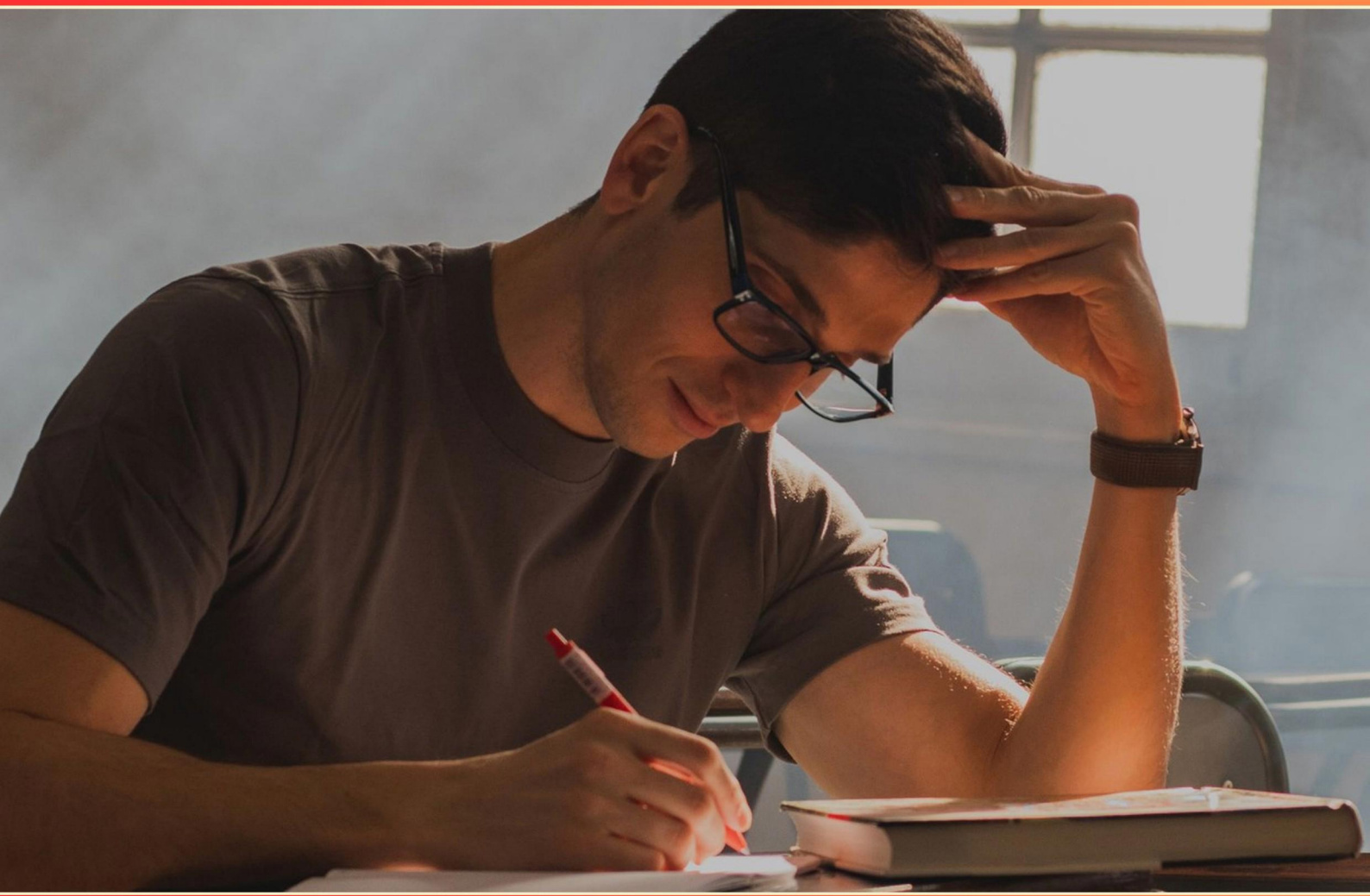
NURSING ENTRANCE EXAM (NEX) PRACTICE EXAM (SAMPLE)

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 is a common nursing intervention for managing respiratory distress?

A. Restricting fluid intake

B. Administering oxygen and positioning the patient for optimal airflow

C. Increasing patient activity levels

D. Providing sedatives to calm the patient

2. Which vital signs are typically monitored in nursing?

A. Weight and height

B. Respiration and blood pressure

C. Blood type and glucose level

D. Only temperature

3. What is the result of the meiotic division of cells?

A. Will double the usual number of chromosomes

B. Will give rise to different types of white blood cells

C. Are exactly like their parents

D. Contain half the usual number of chromosomes

4. Why is recognizing personal biases important for nurses?

A. To avoid unproductive discussions with colleagues

B. To provide nonjudgmental and equitable care to all patients

C. To ensure better time management during shifts

D. To focus solely on technical skills

5. Why is documentation vital in nursing practice?

A. It ensures a personal record of activities

B. It provides a legal record of care and facilitates communication among healthcare providers

C. It is required for job performance evaluations

D. It is used to bill patients for services

6. What event can lead to the formation of a blood clot after an injury?

A. Ruptured platelets release thromboplastin

B. Bone marrow cells decrease platelet production

C. Red blood cells release hemoglobin

D. White blood cells release antibodies

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7. How does stress management benefit nurses in their practice?

A. It allows for more time off from work

B. It helps maintain personal well-being and improve patient care quality

C. It reduces the need for continuing education

D. It ensures higher salaries for nurses

8. What is the definition of 'informed consent' in nursing?

A. A process where patients agree to treatment after understanding risks and benefits

B. A legal document required for all medical procedures

C. A verbal agreement made by the patient during a visit

D. An emergency response to patient refusal of treatment

9. What is the role of an axon in a neuron?

A. Transmits impulses away from the cell body

B. Connects neurons to muscles

C. Receives signals from other neurons

D. Processes incoming sensory information

10. Why can't red blood cells pass through the kidney's blood capillaries during filtration?

A. They are too large to fit through

B. They are filtered out in the liver first

C. They are not needed in urine

D. The kidney does not filter blood

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Answers

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

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Explanations

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1. What is a common nursing intervention for managing respiratory distress?

A. Restricting fluid intake

B. Administering oxygen and positioning the patient for optimal airflow

C. Increasing patient activity levels

D. Providing sedatives to calm the patient

Administering oxygen and positioning the patient for optimal airflow is a primary nursing intervention for managing respiratory distress. The rationale behind this approach is based on the need to enhance oxygenation and improve the patient's ability to breathe effectively. When a patient is experiencing respiratory distress, they may struggle to get enough oxygen due to conditions like asthma, pneumonia, or chronic obstructive pulmonary disease (COPD). Administering supplemental oxygen helps to raise the arterial oxygen saturation levels, ensuring that vital organs receive adequate oxygen to function properly. This can alleviate symptoms like shortness of breath and improve overall respiratory function. Positional therapy is equally important in managing respiratory distress. Elevating the patient's upper body or placing them in a position that encourages lung expansion can help maximize airway patency and facilitate better gas exchange. For example, sitting the patient upright or in a high-Fowler's position can reduce the work of breathing and improve comfort. The other approaches listed may not only be less effective but can also potentially worsen the patient's condition. Restricting fluid intake could lead to dehydration and thicker secretions in the respiratory tract, making it even more difficult for the patient to breathe. Increasing patient activity levels during acute respiratory distress is inappropriate, as it can elevate oxygen demand and exacerbate

2. Which vital signs are typically monitored in nursing?

A. Weight and height

B. Respiration and blood pressure

C. Blood type and glucose level

D. Only temperature

Monitoring vital signs is a fundamental practice in nursing because they provide essential information about a patient's physiological status. The correct answer includes respiration and blood pressure as these are key indicators of a patient's health. Respiration rate is critical because it reflects how well a patient is breathing and their oxygenation status. It gives insights into the respiratory system's function and can indicate potential problems such as respiratory distress or underlying issues such as infections or chronic lung conditions. Blood pressure is another vital sign monitored regularly because it measures the force of blood against the walls of arteries. Abnormal blood pressure readings can indicate cardiovascular issues or other health problems like dehydration, kidney disease, or hormonal imbalances. In comparison, other options do not encompass the standard scope of vital signs as comprehensively. While weight and height are important for calculating body mass index and can provide insights into overall health, they aren't classified as vital signs. Blood type and glucose level, although significant for specific medical conditions, don't fall under the category of routine vital signs. Monitoring only temperature overlooks other critical parameters that can indicate a patient's health status. Thus, respiration and blood pressure are vital components of the nursing assessment and directly relate to patient safety and care.

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3. What is the result of the meiotic division of cells?

A. Will double the usual number of chromosomes

B. Will give rise to different types of white blood cells

C. Are exactly like their parents

D. Contain half the usual number of chromosomes

The result of meiotic division of cells is that they contain half the usual number of chromosomes. This process is fundamental to sexual reproduction, as it reduces the chromosome number by half, creating gametes—sperm and eggs in animals. In humans, for instance, somatic cells contain 46 chromosomes (23 pairs), but meiotic division produces gametes with only 23 chromosomes. This reduction is crucial because, during fertilization, when a sperm and egg unite, the full complement of chromosomes is restored to 46. This ensures genetic diversity while maintaining a consistent chromosome number across generations. The processes of meiosis, which include two rounds of division (meiosis I and meiosis II), create four non-identical daughter cells, each with half the original chromosome number, contributing to genetic variation in offspring.

4. Why is recognizing personal biases important for nurses?

A. To avoid unproductive discussions with colleagues

B. To provide nonjudgmental and equitable care to all patients

C. To ensure better time management during shifts

D. To focus solely on technical skills

Recognizing personal biases is essential for nurses because it directly impacts the quality of care provided to patients. By being aware of their own biases, nurses can consciously work to eliminate prejudgments based on a patient's background, beliefs, or lifestyle choices. This self-awareness allows nurses to provide equitable and nonjudgmental care, fostering an environment where all patients feel respected and understood. Such an approach not only improves the nurse-patient relationship but also supports better health outcomes, as patients are more likely to engage openly in their care when they feel valued. In contrast, distractions like unproductive discussions, time management issues, or solely focusing on technical skills can divert attention away from the paramount goal of delivering compassionate and comprehensive care. Recognizing personal biases ensures that the nurse's actions and decisions are centered on patient needs rather than preconceived notions. This cultivates an inclusive healthcare environment, ultimately enhancing the patient experience.

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5. Why is documentation vital in nursing practice?

A. It ensures a personal record of activities

B. It provides a legal record of care and facilitates communication among healthcare providers

C. It is required for job performance evaluations

D. It is used to bill patients for services

Documentation is vital in nursing practice primarily because it provides a legal record of the care provided to patients and facilitates communication among healthcare providers. This legal record is crucial for several reasons: it can help protect both the healthcare provider and the patient by detailing the care that was administered, which is essential in cases of disputes or lawsuits. Comprehensive documentation serves as proof of the nurse's actions, the patient's response to treatment, and any changes in the patient's condition. Moreover, effective documentation enhances communication among the healthcare team. It ensures that all members of the team are informed about the patient's condition, the care that has been given, and any further needs or interventions required. This continuity of care through shared information is vital for patient safety and effective treatment. While keeping a personal record of activities and fulfilling job performance evaluations are important aspects of a nursing career, they do not encompass the full purpose of documentation in the clinical setting. Similarly, although billing may involve documentation, its primary function extends far beyond that to encompass legal, ethical, and interdisciplinary communication responsibilities that are fundamental to nursing practice.

6. What event can lead to the formation of a blood clot after an injury?

A. Ruptured platelets release thromboplastin

B. Bone marrow cells decrease platelet production

C. Red blood cells release hemoglobin

D. White blood cells release antibodies

The formation of a blood clot after an injury is a crucial part of the body's hemostatic response to prevent excessive bleeding. When blood vessels are damaged, platelets—small cell fragments in the blood—quickly respond to the site of injury. When platelets rupture, they release substances, including thromboplastin (also known as tissue factor). Thromboplastin plays a pivotal role in the clotting cascade, initiating a series of biochemical reactions that convert prothrombin into thrombin. Thrombin then catalyzes the conversion of fibrinogen into fibrin, creating a mesh that stabilizes the platelet plug and forms a solid blood clot. In contrast, decreased platelet production, the release of hemoglobin from red blood cells, or antibody release from white blood cells do not directly contribute to the clotting process. Reduced platelet production would impair clot formation, while the roles of red blood cells and white blood cells are more related to oxygen transport and immune response, respectively, rather than to initiating or sustaining the clotting mechanism.

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7. How does stress management benefit nurses in their practice?

A. It allows for more time off from work

B. It helps maintain personal well-being and improve patient care quality

C. It reduces the need for continuing education

D. It ensures higher salaries for nurses

Stress management is crucial for nurses as it directly influences both their personal well-being and the quality of care they provide to patients. When nurses effectively manage stress, they experience enhanced mental and emotional health, which is vital in a demanding field such as nursing. This improvement in personal well-being leads to increased job satisfaction, reduced burnout, and better overall morale. Additionally, a nurse who is in a good mental state is more likely to be focused, attentive, and compassionate, which translates to improved patient care. Being able to handle stress can lead to better decision-making and efficiency in the clinical environment, ultimately benefiting patients' health outcomes. Therefore, the ability to manage stress is not just a personal advantage but is also integral to sustaining high standards of patient care in the healthcare setting. This holistic approach to stress management underscores its importance in the nursing profession, emphasizing how interconnected a nurse's well-being is with their ability to care for others effectively.

8. What is the definition of 'informed consent' in nursing?

A. A process where patients agree to treatment after understanding risks and benefits

B. A legal document required for all medical procedures

C. A verbal agreement made by the patient during a visit

D. An emergency response to patient refusal of treatment

Informed consent is fundamentally about the process of communication between the healthcare provider and the patient, ensuring that the patient fully understands the nature of their medical treatment, including the potential risks, benefits, and alternatives. This definition reflects the core principles of autonomy and respect for patients as individuals capable of making decisions about their own health care. Informed consent requires that patients are provided with all relevant information in a comprehensible manner, allowing them to weigh the potential outcomes before making a decision on whether to proceed with the treatment. This process not only protects patients but also serves to encourage their active participation in their healthcare decisions. While a legal document may be involved in formalizing this agreement, simply being a document does not capture the essence of informed consent, which is heavily reliant on the communication process. Similarly, a verbal agreement lacks the depth and understanding that characterized informed consent, as it does not ensure the patient comprehends the implications fully. Emergency responses or treatment refusals do not pertain to informed consent in a direct sense, as informed consent specifically involves a patient's agreement after being adequately informed.

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9. What is the role of an axon in a neuron?

A. Transmits impulses away from the cell body

B. Connects neurons to muscles

C. Receives signals from other neurons

D. Processes incoming sensory information

The role of an axon in a neuron is primarily to transmit impulses away from the cell body. Axons are long, slender projections that are critical for conducting electrical signals, known as action potentials, from the neuron's cell body to other neurons, muscles, or glands. This function is essential for communication within the nervous system and supports various physiological processes, including reflex actions and the coordination of muscle movements. In contrast to the function of the axon, other structures in the neuron, such as dendrites, are responsible for receiving signals from other neurons, thereby playing a crucial role in the integrative functions of a neuron. Some types of neurons have synaptic connections to muscles, but the axon itself does not connect directly to muscles; rather, it conveys the signal that leads to muscle action. Processing incoming sensory information is also not a direct role of the axon; instead, this function typically occurs in specialized areas of the brain or within the sensory neurons before signals are relayed through the axon for further processing.

10. Why can't red blood cells pass through the kidney's blood capillaries during filtration?

A. They are too large to fit through

B. They are filtered out in the liver first

C. They are not needed in urine

D. The kidney does not filter blood

Red blood cells cannot pass through the kidney's blood capillaries during filtration primarily because they are too large to fit through the tiny pores in the glomerular membrane. The primary function of the kidneys is to filter blood and remove waste, but this process is selective. The glomeruli, which are networks of tiny blood vessels in the kidneys, are designed to allow small molecules, like water, electrolytes, and waste products, to pass through while preventing larger substances, including red blood cells and proteins, from entering the filtrate. This selective filtration ensures that vital components like red blood cells remain in circulation, thereby maintaining the body's oxygen-carrying capacity and overall homeostasis. The other choices do not reflect the accurate physiology of kidney function; for instance, red blood cells are not filtered in the liver, nor is the kidney's role solely defined by what is filtered out or needed for urine. The kidneys actively filter blood to regulate various bodily functions, including waste removal and maintaining the balance of fluids and electrolytes.

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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://nln-nex.examzify.com

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

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