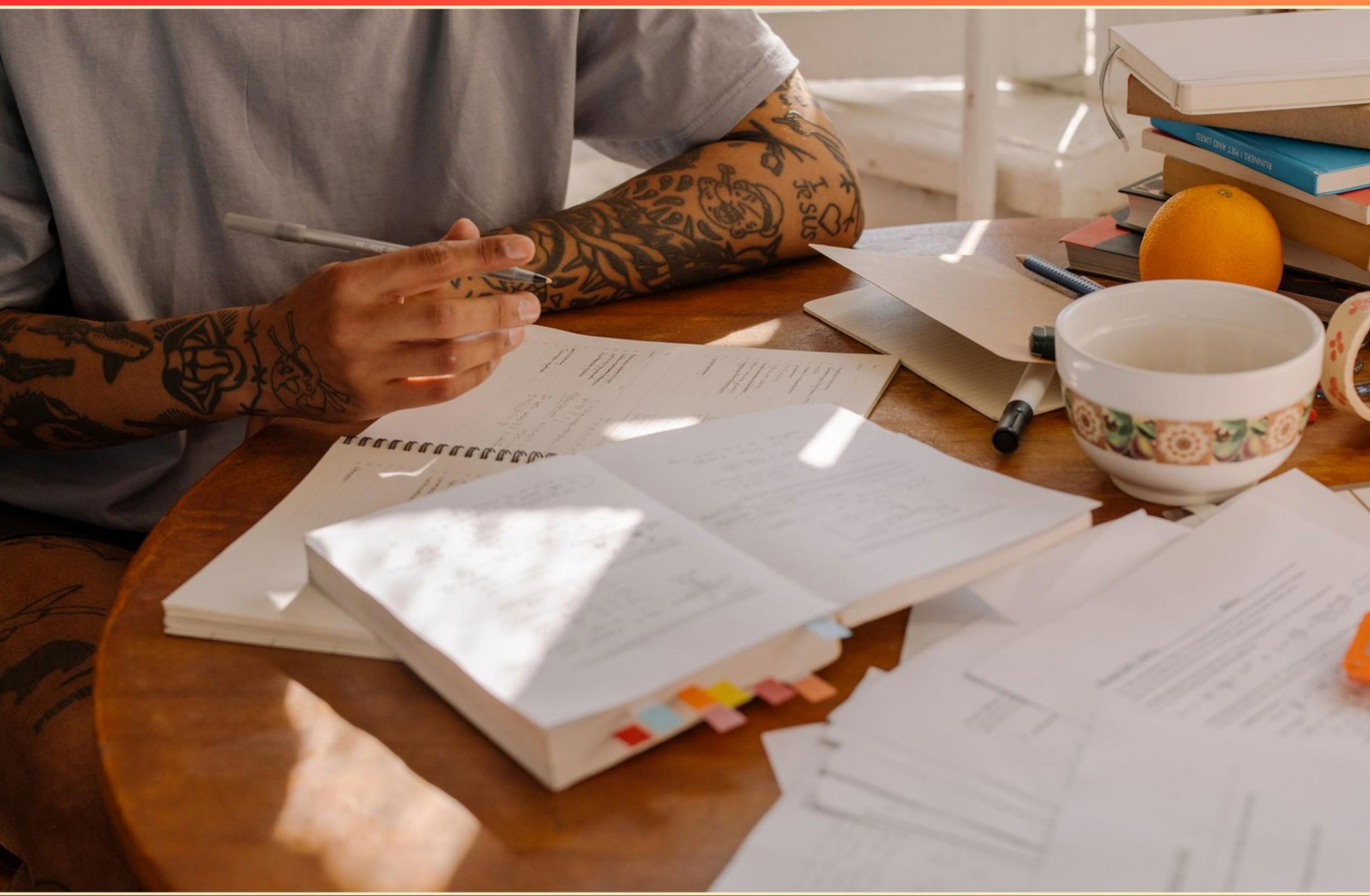
NMNC 3110 INTRODUCTION TO NURSING CONCEPTS EXAM 1 PRACTICE (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR THE FULL VERSION STUDY GUIDE

https://nmnc3110introtonursing1.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 15

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. Which statement correctly lists the components of the chain of infection and a method to interrupt transmission in a health care setting?

A. Agent, reservoir, portal of exit, mode of transmission, portal of entry, susceptible host.

B. Agent, reservoir, portal of exit, mode of transmission, portal of entry, susceptible host; hand hygiene and PPE; isolation procedures.

C. Bacteria, transmission, symptoms, recovery.

D. Pathogen, host, environment, disease progression.

2. Which signs may indicate dehydration in a patient taking a diuretic?

A. Dry mucous membranes, reduced skin turgor, tachycardia, dizziness or orthostatic symptoms.

B. Sweating, increased saliva, bradycardia.

C. Hypertension, edema, bradypnea.

D. Hyperglycemia, tremor, polydipsia.

3. Define isotonic, hypotonic, and hypertonic IV solutions and give one clinical use for each.

A. Isotonic has osmolality higher than plasma; used for dehydration.

B. Hypotonic has osmolality similar to plasma; used for fluid resuscitation.

C. Hypertonic has osmolality lower than plasma; used to hydrate cells.

D. Isotonic has osmolality similar to plasma (e.g., 0.9% NS) used for fluid resuscitation; hypotonic has lower osmolality (e.g., 0.45% NS) used to rehydrate cells; hypertonic has higher osmolality (e.g., 3% NS) used to reduce cellular edema or correct severe hyponatremia.

4. Which of the following is an example of a professional nursing responsibility aligned with health promotion?

A. Caregiver

B. Patient Advocate

C. Autonomy

D. Health Promotion

5. Which statement best defines an expert nurse according to Benner?

A. A nurse with diverse experience and intuitive grasp

B. A nurse who follows protocol exactly

C. A nurse who has only classroom training

D. A nurse who works on a single unit for many years

SAMPLE

6. A nurse observes a patient with a shuffling gait and, after testing strength, concludes a mobility impairment. This is an example of

A. Clustering cues

B. Reflection

C. Clinical inference

D. Validation

7. What are key interventions to prevent pressure injuries?

A. Reposition every 2 hours, use pressure-relieving surfaces, keep skin clean and dry, maintain nutrition

B. Reposition once a day, ignore moisture, massage aggressively

C. Use only dry air blankets, avoid nutrition

D. Maintain immobility to reduce skin shear

8. Which description accurately defines isotonic IV solutions and their clinical use?

A. Isotonic solutions have osmolality similar to plasma and are used for fluid resuscitation.

B. Hypotonic solutions are used for fluid expansion.

C. Hypertonic solutions are used to hydrate cells.

D. Isotonic has osmolality similar to plasma and is used for fluid resuscitation.

9. Which statement describes evidence-based practice in nursing?

A. Relying solely on tradition.

B. Integrating best available research evidence, clinical expertise, and patient preferences to make care decisions.

C. Focusing only on patient preferences without evidence.

D. Ignoring clinical expertise.

10. What is the recommended hand hygiene technique when hands are not visibly soiled?

A. Use an alcohol-based hand sanitizer

B. Rub hands with soap and water for at least 20 seconds

C. Wipe hands on a towel without washing

D. Rinse hands with cold water only and air dry

SAMPLE

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. Which statement correctly lists the components of the chain of infection and a method to interrupt transmission in a health care setting?

A. Agent, reservoir, portal of exit, mode of transmission, portal of entry, susceptible host.

B. Agent, reservoir, portal of exit, mode of transmission, portal of entry, susceptible host; hand hygiene and PPE; isolation procedures.

C. Bacteria, transmission, symptoms, recovery.

D. Pathogen, host, environment, disease progression.

The main idea is the chain of infection and how to break it in health care. The chain has six links: the infectious agent (the pathogen), the reservoir where the pathogen lives, the portal of exit it uses to leave the reservoir, the mode of transmission to spread to a new host, the portal of entry into the new host, and a susceptible host who can become infected. To interrupt transmission, you target these links with practical actions in clinical settings—hand hygiene, wearing the right PPE, and putting necessary isolation procedures in place. These measures disrupt the spread as soon as one link is blocked, preventing infection from moving from one person to another. The option that includes both the six chain components and the corresponding interruption methods reflects this together, while the other choices either omit the interruption strategies or present terms not aligned with the chain of infection.

2. Which signs may indicate dehydration in a patient taking a diuretic?

A. Dry mucous membranes, reduced skin turgor, tachycardia, dizziness or orthostatic symptoms.

B. Sweating, increased saliva, bradycardia.

C. Hypertension, edema, bradypnea.

D. Hyperglycemia, tremor, polydipsia.

Diuretics increase fluid loss, so signs of dehydration reflect a reduced circulating volume and impaired perfusion. Dry mucous membranes and reduced skin turgor show fluid loss from the body's tissues, while tachycardia is a common compensatory response to maintain cardiac output in the face of hypovolemia. Dizziness or orthostatic symptoms occur when standing due to decreased cerebral perfusion from low intravascular volume. The other options don't fit dehydration from diuretic use: sweating with increased saliva can occur with dehydration in general but isn't a specific or reliable cluster here, and bradycardia would be unusual in dehydration. Hypertension and edema indicate fluid excess rather than deficit, and bradypnea is not a typical dehydration sign. Hyperglycemia, tremor, and polydipsia point more to metabolic or endocrine issues rather than the acute fluid deficit caused by diuretics.

SAMPLE

3. Define isotonic, hypotonic, and hypertonic IV solutions and give one clinical use for each.

A. Isotonic has osmolality higher than plasma; used for dehydration.

B. Hypotonic has osmolality similar to plasma; used for fluid resuscitation.

C. Hypertonic has osmolality lower than plasma; used to hydrate cells.

D. Isotonic has osmolality similar to plasma (e.g., 0.9% NS) used for fluid resuscitation; hypotonic has lower osmolality (e.g., 0.45% NS) used to rehydrate cells; hypertonic has higher osmolality (e.g., 3% NS) used to reduce cellular edema or correct severe hyponatremia.

Isotonic, hypotonic, and hypertonic IV solutions are distinguished by how their osmolality compares to that of plasma. Isotonic solutions have osmolality similar to plasma, so they stay mainly in the intravascular space and are used to rapidly expand circulating volume for fluid resuscitation after dehydration or blood loss. Hypotonic solutions have lower osmolality than plasma, so water moves into cells; they are used to rehydrate intracellular fluid when cellular hydration is the goal, though they must be used carefully to avoid cellular swelling and hyponatremia. Hypertonic solutions have higher osmolality than plasma, drawing water out of cells into the extracellular space; they are used to reduce cellular edema (such as cerebral edema) or to correct severe hyponatremia by raising serum sodium.

4. Which of the following is an example of a professional nursing responsibility aligned with health promotion?

A. Caregiver

B. Patient Advocate

C. Autonomy

D. Health Promotion

Health promotion is the action nurses take to prevent illness and improve well being by educating patients, encouraging healthier choices, and creating environments that support good health. As a professional responsibility, it encompasses assessing needs, planning and delivering targeted health education, guiding behavior change, and evaluating outcomes to empower individuals and communities to manage their health effectively. While roles like caregiver or patient advocate and the principle of autonomy are important and can support health promotion, the explicit nursing responsibility described here is health promotion itself—the direct activity of advancing health through prevention, education, and enabling positive health behaviors.

5. Which statement best defines an expert nurse according to Benner?

A. A nurse with diverse experience and intuitive grasp

B. A nurse who follows protocol exactly

C. A nurse who has only classroom training

D. A nurse who works on a single unit for many years

In Benner's framework, an expert nurse is someone who has accumulated diverse clinical experience across many situations and develops an intuitive grasp of patient care. This intuitive grasp comes from tacit knowledge—recognizing subtle cues, patterns, and potential complications before they become obvious—and using it to make rapid, holistic judgments rather than relying solely on step-by-step protocols. This breadth of experience across different settings lets an expert anticipate needs, adapt plans, and tailor care to the individual patient. Choices that emphasize strict protocol adherence, limited formal experience, or long-term specialization on a single unit without broader exposure do not capture the depth of intuition and flexible problem-solving that characterize expert nursing.

SAMPLE

6. A nurse observes a patient with a shuffling gait and, after testing strength, concludes a mobility impairment. This is an example of

A. Clustering cues

B. Reflection

C. Clinical inference

D. Validation

Clinical inference is the process of interpreting cues and assessment data to reach a conclusion about a patient's health status. Here, the nurse's observation of a shuffling gait (a cue) and subsequent strength testing lead to concluding there is a mobility impairment, which is forming an inference about the patient's function. This goes beyond just organizing data (clustering cues), thinking about one's own reasoning (reflection), or confirming a finding with another source (validation).

7. What are key interventions to prevent pressure injuries?

A. Reposition every 2 hours, use pressure-relieving surfaces, keep skin clean and dry, maintain nutrition

B. Reposition once a day, ignore moisture, massage aggressively

C. Use only dry air blankets, avoid nutrition

D. Maintain immobility to reduce skin shear

Preventing pressure injuries focuses on relieving pressure, protecting the skin, and supporting tissue nutrition. Regular repositioning relieves continuous pressure on bony prominences and helps restore blood flow to stressed tissues; doing this every couple of hours keeps capillaries from staying occluded and reduces tissue damage. Using pressure-relieving surfaces, such as specialized mattresses, overlays, or cushions, distributes weight more evenly and lowers peak pressures at vulnerable points like heels, sacrum, and elbows. Skin care is essential: keep the skin clean and dry to prevent moisture-related breakdown that weakens protection against friction and shear. Nutrition matters too—adequate protein and calories, along with vitamins and minerals, support skin integrity and the body's ability to heal micro-injuries. In addition, manage moisture from incontinence and avoid techniques that harm the skin, like aggressive rubbing or dragging when repositioning, which can cause shear. Repositioning only once a day, ignoring moisture, or relying on measures that don't address pressure relief and nutrition won't prevent injuries and can worsen risk. Likewise, immobilizing a patient does not prevent pressure injuries; it actually increases the duration of pressure and the chance of injury.

SAMPLE

8. Which description accurately defines isotonic IV solutions and their clinical use?

A. Isotonic solutions have osmolality similar to plasma and are used for fluid resuscitation.

B. Hypotonic solutions are used for fluid expansion.

C. Hypertonic solutions are used to hydrate cells.

D. Isotonic has osmolality similar to plasma and is used for fluid resuscitation.

Isotonic IV solutions have osmolality similar to plasma, so when you infuse them they stay mainly in the extracellular fluid and expand the circulating blood volume without causing water to move into or out of cells. This makes them ideal for fluid resuscitation in situations like hypovolemia from loss, dehydration, injury, or surgery, where you need to rapidly restore perfusion and blood pressure. Common examples include normal saline and lactated Ringer's solution. Hypotonic solutions, having lower osmolality than plasma, tend to draw water into cells, which can hydrate cells but may not effectively expand intravascular volume and can worsen edema or cause cellular swelling. Hypertonic solutions have higher osmolality and pull water out of cells into the extracellular space, useful in specific situations (such as reducing cerebral edema or achieving rapid plasma volume expansion with small volumes) but not for routine fluid resuscitation. Thus, the description focusing on isotonic solutions being similar in osmolality to plasma and used for fluid resuscitation best captures their role.

9. Which statement describes evidence-based practice in nursing?

A. Relying solely on tradition.

B. Integrating best available research evidence, clinical expertise, and patient preferences to make care decisions.

C. Focusing only on patient preferences without evidence.

D. Ignoring clinical expertise.

Evidence-based practice in nursing means using the best available research evidence together with clinical expertise and patient preferences to guide care decisions. This approach ensures care is scientifically grounded while remaining practical and aligned with what matters to the patient. The statement that describes this approach—integrating the strongest research evidence with clinical judgment and patient values to inform decisions—embodies evidence-based practice. The other options fall short because they omit one or more essential elements: relying solely on tradition ignores current research; focusing only on patient preferences disregards evidence of what is effective; ignoring clinical expertise removes the professional experience and context that guide safe, appropriate care.

10. What is the recommended hand hygiene technique when hands are not visibly soiled?

A. Use an alcohol-based hand sanitizer

B. Rub hands with soap and water for at least 20 seconds

C. Wipe hands on a towel without washing

D. Rinse hands with cold water only and air dry

Alcohol-based hand sanitizer is the recommended method when hands are not visibly soiled because it quickly reduces most microbes on clean skin and is convenient for routine use. To use it effectively, apply a generous amount to the palm and rub all surfaces of both hands—front and back, between the fingers, around the thumbs, and under the nails—until the product is dry, typically 20–30 seconds. Soap and water for at least 20 seconds should be used when hands are visibly dirty or contaminated, or after certain exposures where thorough removal of pathogens is needed. Wiping hands on a towel without washing does not remove microbes reliably, and rinsing with cold water only and air drying does not provide proper disinfection.

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://nmnc3110introtonursing1.examzify.com

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

SAMPLE