abnormal potassium levels) that reflect impaired renal regulation.

7. What characterizes the physiological effect of acute stress?

- A. Response is delayed and mild
- B. Response is immediate, often intense, and necessary for survival**
- C. No physiological change occurs
- D. Only affects the skin

Acute stress triggers an immediate, robust activation of the sympathetic nervous system to prepare the body for rapid action in response to a threat. This "fight-or-flight" response releases catecholamines that quickly raise heart rate and blood pressure, dilate airways, redirect blood to muscles, and mobilize glucose and energy stores—changes that occur right away and are often intense because they're meant to help you survive a sudden danger. That's why the statement describing the response as immediate, often intense, and necessary for survival is the best fit. The other ideas don't match how the body responds to acute stress: the response is not delayed or mild; physiological changes do occur, not just in the skin; and the reaction isn't limited to the skin.

8. Which statement best defines the concept of stress?

- A. Stress is a one-time event that ends with fight-or-flight activation
- B. Stress is a continual process involving appraisal and coping that ideally ends in homeostasis and well-being**
- C. Stress only affects the immune system
- D. Stress is purely psychological with no physiological changes

Stress is a dynamic, ongoing process, not a single moment. It starts with how a person appraises a demand as threatening or challenging and then the coping strategies they choose to manage it. This appraisal and coping loop can repeat as long as the demand persists or resources shift, making stress a continual process rather than a one-time event. When coping is effective, the body returns toward baseline, supporting homeostasis and well-being. When coping is inadequate or the stress is chronic, the body's stress response can become dysregulated and contribute to health problems. That's why the best statement captures both the ongoing nature and the interaction between perception and coping, with the goal of maintaining balance and well-being. The other options are limited: stress is not just a one-shot event ending with fight-or-flight; it affects more than just the immune system; and it involves physiological changes, not just psychological experiences.

9. To recognize cognitive impairment, which components are used?

- A. History and examination only
- B. Physical examination only
- C. Neuroimaging studies alone
- D. History, examination, diagnostic tests, and mental status exam**

Recognizing cognitive impairment comes from an integrated assessment that uses four elements together. Gathering history, including onset, progression, and effects on daily functioning, often with input from family or caregivers, helps establish the pattern of decline and possible reversible factors. A thorough physical and neurological examination focuses attention on any focal deficits, motor signs, or gait issues that point to specific diseases. The mental status exam provides a structured review of cognitive domains—orientation, attention, memory, language, visuospatial skills, and executive function—and helps quantify impairment and monitor changes over time. Diagnostic tests, including laboratory studies to identify reversible contributors (such as thyroid problems, vitamin deficiencies, or metabolic disorders) and imaging studies to assess brain structure and rule out other causes, complete the picture. By combining history, examination, mental status assessment, and diagnostic tests, you obtain a comprehensive view that supports accurate recognition and characterization of cognitive impairment.

10. Breakthrough pain is defined as what?

- A. Pain that occurs only after medication stops.
- B. Temporary flare-up of moderate to severe pain that occurs even when around-the-clock medication for persistent pain.**
- C. Pain only at night.
- D. Pain that responds quickly to acetaminophen.

Breakthrough pain is a temporary flare-up of moderate to severe pain that occurs even when a person is already receiving around-the-clock medication for persistent pain. It rises above the baseline level controlled by the regular regimen and tends to be rapid in onset and short in duration. This is different from pain that only appears when the regular dose wears off (end-of-dose or opioid failure), and it's not tied to a specific time like nighttime. It also isn't defined by how it responds to acetaminophen; breakthrough pain often requires a fast-acting rescue medication to bring the spike under control. Understanding this helps in recognizing when a patient needs a rapid-onset analgesic to manage a sudden pain surge on top of stable, ongoing pain control.

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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