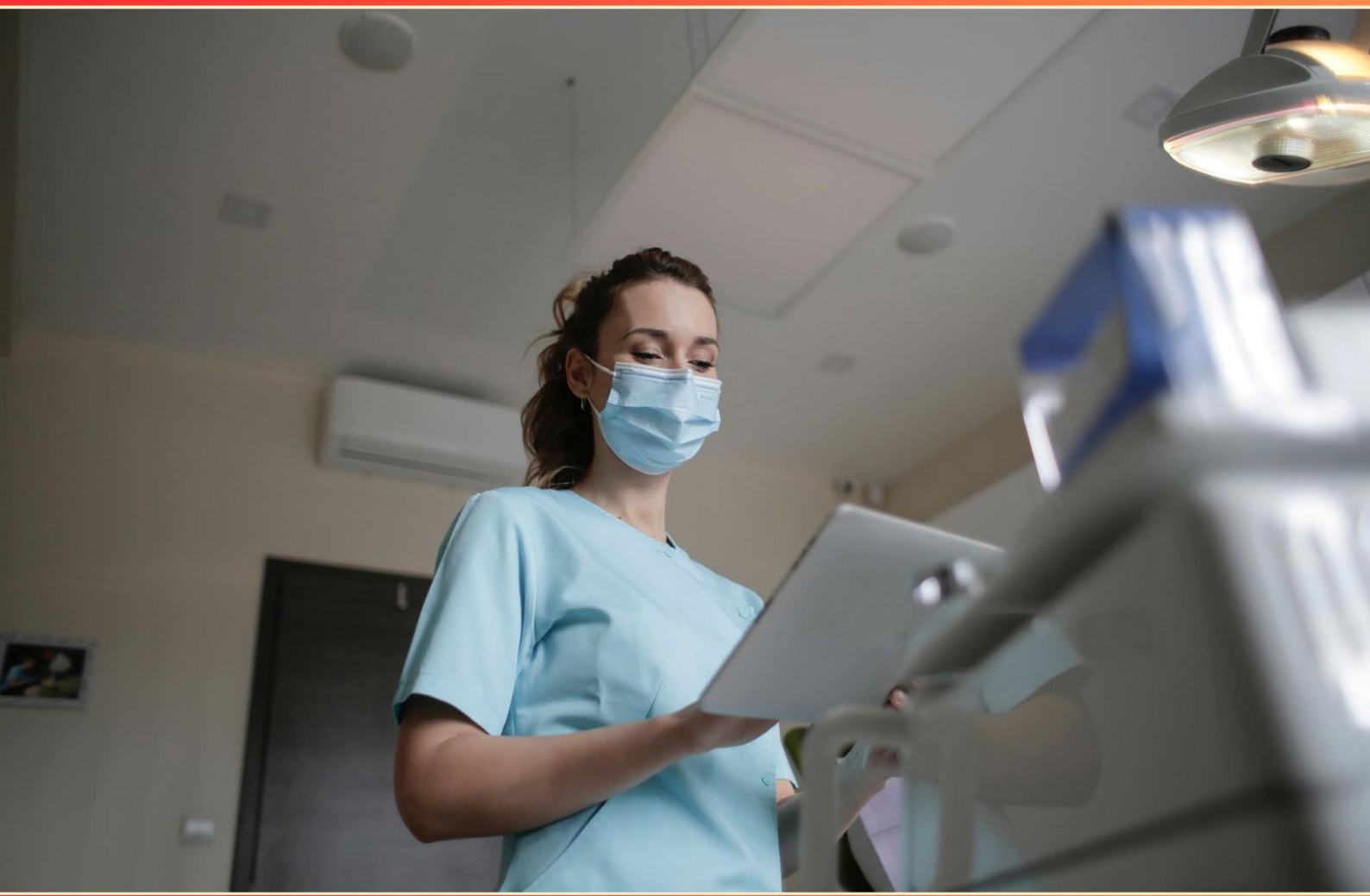
ATI PROFESSIONAL NURSING PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR THE FULL VERSION STUDY GUIDE

https://atiprofessionalnursing.examzify.com

Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.

ALL RIGHTS RESERVED.

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain accurate, complete, and timely information about this product from reliable sources.

SAMPLE

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 16

SAMPLE

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.

SAMPLE

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!

SAMPLE

Questions

SAMPLE

1. **What finding in a newborn delivered at 37 weeks requires further intervention?**

   A. Vesicular rash

   B. Respiratory rate 54/min

   C. Abdominal distention

   D. Heart rate 142/min

2. **What is the main reason for using a side-lying position for a client with a chest tube experiencing discomfort?**

   A. To allow for better drainage of fluid

   B. To improve oxygenation

   C. To relieve tension and pressure

   D. To facilitate easier breathing

3. **Clinical reasoning requires the nurse to be able to do which of the following?**

   A. Perform nursing skills based on best practice standards.

   B. Separate higher from lower level thinking.

   C. Use learning strategies that are appropriate for learning style.

   D. Separate relevant from irrelevant data.

4. **If a nurse manager suspects a colleague is under the influence of a substance, what should the manager do first?**

   A. Provide personal counseling for substance use

   B. Arrange transportation for the nurse to go home

   C. Schedule a meeting with the nurse

   D. Notify the nursing board

5. **What description should be used to measure integrity in an evaluation form?**

   A. Utilizes good decision-making

   B. Performs wound care successfully

   C. Follows standards and protocols

   D. Communicates effectively with clients

SAMPLE

6. What action by a nurse demonstrates understanding of professional boundaries when invited to social events by a client's family?

A. The nurse accepts the invitation but avoids future social interactions with the client.

B. The nurse declines the invitation but explains that he will accept closer to discharge from home health.

C. The nurse declines the invitation for dinner but offers to extend the length of each home visit.

D. The nurse accepts the invitation and discusses client information over dinner.

7. What is a common sign of acute otitis media in toddlers that a nurse should monitor?

A. High fever

B. Persistent crying

C. Difficulties in hearing

D. Ear pulling

8. What is an example of plagiarism in professional writing?

A. Using quotation marks for a direct quote

B. Referencing an author during paraphrasing

C. Reusing content from a previously published article

D. Summarizing someone else's work accurately

9. During a staff discussion, which function of the nurse practice act should be emphasized?

A. Defines the power of the state board of nursing

B. Defines nursing practice to protect the public

C. Defines the requirement for licensure

D. Outlines professional development for nurses

10. Which statement indicates that a staff nurse is acting as a change agent?

A. We will need ongoing evaluation of the plan if we use evidence-based practice

B. We can spend less time planning if we use evidence-based practice

C. We will use evidence-based practice to create a new plan of care that is effective

D. We should follow traditional methods to ensure the best outcomes

SAMPLE

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. What finding in a newborn delivered at 37 weeks requires further intervention?

A. Vesicular rash

B. Respiratory rate 54/min

C. Abdominal distention

D. Heart rate 142/min

In a newborn delivered at 37 weeks, abdominal distention is a significant finding that requires further intervention. This symptom can indicate potential gastrointestinal issues, such as ileus, bowel obstruction, or other anomalies affecting the digestive tract. In newborns, especially those who are just transitioning to life outside the womb, any signs of abdominal distention can be serious because it may suggest that the intestines are not functioning properly or that there is an obstruction which can lead to significant complications if not addressed promptly. Other findings such as a vesicular rash could be benign or related to common neonatal conditions and may not indicate an immediate threat. A respiratory rate of 54 breaths per minute, while it is important to monitor, falls within the normal range for a newborn, as normal respiratory rates for infants can be between 30 to 60 breaths per minute. Likewise, a heart rate of 142 beats per minute is also within the expected normal range for a newborn, which typically ranges from 120 to 160 beats per minute. Thus, abdominal distention stands out as the most concerning finding that requires additional assessment and intervention.

2. What is the main reason for using a side-lying position for a client with a chest tube experiencing discomfort?

A. To allow for better drainage of fluid

B. To improve oxygenation

C. To relieve tension and pressure

D. To facilitate easier breathing

Using a side-lying position for a client with a chest tube experiencing discomfort primarily serves to relieve tension and pressure. When a patient is positioned on their side, this posture can alleviate pressure on areas where the chest tube is placed and comfort the surrounding tissues, thus diminishing feelings of discomfort or pain. Additionally, side-lying can help the lungs expand more fully on the side opposite to the tube, which is beneficial if the tube is draining air or fluid. This position may reduce pressure on the diaphragm and facilitate easier movement of the thoracic structures, providing a more relaxed state for the patient. In many cases, comfort is significantly enhanced in this position, leading to an overall improved experience for the person receiving care. While there are other potential benefits to certain positions, such as promoting better drainage or easing breathing, the primary aim of positioning a client on their side in this specific scenario is to specifically address discomfort.

SAMPLE

3. Clinical reasoning requires the nurse to be able to do which of the following?

A. Perform nursing skills based on best practice standards.

B. Separate higher from lower level thinking.

C. Use learning strategies that are appropriate for learning style.

D. Separate relevant from irrelevant data.

The ability to separate relevant from irrelevant data is a crucial aspect of clinical reasoning in nursing. This skill allows a nurse to focus on the most important information when assessing a patient, making decisions about care, and developing nursing interventions. By distinguishing which pieces of information directly impact a patient's condition or treatment plan, the nurse can prioritize actions that will lead to better patient outcomes. In clinical settings, nurses often encounter a vast amount of data related to patient history, symptoms, and medical tests. Critical thinking enables nurses to sift through this information efficiently, filtering out data that do not contribute to understanding the patient's current situation or guiding appropriate care. This ability not only helps in making sound clinical judgments but also enhances patient safety and quality of care. The other options, while related to nursing practice, do not encapsulate the essence of clinical reasoning as directly as the ability to discern relevant from irrelevant information. Skills in performing nursing procedures or applying learning strategies are important but pertain more to the execution of nursing care rather than the underpinnings of clinical decision-making.

4. If a nurse manager suspects a colleague is under the influence of a substance, what should the manager do first?

A. Provide personal counseling for substance use

B. Arrange transportation for the nurse to go home

C. Schedule a meeting with the nurse

D. Notify the nursing board

When a nurse manager suspects a colleague is under the influence of a substance, the first priority should be the safety of the individual and their ability to perform their duties effectively. Arranging transportation for the nurse to go home ensures that they are not put in a position where they could cause harm to themselves or others if they remain at work. This action demonstrates concern for the welfare of the colleague and addresses the immediate risk of impaired performance in a clinical setting. Taking immediate action to provide a safe means for the nurse to leave the workplace helps to minimize potential hazards that could arise from their impaired state. It is critical to ensure that colleagues who may be under the influence are not put in a position where they could endanger patient safety or their own well-being. Once the nurse is safely away from the workplace, further steps, such as a more formal assessment of the situation or notifying appropriate authorities, can be considered.

SAMPLE

5. What description should be used to measure integrity in an evaluation form?

A. Utilizes good decision-making

B. Performs wound care successfully

C. Follows standards and protocols

D. Communicates effectively with clients

The description that best measures integrity in an evaluation form is the adherence to standards and protocols. Integrity in a professional context refers to the moral and ethical principles that guide a person's actions. When a healthcare professional follows established standards and protocols, it indicates a commitment to ethical practice and consistency in delivering safe and effective care. This adherence not only protects patient welfare but also reinforces trust and accountability within the healthcare team and the wider community. In comparison to the other options, while good decision-making, successful wound care performance, and effective communication are certainly important competencies, they do not directly encapsulate the concept of integrity. Good decision-making might reflect on judgment but doesn't necessarily guarantee adherence to ethical standards. Successful wound care performance is a demonstration of skill rather than a measure of ethical behavior. Effective communication is crucial for patient care but may not inherently reflect a person's integrity or moral compass. Therefore, following standards and protocols stands out as the most relevant measure of integrity.

6. What action by a nurse demonstrates understanding of professional boundaries when invited to social events by a client's family?

A. The nurse accepts the invitation but avoids future social interactions with the client.

B. The nurse declines the invitation but explains that he will accept closer to discharge from home health.

C. The nurse declines the invitation for dinner but offers to extend the length of each home visit.

D. The nurse accepts the invitation and discusses client information over dinner.

Declining the invitation for dinner while offering to extend the duration of each home visit demonstrates a solid understanding of professional boundaries. It reflects the nurse's commitment to maintaining a professional relationship with the client and their family, prioritizing the therapeutic relationship over personal interactions. By choosing not to engage in social activities outside of the professional context, the nurse upholds the ethical standards of nursing practice, which emphasize the importance of maintaining clear boundaries to ensure that the care provided remains objective and focused on the client's needs. This approach supports the idea that while the nurse is supportive and approachable, personal relationships that could lead to potential conflicts of interest or compromised professional integrity should be avoided. In contrast, the acceptance of the invitation with plans to avoid future interactions or the suggestion of wanting to engage closer to discharge could send mixed messages regarding the professional role. Likewise, extending home visits does not equate to engaging socially outside of the professional setting, which may blur the lines of the nurse-client relationship. Discussing client information during a social dinner clearly violates confidentiality and professional ethics, thereby reinforcing the importance of boundaries in nursing practice.

SAMPLE

7. What is a common sign of acute otitis media in toddlers that a nurse should monitor?

A. High fever

B. Persistent crying

C. Difficulties in hearing

D. Ear pulling

A common sign of acute otitis media in toddlers is ear pulling. This behavior often indicates discomfort or pain in the ear, as toddlers may instinctively pull at their ears to signal the location of their symptoms. Ear pulling, along with other signs of discomfort, is an important observation for nurses when assessing a child with suspected otitis media, as it can help corroborate other clinical findings and guide treatment decisions. While high fever and persistent crying might also be observed in some cases, they are more general signs of illness and can be indicative of various conditions. Difficulties in hearing may occur as a secondary effect of the fluid accumulation associated with otitis media, but it is not typically the first or most noticeable symptom in toddlers. Thus, ear pulling is a more direct and specific behavioral response to the discomfort caused by the ear infection.

8. What is an example of plagiarism in professional writing?

A. Using quotation marks for a direct quote

B. Referencing an author during paraphrasing

C. Reusing content from a previously published article

D. Summarizing someone else's work accurately

Plagiarism in professional writing occurs when an individual uses someone else's ideas, expressions, or work without proper acknowledgment. Reusing content from a previously published article without appropriate citation is a clear example of plagiarism. This is because the writer presents the previously published work as their own, failing to credit the original author for their contributions. Even if the content is reused word-for-word or slightly modified, it still constitutes an infringement on copyright and ethical writing practices, as the original source does not receive the recognition it deserves. In contrast, using quotation marks for a direct quote, referencing an author during paraphrasing, and accurately summarizing someone else's work are all practices that uphold academic integrity. These actions involve proper acknowledgment of sources, thus avoiding plagiarism. The inclusion of direct quotes and citations indicates respect for original authorship and ensures clarity about where the information or ideas are coming from.

SAMPLE

9. During a staff discussion, which function of the nurse practice act should be emphasized?

A. Defines the power of the state board of nursing

B. Defines nursing practice to protect the public

C. Defines the requirement for licensure

D. Outlines professional development for nurses

The emphasis on defining nursing practice to protect the public is crucial because it highlights the primary role of the nurse practice act. This legislation is designed to ensure that nursing practices are safe, competent, and ethical, thereby safeguarding public health and well-being. By clearly outlining what constitutes nursing practice, the act establishes standards that help prevent unqualified individuals from providing care, ultimately aiming to enhance patient safety and trust in the healthcare system. While other aspects of the nurse practice act, such as defining the power of the state board of nursing, defining requirements for licensure, and outlining professional development, are also important, they serve supportive roles within the broader context of public protection. The core mission remains focused on ensuring that only qualified practitioners provide nursing care, reinforcing the profession's accountability and commitment to patient care standards. This protective function fosters public confidence in healthcare services, making it a vital point of discussion during staff meetings.

10. Which statement indicates that a staff nurse is acting as a change agent?

A. We will need ongoing evaluation of the plan if we use evidence-based practice

B. We can spend less time planning if we use evidence-based practice

C. We will use evidence-based practice to create a new plan of care that is effective

D. We should follow traditional methods to ensure the best outcomes

The selected statement demonstrates a nurse acting as a change agent by emphasizing the implementation of evidence-based practice to develop a new and effective plan of care. A change agent is someone who promotes and facilitates alterations to established practices through innovation and improvement. By advocating for the use of evidence-based practices, which rely on the best available evidence to inform clinical decisions, the nurse is initiating a crucial transformation in patient care. Change agents are typically focused on enhancing care delivery and outcomes by adopting new strategies or methodologies that have demonstrated efficacy. This statement clearly indicates the nurse's commitment to revising and enhancing the care plan based on empirical evidence, signaling leadership in improving patient outcomes. Statements about ongoing evaluation and planning time do not directly reflect the proactive role of a change agent in initiating change; rather, they discuss important considerations but lack the emphasis on creating a new and improved approach. The mention of traditional methods also suggests a resistance to change, which is contrary to the essence of being a change agent.

SAMPLE

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://atiprofessionalnursing.examzify.com

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

SAMPLE