NCLEX ARCHER PRIORITIZATION PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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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

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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 is the correct order of actions for a nurse treating a child with a compound fracture?

A. Apply ice, assess the injury, cover the wound, elevate the arm

B. Assess the injury, cover the wound, apply ice, elevate the arm

C. Cover the wound, elevate the arm, apply ice, assess the injury

D. Elevate the arm, assess the injury, apply ice, cover the wound

2. Which of the following is a common cause of carbon monoxide poisoning?

A. Swimming pool accidents

B. Smoke inhalation from fires

C. Allergic reactions

D. Excessive alcohol consumption

3. Which client has the greatest need to be referred for outpatient community services?

A. A client newly diagnosed with skin cancer that lives with family.

B. A client recovering from a stroke and is discharged to inpatient rehab.

C. A client who is homeless and has a substance use disorder.

D. A client leaving against medical advice for the treatment of cellulitis.

4. What is the highest priority intervention for a patient with a suspected pneumothorax?

A. Monitor oxygen saturation levels

B. Administer an intravenous bolus

C. Prepare for chest decompression

D. Position the patient for comfort

5. During group therapy, which client requires immediate intervention from the nurse?

A. A client repeatedly washing their hands

B. A client talking over others

C. A client yelling and shouting at others

D. A client requesting discharge

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6. What immediate action should the nurse take for a client with anorexia nervosa?

A. Consult the social worker for discharge planning

B. Administer venlafaxine to the client

C. Obtain a blood sample to evaluate lithium levels

D. Initiate intravenous fluids

7. What task is appropriate to assign to a licensed practical/vocational nurse?

A. Manage a patient suspected of compartment syndrome

B. Provide discharge teaching to a patient with Hepatitis A

C. Insert a nasogastric tube for a paralytic ileus

D. Caring for a post-op prostate resection patient with spasms

8. When preparing for initial rounds, which client should the nurse assess first?

A. The client with diabetes who is being discharged today

B. A 32-year-old female with a tracheostomy experiencing copious secretions

C. A 16-year-old scheduled for physical therapy

D. An 80-year-old male with a decubitus ulcer needing a dressing change

9. According to Maslow's Hierarchy of Needs, which of the following is the highest priority for a nurse to address?

A. The need to develop trust versus mistrust

B. The need to be free of fear and anxiety

C. The need for adequate cardiovascular functioning

D. The need for a patent airway

10. Which action is the highest priority for a nurse caring for a 2-year-old patient who ingested a household chemical?

A. Assess the client.

B. Ensure no further exposure to poison.

C. Identify the specific type of poison.

D. Administer the antidote if available.

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Answers

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

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Explanations

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1. What is the correct order of actions for a nurse treating a child with a compound fracture?

A. Apply ice, assess the injury, cover the wound, elevate the arm

B. Assess the injury, cover the wound, apply ice, elevate the arm

C. Cover the wound, elevate the arm, apply ice, assess the injury

D. Elevate the arm, assess the injury, apply ice, cover the wound

In treating a child with a compound fracture, the correct order of actions is crucial for ensuring optimal care and minimizing complications. The first step is to assess the injury, which allows the nurse to determine the extent of the damage and identify any immediate risks, such as excessive bleeding or neurovascular compromise. Following the assessment, it is essential to cover the wound to protect it from infection and further injury. The next action is to apply ice, which helps reduce swelling and pain in the area. Finally, elevating the arm is important for reducing swelling as well, but it should be done after addressing the assessment and wound care to ensure proper circulation and avoid exacerbating any potential complications. This structured approach prioritizes the patient's immediate needs, assesses potential threats to safety, and takes measurable steps to manage the injury effectively, which underscores the rationale behind the order of actions chosen.

2. Which of the following is a common cause of carbon monoxide poisoning?

A. Swimming pool accidents

B. Smoke inhalation from fires

C. Allergic reactions

D. Excessive alcohol consumption

Smoke inhalation from fires is a common cause of carbon monoxide poisoning because, during a fire, carbon-based materials are burned, releasing various toxic gases, including carbon monoxide. This gas is colorless and odorless, making it particularly dangerous, as victims may not be aware they are being exposed to it until symptoms arise. Inhaling this toxic gas can quickly lead to dangerous levels in the body, impairing oxygen delivery to vital organs and leading to serious health issues or even death. While the other options may pose their own health risks, they are not associated with carbon monoxide poisoning. Swimming pool accidents typically involve drowning or injury, allergic reactions are related to immune responses rather than toxic gas exposure, and excessive alcohol consumption leads to its own set of health problems, but it does not relate to carbon monoxide exposure. Understanding the primary sources of carbon monoxide can help in prevention and timely intervention in cases of exposure.

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3. Which client has the greatest need to be referred for outpatient community services?

A. A client newly diagnosed with skin cancer that lives with family.

B. A client recovering from a stroke and is discharged to inpatient rehab.

C. A client who is homeless and has a substance use disorder.

D. A client leaving against medical advice for the treatment of cellulitis.

The client who is homeless and has a substance use disorder represents the greatest need for referral to outpatient community services due to the complexity of their situation. Individuals experiencing homelessness often face multiple barriers to accessing healthcare, including lack of stable housing, financial instability, and potential social isolation. Furthermore, substance use disorders require ongoing support and resources that community organizations can provide, such as counseling, rehabilitation programs, and access to healthcare services. Outpatient community services are specifically designed to address the needs of marginalized populations, including those struggling with addiction and homelessness. These services can help this individual find housing, connect to treatment programs, and establish a support network, which are all crucial for recovery and stabilization. In contrast, the other clients—while they may need support—are in circumstances that are less critical in terms of immediate risk and resource requirements. The newly diagnosed client with skin cancer has family support, the client recovering from a stroke is transitioning to inpatient rehab which focuses on rehabilitation needs, and the client leaving against medical advice may require further monitoring, but their situation does not highlight the urgent need for a community service referral as prominently as that of the homeless client with a substance use disorder.

4. What is the highest priority intervention for a patient with a suspected pneumothorax?

A. Monitor oxygen saturation levels

B. Administer an intravenous bolus

C. Prepare for chest decompression

D. Position the patient for comfort

The highest priority intervention for a patient with a suspected pneumothorax is to prepare for chest decompression. A pneumothorax occurs when air enters the pleural space, leading to decreased lung expansion and potential respiratory distress. In severe cases, this condition can compromise the patient's ability to breathe adequately and can lead to tensions pneumothorax, a life-threatening situation where increased pressure in the thoracic cavity can compromise cardiac output and respiratory function. Preparing for chest decompression directly addresses the underlying issue of trapped air in the pleural space, which is crucial for restoring adequate lung expansion and function. This intervention is prioritized over others because timely decompression can prevent the progression of respiratory failure and stabilize the patient. Monitoring oxygen saturation, administering an intravenous bolus, and positioning the patient for comfort are all important supportive measures in managing a pneumothorax, but they do not resolve the immediate threat that a pneumothorax poses. While monitoring oxygen saturation helps assess the patient's respiratory status, it cannot rectify the underlying cause. Similarly, an intravenous bolus may be necessary for hydration or blood pressure support, but it does not address the critical need for airway management in the context of a pneumothorax. Positioning the patient for comfort might improve

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5. During group therapy, which client requires immediate intervention from the nurse?

A. A client repeatedly washing their hands

B. A client talking over others

C. A client yelling and shouting at others

D. A client requesting discharge

In a group therapy setting, a client who is yelling and shouting at others indicates a loss of control and may pose a risk to themselves or the group. This behavior can create a disruptive and potentially threatening environment, making it essential for the nurse to intervene immediately to restore safety and ensure that all participants feel secure. The nurse's priority is to address any aggressive or volatile behavior to prevent escalation, protect the clients, and reestablish a therapeutic atmosphere. The act of yelling and shouting suggests not only emotional distress but may also signal a need for urgent support or de-escalation techniques. Providing immediate intervention can help the client express their feelings in a more constructive way, and it also protects the other group members from feeling threatened or unsafe. Client behaviors such as repeatedly washing hands, talking over others, or requesting discharge, while requiring attention, do not pose an immediate risk to the safety of the group. These behaviors can be managed with appropriate interventions designed to support the clients in a therapeutic manner, but they do not necessitate the same level of urgency as addressing aggressive behaviors.

6. What immediate action should the nurse take for a client with anorexia nervosa?

A. Consult the social worker for discharge planning

B. Administer venlafaxine to the client

C. Obtain a blood sample to evaluate lithium levels

D. Initiate intravenous fluids

In managing a client with anorexia nervosa, the immediate action of initiating intravenous fluids is critical due to the potential for severe dehydration and electrolyte imbalances that can accompany this condition. Clients with anorexia may have significantly restricted food and fluid intake, which can lead to life-threatening complications such as cardiac arrhythmias, diminished renal function, and overall metabolic instability. By administering intravenous fluids, the nurse can effectively address hydration needs and help stabilize the client, which is essential for their health and safety. This intervention also prepares the client for any further treatment, such as nutritional rehabilitation or psychological support, by ensuring they are physically capable of handling these approaches. The other options, while relevant in the broader context of the client's care, do not address immediate life-threatening concerns. Discharge planning, medication administration, or testing for lithium levels are not urgent priorities when the risk of dehydration and its complications is present. Thus, initiating intravenous fluids takes precedence as an immediate and necessary intervention.

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7. What task is appropriate to assign to a licensed practical/vocational nurse?

A. Manage a patient suspected of compartment syndrome

B. Provide discharge teaching to a patient with Hepatitis A

C. Insert a nasogastric tube for a paralytic ileus

D. Caring for a post-op prostate resection patient with spasms

Assigning the task of inserting a nasogastric tube for a patient with a paralytic ileus to a licensed practical/vocational nurse (LPN/VN) is appropriate because this procedure falls within the scope of practice for LPNs. They are trained to perform specific tasks related to patient care, including basic nursing procedures such as inserting nasogastric tubes under the supervision of registered nurses (RNs) or physicians. In scenarios involving a paralytic ileus, the insertion of an NG tube may be necessary to decompress the stomach and relieve symptoms. LPNs are equipped to handle such tasks, especially when the patient requires basic assistance and monitoring during the procedure. In contrast, managing a patient suspected of compartment syndrome generally necessitates a higher level of clinical judgment and assessment skills reserved for RNs. This condition requires rapid assessment and potential surgical intervention, which is beyond the scope of an LPN. Providing discharge teaching for a patient with Hepatitis A also typically requires an RN, as it involves complex information that includes diet, self-care, and specific follow-up guidelines that may require a deeper understanding of the condition and potential complications. Caring for a post-operative prostate resection patient with spasms may involve assessments and interventions

8. When preparing for initial rounds, which client should the nurse assess first?

A. The client with diabetes who is being discharged today

B. A 32-year-old female with a tracheostomy experiencing copious secretions

C. A 16-year-old scheduled for physical therapy

D. An 80-year-old male with a decubitus ulcer needing a dressing change

Assessing the client with a tracheostomy who is experiencing copious secretions is the priority in this scenario due to the immediate risk to their airway. Clients who have a tracheostomy are at a higher risk for airway obstruction, especially if they are producing excessive secretions that can hinder breathing. The vital nature of maintaining a clear airway means that this client's situation requires urgent attention to prevent complications, such as respiratory distress or hypoxia. The other clients also have needs that require care, but they do not present the same level of immediate risk. For instance, the client with diabetes who is being discharged does require careful assessment to ensure all discharge instructions are understood, but this is not an acute situation. The 16-year-old scheduled for physical therapy is likely stable and can be assessed after clients with more pressing concerns. Similarly, while the 80-year-old male with a decubitus ulcer requires a dressing change, this is more of a routine care issue that can be attended to later once immediate airway concerns are addressed. Prioritizing clients based on the severity of their condition is essential in nursing practice, particularly when it comes to life-threatening issues such as compromised airways.

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9. According to Maslow's Hierarchy of Needs, which of the following is the highest priority for a nurse to address?

A. The need to develop trust versus mistrust

B. The need to be free of fear and anxiety

C. The need for adequate cardiovascular functioning

D. The need for a patent airway

In Maslow's Hierarchy of Needs, physiological needs are positioned at the base of the pyramid and represent the most fundamental and crucial requirements for survival. Among these physiological needs, the need for a patent airway is the highest priority because it directly impacts a person's ability to breathe and obtain oxygen, which is essential for life. Without adequate oxygenation, all other needs become secondary, as survival is not possible if the airway is obstructed. Addressing a patent airway takes precedence over psychological or developmental needs, such as trust versus mistrust or freedom from fear and anxiety. While these are important for overall well-being and emotional health, the immediate need for survival and maintaining adequate respiratory function must come first in a healthcare setting. Cardiovascular functioning, while also critical for life, is secondary to the airway because no effective circulation can occur without proper oxygenation. Therefore, ensuring that a patient has a clear airway is paramount before addressing other needs.

10. Which action is the highest priority for a nurse caring for a 2-year-old patient who ingested a household chemical?

A. Assess the client.

B. Ensure no further exposure to poison.

C. Identify the specific type of poison.

D. Administer the antidote if available.

In a situation where a 2-year-old has ingested a household chemical, the highest priority is to assess the client. This assessment is crucial as it provides immediate information about the child's current condition, including vital signs, level of consciousness, and any potential symptoms of poisoning, such as difficulty breathing, vomiting, or seizures. Gathering this information helps determine the severity of the situation and informs subsequent interventions. While ensuring that there is no further exposure to the poison is important, the priority is to evaluate the child's immediate health status first. Similarly, identifying the specific type of poison is significant for treatment but must come after assessing the child's condition, as the urgency lies in stabilizing the patient's health. Administering an antidote can be lifesaving, but it should only be done after understanding the patient's state and confirming the appropriateness of the antidote for the specific substance ingested. Prioritizing assessment allows the nurse to make informed decisions regarding the interventions that follow.

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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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