EVIDENCE-BASED PRACTICE IN NURSING PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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https://evidencebasednursing.examzify.com

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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 items are included as evidence to search when collecting the best evidence?

A. Newspapers

B. Agency policy and procedure manuals; quality improvement data; existing clinical practice guidelines; agency experts; staff educators; risk managers; infection control nurses; and peer reviewed articles (within most recent 5 years)

C. Personal blogs

D. Only randomized controlled trials

2. Dissemination of outcomes involves sharing results through multiple channels.

A. Personal communications, conference presentations, and peer-reviewed publications

B. Keeping results private within the organization

C. Disseminate results through a single internal report

D. Ignoring dissemination altogether

3. Which statement describes expert thinking in nursing?

A. Assesses then acts, aware of resources and how to use them

B. Focuses on rigid rules only

C. Acts without assessment

D. Ignores patient preferences

4. Evidence hierarchies are typically related to which aspect of care?

A. Meaning and process

B. Patient satisfaction

C. Effectiveness of healthcare interventions

D. Cost containment

5. Which step involves critically appraising the evidence in Evidence Based Practice?

A. Search for and collect the most relevant best evidence.

B. Integrate the best evidence with one's clinical expertise and patient preferences and values in making practice decision or change.

C. Critically appraise the evidence.

D. Evaluate outcomes of the practice decision or change based on evidence.

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6. What is the first step in the Iowa Model for implementing practice change?

A. Ask clinical question

B. Search literature

C. Implement practice change

D. Evaluate outcomes

7. In randomized trials, intention-to-treat analysis preserves randomization by including which participants in the analysis?

A. Only those who completed the protocol.

B. All randomized participants.

C. Only those who adhered to the treatment.

D. None of the above.

8. Which statement reflects a goal of the nursing process?

A. Administer medications

B. Explore patient health status

C. Schedule follow-up visits

D. Document health records

9. Which statement best describes the domain that pertains to the magnitude of the treatment effect and the overall sample size across studies?

A. Quantity

B. Quality

C. Consistency

D. Relevance

10. What is an example of pre-appraised evidence?

A. A single observational study

B. A systematic review

C. A case report

D. A narrative editorial

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Answers

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

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Explanations

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1. Which items are included as evidence to search when collecting the best evidence?

A. Newspapers

B. Agency policy and procedure manuals; quality improvement data; existing clinical practice guidelines; agency experts; staff educators; risk managers; infection control nurses; and peer reviewed articles (within most recent 5 years)

C. Personal blogs

D. Only randomized controlled trials

When searching for the best evidence to guide practice, the goal is to gather credible, current sources that fit the clinical setting. Within an agency, this includes policy and procedure manuals, quality improvement data, existing clinical practice guidelines, and input from people who know the system well—agency experts, staff educators, risk managers, and infection control nurses. Peer reviewed articles matter because they undergo rigorous evaluation and help ensure methodological quality. It's also important that evidence is recent, so aiming for sources within the most recent five years helps keep recommendations up to date. Newspapers and personal blogs don't meet the same standards of rigor and can carry biases or outdated information, so they aren't appropriate as primary sources for best evidence. And while randomized controlled trials are strong for certain questions, relying on them alone ignores guidelines, policies, and real-world quality data that drive everyday practice. In short, the best evidence comes from a mix of internal agency documents, current guidelines, quality data, and well vetted peer reviewed literature.

2. Dissemination of outcomes involves sharing results through multiple channels.

A. Personal communications, conference presentations, and peer-reviewed publications

B. Keeping results private within the organization

C. Disseminate results through a single internal report

D. Ignoring dissemination altogether

Dissemination means sharing results beyond the team or organization, using multiple channels to reach different audiences. This approach is best because it increases visibility, credibility, and practical impact. Sharing through personal conversations and direct communication allows quick, targeted distribution to collaborators who can apply or test findings right away. Presenting at professional conferences exposes work to colleagues who can critique, discuss implications, and broaden awareness. Publishing in peer reviewed journals provides formal, citable evidence that can be accessed by researchers, practitioners, and policymakers, helping the findings be found, trusted, and used widely. In contrast, relying on a single internal report limits access to inside the organization, reduces external validation, and misses opportunities to influence practice beyond the institution. So, disseminating outcomes across multiple channels maximizes reach, uptake, and impact.

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3. Which statement describes expert thinking in nursing?

A. Assesses then acts, aware of resources and how to use them

B. Focuses on rigid rules only

C. Acts without assessment

D. Ignores patient preferences

Expert thinking in nursing is about gathering and interpreting relevant information before acting and using available resources wisely to support safe, effective care. This approach means you assess the patient's condition, consider data from the assessment and the patient's preferences, and then choose a plan of action. Being aware of resources and how to use them—team members, protocols, equipment, and evidence—helps you implement the best intervention efficiently and safely. For example, assessing pain, vitals, and functional status before giving analgesia ensures the response fits the current situation and respects patient wishes, while consulting guidelines or teammates as needed enhances safety. Focusing only on rigid rules misses the need to adapt to each patient and context. Acting without assessment neglects critical data that guide appropriate care. Ignoring patient preferences undermines patient-centered decision-making, which is a core part of expert practice.

4. Evidence hierarchies are typically related to which aspect of care?

A. Meaning and process

B. Patient satisfaction

C. Effectiveness of healthcare interventions

D. Cost containment

Evidence hierarchies are used to judge how well an intervention works in practice. In evidence-based practice, the ranking of study designs reflects how trustworthy the findings are about effectiveness. Higher levels—systematic reviews and meta-analyses, randomized controlled trials—minimize bias and help establish causality, so they most reliably show whether a treatment or approach actually improves outcomes. Lower levels—case reports or expert opinion—provide context but are limited for proving effectiveness. So these hierarchies are best tied to the effectiveness of healthcare interventions, guiding decisions about which practices have solid support. They're less about the meaning and process of care, patient satisfaction, or cost containment, though those areas are studied with other kinds of evidence.

5. Which step involves critically appraising the evidence in Evidence Based Practice?

A. Search for and collect the most relevant best evidence.

B. Integrate the best evidence with one's clinical expertise and patient preferences and values in making practice decision or change.

C. Critically appraise the evidence.

D. Evaluate outcomes of the practice decision or change based on evidence.

Critical appraisal is the process of evaluating the trustworthiness, quality, and applicability of the evidence before it informs practice. It involves examining the study design, risk of bias, sample size, data collection and analysis methods, the precision of the results, and how closely the findings apply to your patient population and clinical question. This step ensures that decisions are based on solid, credible research rather than flawed or irrelevant data. After appraising the evidence, you integrate the best findings with your clinical expertise and patient preferences to decide on a course of action, then implement and later evaluate outcomes to determine if the change was effective. Searching for evidence is about finding relevant studies, while evaluating outcomes focuses on the results after the change is in practice.

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6. What is the first step in the Iowa Model for implementing practice change?

A. Ask clinical question

B. Search literature

C. Implement practice change

D. Evaluate outcomes

In the Iowa Model, the initial move is to translate a problem or trigger into a focused clinical question. Recognizing a clinical issue signals that change may be needed, but turning that issue into a precise question frames exactly what evidence you need and what outcomes matter. This question-guided approach ensures the subsequent search for evidence is targeted and relevant, so you're not wading through information that doesn't address the issue at hand. Once the clinical question is set, you search the literature, appraise what you find, and decide on a practice change to test. Only after choosing and piloting that change do you implement it more broadly and evaluate its impact. So the first concrete step is formulating a clinical question because it drives the entire evidence-based decision-making process.

7. In randomized trials, intention-to-treat analysis preserves randomization by including which participants in the analysis?

A. Only those who completed the protocol.

B. All randomized participants.

C. Only those who adhered to the treatment.

D. None of the above.

Intention-to-treat analysis keeps the original randomization intact by including every participant who was randomized and analyzing them in the group to which they were assigned, regardless of whether they completed the protocol or adhered to the treatment. This approach preserves the prognostic balance created by randomization, so the comparison between groups reflects the effect of being assigned to a treatment rather than the effect of actually receiving it. Including all randomized participants protects against bias that occurs if you only analyze those who finished the study or followed the treatment exactly. Dropping noncompliers or dropouts can distort the estimated treatment effect, making it look more favorable (or less favorable) than it would be in real-world use. ITT also mirrors real-world effectiveness, where adherence varies. In practice, missing data must be handled appropriately to maintain the integrity of the analysis, since ITT relies on data from all randomized participants. Sometimes supplementary analyses (such as per-protocol or as-treated) are performed for additional insight, but they should not replace the primary intention-to-treat approach because that would undermine the benefits of randomization.

8. Which statement reflects a goal of the nursing process?

A. Administer medications

B. Explore patient health status

C. Schedule follow-up visits

D. Document health records

The main idea is that the nursing process begins with assessing the patient's health status. Exploring health status collects the data needed to understand what the patient is experiencing, both subjectively (how the patient feels) and objectively (exam findings, tests, history). This assessment provides the foundation for identifying nursing problems, setting priorities, and planning care, so it directly drives every subsequent step of the process. Administering medications is an action that comes during implementation after a plan is made. Scheduling follow-up visits is part of planning and care continuity but not the primary aim of the process. Documenting health records is essential for communication and accountability, yet it's the record of what's done and found rather than the main goal of the nursing process itself.

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9. Which statement best describes the domain that pertains to the magnitude of the treatment effect and the overall sample size across studies?

A. Quantity

B. Quality

C. Consistency

D. Relevance

The main idea here is how much evidence exists across multiple studies. This domain, Quantity, focuses on the amount of data available—the number of studies and the total sample size. More studies and larger samples typically yield a more precise estimate of the treatment effect, reducing random error and increasing confidence in the overall magnitude observed. The magnitude of the effect itself is influenced by this combined data, which is why it's tied to the overall quantity of evidence. The other domains—Quality (how well the studies were conducted), Consistency (whether results agree across studies), and Relevance (how applicable the evidence is to the population and setting)—address different aspects of appraisal rather than the sheer amount of data. So, the statement best describing the domain that covers the magnitude of the treatment effect and the total sample size across studies is Quantity.

10. What is an example of pre-appraised evidence?

A. A single observational study

B. A systematic review

C. A case report

D. A narrative editorial

Pre-appraised evidence consists of sources that have already been evaluated for quality by researchers, so clinicians can rely on their appraisal rather than reassessing every study. A systematic review exemplifies this because it uses a structured search, applies predefined criteria, and critically appraises the included studies before synthesizing their findings, giving an overall assessment of the strength and consistency of the evidence. In contrast, a single observational study is primary research and lacks the aggregated quality appraisal that characterizes systematic reviews. A case report reports on one or a few patients without systematic appraisal, and a narrative editorial is typically opinion or commentary rather than a rigorous evidence synthesis. When you need ready-to-use evidence, looking for systematic reviews or guidelines is a practical way to access pre-appraised information.

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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://evidencebasednursing.examzify.com

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

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