ARRT PATIENT CARE PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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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.

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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!

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Questions

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1. Which range of blood urea nitrogen (BUN) is considered normal?

A. 0.6 to 1.5 mg/100mL

B. 4.5 to 6 mg/100mL

C. 8 to 25 mg/100mL

D. 12 to 18 mg/100mL

2. What type of shock is commonly associated with pulmonary embolism or myocardial infarction?

A. Neurogenic shock

B. Cardiogenic shock

C. Hypovolemic shock

D. Septic shock

3. What must be done if a patient has a viable airway obstruction but is conscious?

A. Perform chest compressions

B. Administer supplemental oxygen

C. Encourage the patient to cough

D. Initiate the Heimlich maneuver

4. Which of the following procedures requires an intrathecal injection?

A. IVP

B. myelogram

C. lymphangiogram

D. CT scan

5. The least toxic contrast medium listed below is:

A. barium sulfate

B. metrizamide

C. ethiodized oil

D. meglumine diatriazoate

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6. The condition that allows blood to shunt between the right and left ventricles is called:

A. Patent ductus arteriosus

B. Coarctation of the aorta

C. Atrial septal defect

D. Ventricular septal defect

7. Which legal phrase describes a situation where both the health care provider's and the patient's actions caused an injury?

A. Intentional misconduct

B. Contributory negligence

C. Gross negligence

D. None of the above

8. What is the most common means of spreading infection?

A. Improper disposal of contaminated waste

B. Instruments that are improperly sterilized

C. Soiled linens

D. Human hands

9. All the following rules regarding proper hand washing technique are correct except:

A. keep hands and forearms lower than elbows

B. use paper towels to turn water on

C. avoid using hand lotions whenever possible

D. carefully wash all surfaces and between fingers

10. A patient in a recumbent position with the head lower than the feet is said to be in which of the following positions?

A. Trendelenburg

B. Fowler

C. Sims

D. Stenver

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Answers

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

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Explanations

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1. Which range of blood urea nitrogen (BUN) is considered normal?

A. 0.6 to 1.5 mg/100mL

B. 4.5 to 6 mg/100mL

C. 8 to 25 mg/100mL

D. 12 to 18 mg/100mL

The range of blood urea nitrogen (BUN) that is considered normal is between 8 to 25 mg/100mL. This measurement is used to evaluate kidney function and the body's protein metabolism. BUN levels can reflect various conditions affecting the kidneys and overall health when they are outside the normal range. Values falling within this specified range indicate that the kidneys are effectively filtering urea from the bloodstream, which is a waste product formed from the breakdown of protein. If BUN levels are within this range, it suggests normal kidney function and proper protein metabolism. Other values provided in the options fall outside the accepted normal range for BUN. The first option represents levels that are too low, while the second option is at the lower threshold but does not encapsulate the full range of normal values. The last option, while showing valid BUN levels, is also narrow and does not represent the complete normal range as accurately as the correct choice does.

2. What type of shock is commonly associated with pulmonary embolism or myocardial infarction?

A. Neurogenic shock

B. Cardiogenic shock

C. Hypovolemic shock

D. Septic shock

Pulmonary embolism and myocardial infarction are conditions that directly affect the heart's ability to pump blood effectively. In the case of a myocardial infarction, part of the heart muscle is damaged due to a lack of blood supply, which leads to inadequate cardiac output and can result in cardiogenic shock. Similarly, a pulmonary embolism obstructs blood flow in the lungs, which can also impair the heart's function and lead to cardiogenic shock as the heart struggles to maintain adequate circulation. Cardiogenic shock is characterized by the heart's inability to pump sufficient blood to meet the body's needs, leading to signs of tissue hypoperfusion, such as low blood pressure, cool extremities, and altered mental status. This type of shock is particularly relevant in scenarios where there is intrinsic heart failure due to damage from conditions like a heart attack or a severe blockage like a pulmonary embolism. The other types of shock, such as neurogenic shock, hypovolemic shock, and septic shock, have different mechanisms and underlying causes. Neurogenic shock is primarily caused by a loss of sympathetic tone due to spinal cord injuries, hypovolemic shock results from significant fluid loss, and septic shock arises from severe infections that lead to system-wide inflammation and vasod

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3. What must be done if a patient has a viable airway obstruction but is conscious?

A. Perform chest compressions

B. Administer supplemental oxygen

C. Encourage the patient to cough

D. Initiate the Heimlich maneuver

When a patient has a viable airway obstruction but is conscious, the most appropriate action is to initiate the Heimlich maneuver, also known as abdominal thrusts. This maneuver is designed specifically to dislodge an obstruction in the airway by applying pressure under the diaphragm, which creates an upward force on the lungs. This force expels air and, ideally, the object causing the obstruction. Encouraging the patient to cough is generally useful for less severe obstructions where the patient can still breathe, speak, and cough effectively. However, if the obstruction is significant enough to cause distress and risk of respiratory failure, simply encouraging cough may not be effective or sufficient. Performing chest compressions is appropriate for cases where the patient is unresponsive and not breathing, which is not the situation for a conscious patient with a viable airway obstruction. Similarly, administering supplemental oxygen is not indicated in this urgent situation focused on clearing the airway, as it does not address the obstructive issue directly. Initiating the Heimlich maneuver directly targets the resolution of the obstruction, making it the most effective immediate response for a conscious patient experiencing a significant airway blockage.

4. Which of the following procedures requires an intrathecal injection?

A. IVP

B. myelogram

C. lymphangiogram

D. CT scan

The procedure that requires an intrathecal injection is a myelogram. In this procedure, a contrast agent is injected directly into the spinal canal to allow for visualization of the spinal cord and nerve roots through imaging techniques such as X-ray or CT. The intrathecal injection places the contrast media in close proximity to the structures being examined, enhancing the detail and clarity of the images. In contrast, an IVP (Intravenous Pyelogram) involves injecting a contrast agent into a vein, primarily to visualize the kidneys, ureters, and bladder. A lymphangiogram uses an injection into lymphatic vessels, and a CT scan can utilize various contrast methods, but none of these require an intrathecal approach. The myelogram's specific need for direct access to the cerebrospinal fluid space through an intrathecal injection clearly distinguishes it as the correct answer.

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5. The least toxic contrast medium listed below is:

A. barium sulfate

B. metrizamide

C. ethiodized oil

D. meglumine diatriazoate

The choice of metrizamide as the least toxic contrast medium is based on its chemical composition and the way it interacts with the body. Metrizamide is classified as an iodinated water-soluble contrast agent. This means it is designed to be more easily eliminated from the body compared to other contrast agents, which can minimize the risks of potential toxicity. In practice, metrizamide, especially in its non-ionic form, tends to produce fewer adverse reactions and has a lower incidence of complications compared to ionic contrast agents, as it is less likely to cause discomfort or allergic responses. The chemical properties of metrizamide allow for better tolerance by the patients, making it a safer option in imaging procedures, particularly for those with a history of contrast media responses. Other contrast media like barium sulfate, ethiodized oil, and meglumine diatriazoate have specific indications and greater risks associated with their use. Barium sulfate can cause constipation and, in certain cases, bowel obstruction if not properly managed. Ethiodized oil, while useful in certain imaging techniques, is fat-soluble and can lead to complications if it extravasates into the body tissues. Meglumine diatriazoate, commonly known as Diatrizoate,

6. The condition that allows blood to shunt between the right and left ventricles is called:

A. Patent ductus arteriosus

B. Coarctation of the aorta

C. Atrial septal defect

D. Ventricular septal defect

The condition that allows blood to shunt between the right and left ventricles is known as a ventricular septal defect (VSD). This congenital heart defect occurs when there is a hole in the septum, the wall separating the two ventricles of the heart. Because of this defect, oxygenated blood from the left ventricle can flow into the right ventricle instead of moving out to the body. This abnormal flow can lead to an over-circulation of blood in the lungs and an increase in pulmonary blood flow, which can cause various complications over time, such as heart failure or pulmonary hypertension. The presence of a VSD can be detected through physical examinations, such as a characteristic heart murmur, and confirmed through imaging studies like echocardiography. In contrast, the other options represent different types of cardiovascular abnormalities. Patent ductus arteriosus involves the persistence of a blood vessel that usually closes after birth, allowing blood to flow between the aorta and pulmonary artery. Coarctation of the aorta refers to a narrowing of the aorta, leading to increased blood pressure before the constriction and low blood pressure beyond it. An atrial septal defect is a hole in the wall separating the atria,

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7. Which legal phrase describes a situation where both the health care provider's and the patient's actions caused an injury?

A. Intentional misconduct

B. Contributory negligence

C. Gross negligence

D. None of the above

The scenario presented involves both the actions of the healthcare provider and the patient contributing to an injury, which aligns with the concept of contributory negligence. This legal phrase refers to a situation where an individual's own negligence played a role in the harm they experienced. In a case of contributory negligence, the patient's actions, whether through their own decision-making or failure to follow medical advice, can reduce or eliminate the liability of the healthcare provider. In contrast, intentional misconduct refers to actions taken with the intent to harm, and gross negligence is a more severe form of negligence that demonstrates a reckless disregard for the safety of others. Neither of these accurately describes a situation where both parties are responsible. The phrase "none of the above" is not applicable since contributory negligence accurately captures the shared responsibility in this scenario. Therefore, the recognition of contributory negligence is fundamental in understanding legal accountability in healthcare contexts, where both the patient's and caregiver's actions can lead to an injury.

8. What is the most common means of spreading infection?

A. Improper disposal of contaminated waste

B. Instruments that are improperly sterilized

C. Soiled linens

D. Human hands

Human hands are recognized as the most common means of spreading infection because they can easily carry pathogens from one surface to another and from one person to another. The skin naturally harbors bacteria, and when hands come into contact with contaminated surfaces, they acquire these pathogens. This is why proper hand hygiene, including frequent washing with soap and water or using alcohol-based hand sanitizers, is emphasized in infection control protocols. Although other choices, such as improper disposal of contaminated waste, improperly sterilized instruments, and soiled linens, also pose significant risks for spreading infections, human hands are more frequently involved in the transmission process. They act as the intermediary for transferring germs during routine activities such as touching surfaces, shaking hands, or handling food, which increases the likelihood of infection spread. The role of hands in the transmission of infectious agents is particularly highlighted in healthcare settings, where handwashing before patient interactions is crucial for preventing healthcare-associated infections.

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9. All the following rules regarding proper hand washing technique are correct except:

A. keep hands and forearms lower than elbows

B. use paper towels to turn water on

C. avoid using hand lotions whenever possible

D. carefully wash all surfaces and between fingers

Hand hygiene is a critical component of infection control in healthcare settings. Among the commonly upheld guidelines for proper hand washing technique, the use of hand lotions or moisturizers is often recommended, particularly in environments where frequent hand washing may lead to skin irritation or dryness. Using hand lotions helps keep the skin intact and can minimize the risk of developing dermatitis, which can compromise skin integrity and potentially increase the risk of infection. Therefore, avoiding the use of hand lotions is not aligned with current best practices that emphasize skin health. The other practices listed, such as keeping hands and forearms lower than the elbows, using paper towels to turn the water on, and carefully washing all surfaces including between the fingers, are all consistent with recommended hand hygiene techniques. These practices help maintain effective hand hygiene by preventing recontamination and ensuring that all areas of the hands are cleaned properly.

10. A patient in a recumbent position with the head lower than the feet is said to be in which of the following positions?

A. Trendelenburg

B. Fowler

C. Sims

D. Stenver

When a patient is in a recumbent position with the head lower than the feet, the position is referred to as Trendelenburg. This position is typically utilized in various medical situations, often to enhance venous return to the heart, which can be beneficial in cases of shock or hypotension. The Trendelenburg position helps to improve blood flow to vital organs by temporarily redistributing blood volume in a way that can stabilize patients experiencing certain medical conditions. It may also be used during surgical procedures to provide better access to the pelvis and abdominal organs. In contrast, the Fowler position involves the patient sitting upright, and Sim's position is a variation of the lateral position used for specific examinations or procedures. The Stenver position is not a standard term used in patient positioning within the healthcare context. Understanding these distinctions helps clarify the unique application and utilities of each position in patient care.

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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:

https://arrt-patientcare.examzify.com

We wish you the very best on your exam journey. You've got this!

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