ATI RN COMPREHENSIVE PREDICTOR PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR THE FULL VERSION STUDY GUIDE

https://atirncomprehensivepredictor.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 is the appropriate nursing action for a client who reports dizziness upon changing positions?

A. Notify the physician immediately.

B. Reassure the client and document the incident.

C. Assess the client's blood pressure and heart rate.

D. Encourage the client to rest for a while.

2. How can dehydration affect preterm labor?

A. Dehydration can decrease uterine contractions.

B. Dehydration can increase the risk of preterm labor.

C. Dehydration has no effect on preterm labor.

D. Dehydration may prolong labor duration.

3. What is the first action a nurse should take when planning a teaching session for a postoperative client?

A. Review the surgical procedure with the client

B. Determine the client's current pain level

C. Schedule a follow-up visit

D. Gather educational materials

4. What position should a child be placed in after receiving gastrostomy tube feedings?

A. The child should be placed in a supine position

B. The child should be placed in a lateral position

C. The child should not be placed in a supine position

D. The child should be placed in a sitting position

5. What is one of the basic principles of infection control in healthcare settings?

A. Gloves should be worn only during surgical procedures

B. Hand hygiene is essential before and after patient contact

C. Face masks are the only required protective gear

D. Infection control does not apply to non-invasive procedures

SAMPLE

6. What might indicate the presence of fluid overload in a patient receiving blood transfusions?

A. Increased blood pressure

B. Widening pulse pressure

C. Effective oxygenation

D. Shortness of breath

7. How should a nurse respond when a client is newly diagnosed with pancreatic cancer and asks questions?

A. Avoid discussing difficult topics

B. Provide information and support

C. Redirect the client to another healthcare provider

D. Keep responses brief to avoid overwhelming

8. What is a common misconception about absent seizures?

A. They are always associated with muscle spasms

B. They can be mistaken for daydreaming

C. They only occur in children

D. They last for several minutes

9. What should a nurse include in the care plan for a client with angina?

A. Prescribe medications only during episodes

B. Educate about lifestyle changes to manage risk factors

C. Advise complete bed rest

D. Suggest regular intensive exercise

10. What is the final action after instilling eye drops in a child?

A. Dry the child's face with a tissue

B. Apply pressure to the lacrimal punctum

C. Remove any excess drops with a cotton swab

D. Instruct the child to keep eyes shut

SAMPLE

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. What is the appropriate nursing action for a client who reports dizziness upon changing positions?

A. Notify the physician immediately.

B. Reassure the client and document the incident.

C. Assess the client's blood pressure and heart rate.

D. Encourage the client to rest for a while.

Assessing the client's blood pressure and heart rate is the appropriate nursing action for a client who reports dizziness upon changing positions. This assessment helps to determine if the dizziness may be due to orthostatic hypotension, a condition where blood pressure drops significantly when an individual stands up or changes positions. By checking these vital signs, the nurse can gather critical information that may indicate underlying cardiovascular issues or other medical conditions contributing to the client's symptoms. This step is essential before taking further actions, as it informs the care plan and allows for immediate interventions if the readings indicate a concerning trend. Monitoring vital signs provides a clear picture of the client's hemodynamic status and guides subsequent nursing interventions or the need for further evaluation.

2. How can dehydration affect preterm labor?

A. Dehydration can decrease uterine contractions.

B. Dehydration can increase the risk of preterm labor.

C. Dehydration has no effect on preterm labor.

D. Dehydration may prolong labor duration.

Dehydration can significantly increase the risk of preterm labor due to several physiological responses in the body. When a pregnant individual is dehydrated, it can lead to an imbalance in electrolytes and hormonal levels that are vital for maintaining pregnancy. Specifically, dehydration can cause the body to release hormones that stimulate uterine contractions, potentially leading to premature labor. Moreover, dehydration can result in increased levels of oxytocin, a hormone that is associated with uterine contractions. This hormonal imbalance may trigger premature uterine activity, thereby increasing the likelihood of preterm labor. Additionally, adequate hydration is necessary for maintaining proper amniotic fluid levels, which are important for cushioning the fetus and ensuring a healthy environment, further supporting the idea that dehydration poses a risk to the continuity of the pregnancy. Overall, the relationship between dehydration and preterm labor highlights the importance of hydration for expectant mothers, as it plays a crucial role in preventing premature contractions and supporting a healthy pregnancy.

3. What is the first action a nurse should take when planning a teaching session for a postoperative client?

A. Review the surgical procedure with the client

B. Determine the client's current pain level

C. Schedule a follow-up visit

D. Gather educational materials

In planning a teaching session for a postoperative client, determining the client's current pain level is crucial because pain management directly impacts the client's ability to participate in and comprehend the teaching. If a client is in significant pain, their focus and cognitive function may be diminished, making it challenging for them to absorb new information. Addressing pain first ensures that the client is in a more stable and receptive state, which enhances the effectiveness of the teaching session. Once the pain is managed, the nurse can then proceed with reviewing surgical procedures, scheduling follow-ups, or gathering educational materials with the assurance that the client is in a better position to engage with the information being presented.

SAMPLE

4. What position should a child be placed in after receiving gastrostomy tube feedings?

A. The child should be placed in a supine position

B. The child should be placed in a lateral position

C. The child should not be placed in a supine position

D. The child should be placed in a sitting position

After receiving gastrostomy tube feedings, it is essential to position the child appropriately to reduce the risk of aspiration and promote comfort during digestion. Placing a child in a supine position (lying flat on their back) can increase the likelihood of stomach contents moving back up into the esophagus, especially if the child has any underlying conditions that compromise their ability to maintain a patent airway. To minimize the risk of complications like aspiration pneumonia and to facilitate proper gastric emptying, the child should ideally be placed in an upright position or a position that is at least somewhat elevated, like a sitting position. This positioning helps gravity assist the feeding to move into the intestines rather than remain in the stomach, therefore reducing the risk of reflux and aspiration. Not placing the child in a supine position underscores the importance of safe feeding practices and reflects the need for careful monitoring during and after feeding.

5. What is one of the basic principles of infection control in healthcare settings?

A. Gloves should be worn only during surgical procedures

B. Hand hygiene is essential before and after patient contact

C. Face masks are the only required protective gear

D. Infection control does not apply to non-invasive procedures

Hand hygiene is essential before and after patient contact because it is a fundamental practice in reducing the transmission of pathogens in healthcare settings. Proper hand hygiene significantly decreases the risk of healthcare-associated infections (HAIs), which are a major concern in hospitals and other medical facilities. This practice involves thoroughly washing hands with soap and water or using an alcohol-based hand sanitizer, which helps to remove or kill germs that could be transferred between patients, healthcare providers, and the environment. Emphasizing hand hygiene is supported by evidence that shows its effectiveness in preventing infections. It is a simple yet powerful measure that can protect both patients and healthcare providers. The principle serves as the cornerstone of infection prevention protocols in various healthcare scenarios, promoting a culture of safety and accountability. Other options do not reflect the comprehensive approach required for effective infection control in healthcare contexts. For example, gloves should be worn when appropriate, not solely in surgical procedures; protective gear extends beyond face masks; and infection control principles are applicable to all procedures, invasive or non-invasive. Therefore, emphasizing proper hand hygiene is crucial for maintaining safe healthcare environments.

SAMPLE

6. What might indicate the presence of fluid overload in a patient receiving blood transfusions?

A. Increased blood pressure

B. Widening pulse pressure

C. Effective oxygenation

D. Shortness of breath

The presence of fluid overload in a patient receiving blood transfusions is often indicated by shortness of breath. When excess fluid accumulates in the body, particularly in the lungs, it can lead to pulmonary congestion. This condition interferes with normal gas exchange, resulting in difficulty breathing or a feeling of breathlessness. In individuals undergoing blood transfusions, the risk of fluid overload is heightened due to the volume of blood product being introduced into their system. It is important to recognize that other signs of fluid overload can also present, such as hypertension and jugular vein distention; however, shortness of breath is a more immediate and critical indicator as it affects the patient's respiratory function directly. Understanding the signs of fluid overload is essential for prompt management and ensuring patient safety during transfusion therapy.

7. How should a nurse respond when a client is newly diagnosed with pancreatic cancer and asks questions?

A. Avoid discussing difficult topics

B. Provide information and support

C. Redirect the client to another healthcare provider

D. Keep responses brief to avoid overwhelming

Providing information and support when a client is newly diagnosed with pancreatic cancer is vital for several reasons. First, receiving a cancer diagnosis can be a highly distressing experience, and clients often have many questions and concerns regarding their condition, treatment options, and prognosis. By responding with information, the nurse validates the client's feelings and shows compassion, which helps to build trust in the nurse-client relationship. Furthermore, educating the client about their diagnosis allows them to become more informed participants in their care, which can enhance their sense of control during a challenging time. Providing clear, accurate information also empowers clients to ask further questions and engage in discussions about their treatment plan, thus promoting a more collaborative healthcare experience. Supportive communication can lead to reduced anxiety and better emotional coping strategies for the client. In such situations, offering empathy, honesty, and resources is essential, as it encourages the client to express their feelings and concerns. By being present and attentive, the nurse can help navigate the complexities surrounding cancer diagnosis, ultimately improving the client's overall well-being and recovery journey.

SAMPLE

8. What is a common misconception about absent seizures?

A. They are always associated with muscle spasms

B. They can be mistaken for daydreaming

C. They only occur in children

D. They last for several minutes

Absent seizures, also known as petit mal seizures, are indeed often mistaken for daydreaming. This type of seizure is characterized by a brief, sudden lapse in attention or consciousness, which can appear as if the person is simply staring off into space. During this time, the individual is usually unresponsive and unable to be spoken to, which contributes to the misconception that they are merely daydreaming. Understanding this aspect is crucial for recognizing absent seizures, especially since they can occur frequently and may go unnoticed. This misinterpretation can lead to delays in diagnosis and treatment, thereby affecting the quality of life of those experiencing these seizures. The other options present common misunderstandings about absent seizures that do not accurately reflect their nature. For example, absent seizures do not involve muscle spasms; they are more about a brief interruption of awareness. While they are more common in children, they can also occur in teenagers and adults. Additionally, absent seizures typically last only a few seconds, not several minutes, which distinguishes them from other types of seizures. Recognizing these key characteristics helps in identifying and managing absent seizures effectively.

9. What should a nurse include in the care plan for a client with angina?

A. Prescribe medications only during episodes

B. Educate about lifestyle changes to manage risk factors

C. Advise complete bed rest

D. Suggest regular intensive exercise

Incorporating education about lifestyle changes to manage risk factors is crucial for a client with angina. This approach addresses the underlying causes of angina, which can be related to conditions such as coronary artery disease. By advising clients on lifestyle modifications, such as adopting a heart-healthy diet, engaging in regular physical activity (as tolerated), managing stress, and quitting smoking, the nurse helps the client reduce the risk of further cardiac events and improve overall cardiovascular health. Lifestyle changes are not only beneficial for symptom management but also play a significant role in long-term health outcomes. They can help in stabilizing the condition, decreasing the frequency and intensity of angina episodes, and improving the client's overall quality of life. Other options, such as prescribing medications only during episodes or advising complete bed rest, do not promote engagement in self-care or address the chronic nature of angina. Suggesting regular intensive exercise without considering the client's specific health status or ability could also be inappropriate, as it may exacerbate symptoms rather than provide benefit. Thus, educating the client about lifestyle modifications represents a holistic and proactive approach to managing angina.

SAMPLE

10. What is the final action after instilling eye drops in a child?

A. Dry the child's face with a tissue

B. Apply pressure to the lacrimal punctum

C. Remove any excess drops with a cotton swab

D. Instruct the child to keep eyes shut

After instilling eye drops in a child, applying pressure to the lacrimal punctum is the final action that optimizes the effectiveness of the medication. This technique helps prevent the medication from draining away through the tear drainage system and encourages increased absorption of the drops into the eye. By pressing on the punctum, you minimize the risk of systemic absorption of the medication and enhance its localized effect. This step is particularly important in children, who may be more sensitive to medications and have a higher tendency for rapid drainage of eye drops. Ensuring that the medication stays in contact with the eye surface for a longer duration increases the likelihood of therapeutic efficacy. Employing this method can be a critical part of pediatric eye care, ensuring that children receive the full benefit of their prescribed treatments.

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://atirncomprehensivepredictor.examzify.com

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

SAMPLE