CEA NURSING 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. What type of diuresis is illustrated by the use of Ted stockings for patients with lower extremity edema?

A. Constrictive diuresis

B. Osmotic diuresis

C. Loop diuresis

D. Pressure diuresis

2. What factor primarily determines the potency of a topical corticosteroid?

A. None of these are correct

B. Duration of use (once, continuous, etc)

C. Site of use (back, face, arms, etc)

D. Vehicle of delivery (cream, lotion, elixir, etc)

3. What is the most effective method to assess cranial nerve I during a neurologic examination?

A. Cover one nostril and identify scents

B. Examine the turbinates with a speculum

C. Apply pressure to the nasal tip

D. Check airflow in both nostrils

4. Which level might elevate to potentially life-threatening levels in hypertensive patients on lisinopril?

A. BNP

B. Calcium

C. Pro-BNP

D. Potassium

5. Which agent is appropriate for managing back spasms related to an office chair?

A. Prednisone (Deltasone)

B. Methylnaltrexone (Relistor)

C. Gabapentin (Neurontin)

D. Cyclobenzaprine (Amrix)

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6. What is the first priority intervention for a patient with a rapid, irregular heart rate and symptoms lasting several days?

A. Treat with vagal maneuvers

B. Maintain rate control and anticoagulate

C. Notify EMS for emergency transport

D. Ask about family cardiac history

7. Which dermatologic lesion is considered precancerous and commonly due to prolonged UV-B exposure?

A. Actinic Keratosis

B. Basal cell carcinoma

C. Verucca

D. Seborrheic dermatitis

8. A 43-year-old male with macrocytic anemia should be evaluated for which lab level to determine the etiology?

A. Vitamin B12.

B. Lead level.

C. Ferritin.

D. TIBC.

9. Which spinal deformity is characterized by unequal shoulder height and a lateral and rotary curvature of the spine?

A. Scoliosis

B. Rheumatoid Arthritis (RA)

C. Kyphosis

D. Lordosis

10. Which lab test should be ordered first for a patient presenting with dysfunctional uterine bleeding (DUB)?

A. Vitamin K

B. Serum urine ketones

C. Serum beta human chorionic gonadotropin (HCG)

D. Complete Blood Count (CBC)

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Answers

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

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Explanations

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1. What type of diuresis is illustrated by the use of Ted stockings for patients with lower extremity edema?

A. Constrictive diuresis

B. Osmotic diuresis

C. Loop diuresis

D. Pressure diuresis

The use of Ted stockings for patients with lower extremity edema illustrates the concept of constrictive diuresis. Ted stockings, or thromboembolic deterrent stockings, apply graduated compression to the lower extremities. This compression helps to reduce swelling by promoting venous return to the heart and preventing the accumulation of fluid in the tissues. Constrictive diuresis relies on external pressure to facilitate fluid movement from the interstitial spaces back into the vascular system. By exerting pressure on the limbs, Ted stockings decrease the hydrostatic pressure in the veins, which helps to draw excess fluid back into the bloodstream. This process indirectly encourages the kidneys to excrete excess fluid, contributing to the reduction of edema. In contrast, osmotic diuresis involves the administration of substances that increase osmotic pressure in the renal tubules, leading to increased urine output. Loop diuretics act on the loop of Henle in the kidney, inhibiting sodium reabsorption, which also results in increased urine production. Pressure diuresis refers to urine output that increases due to elevated blood pressure. Each of these types of diuresis operates on different physiological principles than the mechanical action provided by Ted stockings.

2. What factor primarily determines the potency of a topical corticosteroid?

A. None of these are correct

B. Duration of use (once, continuous, etc)

C. Site of use (back, face, arms, etc)

D. Vehicle of delivery (cream, lotion, elixir, etc)

The potency of a topical corticosteroid is primarily determined by the vehicle of delivery. The formulation of the drug can significantly influence its absorption through the skin and, consequently, its effectiveness. Different vehicles such as creams, ointments, lotions, gels, and elixirs have varying characteristics that affect how much of the corticosteroid penetrates the skin barrier. For instance, ointments are typically more occlusive than creams or lotions, which can result in better drug absorption and enhanced potency, especially in inflamed or thickened skin. In contrast, lotions may be less potent due to their higher water content and faster evaporation, which can reduce the amount of medication available for absorption. Therefore, the choice of vehicle is crucial in determining the level of therapeutic effect achieved with a particular topical corticosteroid. While duration of use and site of application can impact the effectiveness and safety of topical corticosteroids in a broader sense, they do not primarily dictate the inherent potency of the corticosteroid itself. Instead, they may influence clinical outcomes or the potential for side effects when the corticosteroid is applied.

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3. What is the most effective method to assess cranial nerve I during a neurologic examination?

A. Cover one nostril and identify scents

B. Examine the turbinates with a speculum

C. Apply pressure to the nasal tip

D. Check airflow in both nostrils

The most effective method to assess cranial nerve I, which is the olfactory nerve, is to cover one nostril and identify scents. This approach directly evaluates the function of the olfactory nerve by presenting a specific smell to one side of the nasal cavity at a time. By occluding one nostril, you isolate the sense of smell on that side, allowing for a focused assessment. The patient can then be prompted to identify a familiar scent, which tests the sensory function of cranial nerve I. Additionally, this method is straightforward and ensures that external factors, such as airflow or the involvement of other nasal structures, do not interfere with the ability to perceive and identify scents. Assessing the ability to recognize odors can provide valuable information about the integrity of the olfactory system. Other methods, such as examining the turbinates with a speculum or checking airflow in both nostrils, do not specifically evaluate the sensory function of cranial nerve I. While nasal structure examination and airflow checks may be relevant in a comprehensive nasal assessment, they do not specifically test the olfactory capabilities. Similarly, applying pressure to the nasal tip does not pertain to the assessment of olfactory function and may not provide useful information regarding cranial nerve I.

4. Which level might elevate to potentially life-threatening levels in hypertensive patients on lisinopril?

A. BNP

B. Calcium

C. Pro-BNP

D. Potassium

In hypertensive patients taking lisinopril, an ACE inhibitor, there is a risk of elevated potassium levels. Lisinopril works by inhibiting the enzyme that converts angiotensin I to angiotensin II, leading to vasodilation and reduced blood pressure. However, this mechanism can also decrease the kidney's ability to excrete potassium, potentially resulting in hyperkalemia. Hyperkalemia can be dangerous because high levels of potassium can cause cardiac arrhythmias and other serious complications, making it a life-threatening condition if not addressed. Regular monitoring of potassium levels in patients on lisinopril is vital to prevent adverse effects, particularly in those with pre-existing renal impairment or other risk factors for hyperkalemia. While levels of BNP and Pro-BNP may be important in managing heart failure and may fluctuate based on cardiac stress or volume overload, they do not pose the same immediate life-threatening risk when elevated as hyperkalemia does. Calcium levels, while important for overall health and muscle function, are not typically significantly affected by lisinopril in the context of hypertensive treatment.

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5. Which agent is appropriate for managing back spasms related to an office chair?

A. Prednisone (Deltasone)

B. Methylnaltrexone (Relistor)

C. Gabapentin (Neurontin)

D. Cyclobenzaprine (Amrix)

Cyclobenzaprine is a muscle relaxant that is commonly used to alleviate muscle spasms, including those that may occur due to prolonged sitting in an office chair. It works by acting on the central nervous system to reduce muscle tone and alleviate the discomfort associated with skeletal muscle spasms. This is particularly relevant in cases where muscle tightness or spasms develop from poor posture or extended periods of inactivity, which is often experienced in office settings. In the context of managing back spasms, Cyclobenzaprine helps to provide relief by promoting relaxation of the muscles, thereby decreasing pain and discomfort. It is usually recommended for short-term use as part of a comprehensive treatment plan, which may include physical therapy and lifestyle modifications. Other options listed may not be suitable for this specific situation. For example, Prednisone is a corticosteroid that may be useful for inflammatory conditions but is not primarily indicated for muscle spasms. Methylnaltrexone is primarily used for opioid-induced constipation and does not address muscle relaxation. Gabapentin, while effective for neuropathic pain, is not specifically indicated for muscle spasms linked to skeletal muscle tightness. Therefore, Cyclobenzaprine stands out as the most appropriate choice for managing back spasms in

6. What is the first priority intervention for a patient with a rapid, irregular heart rate and symptoms lasting several days?

A. Treat with vagal maneuvers

B. Maintain rate control and anticoagulate

C. Notify EMS for emergency transport

D. Ask about family cardiac history

In the scenario of a patient presenting with a rapid, irregular heart rate and symptoms persisting for several days, the first priority intervention focuses on maintaining rate control and anticoagulating the patient. This approach is essential because a rapid, irregular heart rate, particularly in cases like atrial fibrillation, can lead to hemodynamic instability and increase the risk of thromboembolic events, such as stroke. Rate control involves using medications like beta-blockers or calcium channel blockers to slow down the heart rate and improve the patient's stability. Anticoagulation is critical to prevent the formation of blood clots due to sluggish blood flow in the atria, which is a common complication in irregular heart rhythms. Implementing rate control and anticoagulation addresses immediate risks posed by the symptoms, ensuring the patient's safety while preparing for further assessment and possible treatment. Other options, while they may seem relevant, do not appropriately address the immediate need for rate control and clot prevention in this context. For instance, using vagal maneuvers can be beneficial in certain scenarios, but they may not be effective for rapid atrial fibrillation or flutter, particularly after symptoms have persisted for several days. Notifying EMS for emergency transport might be necessary for critically unstable patients; however

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7. Which dermatologic lesion is considered precancerous and commonly due to prolonged UV-B exposure?

A. Actinic Keratosis

B. Basal cell carcinoma

C. Verucca

D. Seborrheic dermatitis

Actinic keratosis is recognized as a precancerous dermatologic lesion that develops as a result of prolonged exposure to ultraviolet (UV-B) radiation. This condition manifests as rough, scaly patches on sun-exposed areas of the skin, often representing an initial stage in the progression toward skin cancer, particularly squamous cell carcinoma. The lesion arises from damage to the skin cells due to repeated UV exposure, leading to changes in the skin's keratinocytes, which make them more prone to mutations that can eventually result in cancerous growth. Actinic keratosis serves as a warning sign, indicating that the skin has sustained significant sun damage and requires protective measures, such as the application of sunscreen and avoidance of excessive sun exposure. Other options such as basal cell carcinoma are malignant but not classified as precancerous. Verruca, or warts, are caused by viral infections and have no direct relation to UV exposure, while seborrheic dermatitis is primarily a chronic inflammatory skin condition that is not linked to sun exposure or cancer. Understanding the distinctions among these conditions highlights the unique role of actinic keratosis in the spectrum of skin lesions associated with UV damage.

8. A 43-year-old male with macrocytic anemia should be evaluated for which lab level to determine the etiology?

A. Vitamin B12.

B. Lead level.

C. Ferritin.

D. TIBC.

Macrocytic anemia is often associated with deficiencies in certain vitamins, primarily vitamin B12 and folate. In a case involving a 43-year-old male presenting with macrocytic anemia, assessing vitamin B12 levels is critical to identify the underlying cause of the anemia. A deficiency in vitamin B12 can result from various factors such as dietary insufficiency, malabsorption syndromes, or intrinsic factor deficiency, which leads to pernicious anemia. Measuring vitamin B12 levels provides valuable insight into whether insufficient amounts are contributing to the anemia. A low level would support the diagnosis of vitamin B12 deficiency, whereas a normal level would prompt further investigation into other potential causes, such as folate deficiency. While other tests like lead level, ferritin, and TIBC can be useful for evaluating different types of anemia, they are not the primary focus when determining the etiology of macrocytic anemia. Lead levels relate more to microcytic anemia, ferritin assesses iron stores often for microcytic anemia, and TIBC (total iron-binding capacity) evaluates iron metabolism but is not specifically informative for macrocytic anemia. Therefore, checking vitamin B12 is the most relevant and critical lab value in this situation.

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9. Which spinal deformity is characterized by unequal shoulder height and a lateral and rotary curvature of the spine?

A. Scoliosis

B. Rheumatoid Arthritis (RA)

C. Kyphosis

D. Lordosis

Scoliosis is characterized by an abnormal lateral curvature of the spine, which often involves a rotational component. This condition typically presents with asymmetry in the shoulders, including one shoulder appearing higher than the other. As the spine deviates from its normal alignment, it can lead to noticeable differences in shoulder height and can also impact the overall posture of an individual. In addition to these physical manifestations, scoliosis can have important clinical implications, such as potential impacts on lung function and overall mobility, particularly in severe cases. This distinguishes scoliosis from other conditions like rheumatoid arthritis, which primarily affects joints, or kyphosis and lordosis, which are defined by exaggerated curvatures of the spine in specific planes but do not typically involve the lateral and rotary characteristics seen in scoliosis. Understanding the signs and consequences of scoliosis is essential for proper diagnosis and treatment planning in nursing practice, highlighting the importance of recognizing this specific spinal deformity.

10. Which lab test should be ordered first for a patient presenting with dysfunctional uterine bleeding (DUB)?

A. Vitamin K

B. Serum urine ketones

C. Serum beta human chorionic gonadotropin (HCG)

D. Complete Blood Count (CBC)

In the context of dysfunctional uterine bleeding (DUB), the most appropriate initial lab test to order is the serum beta human chorionic gonadotropin (HCG). This is crucial because one of the first considerations in any woman of childbearing age presenting with abnormal uterine bleeding is to rule out pregnancy. The presence of HCG in the serum indicates that the patient is pregnant, which can significantly alter the management of the bleeding and provide insight into any potential complications, such as a miscarriage or ectopic pregnancy. By prioritizing the serum beta HCG test, the healthcare provider can quickly determine whether the source of bleeding may be obstetrical in nature, which requires a different approach than other potential causes of DUB. Once pregnancy-related issues are addressed or ruled out, further tests, such as a complete blood count or additional hormonal studies, can be ordered to evaluate other possible causes of the bleeding. In this clinical setting, understanding the potential urgency and implications of pregnancy status allows for timely and appropriate management of the patient, which is why this lab test is of utmost importance in the initial assessment.

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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:

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

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