PALMER PNLE PRACTICE TEST (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. Information in the patient's chart is inadmissible in court as evidence when

A. The client objects to its use

B. The handwriting is not legible

C. It has too many abbreviations that are 'unofficial'

D. The client's family refuses to have it used

2. PPE and precautions for airborne infection isolation.

A. Surgical mask and gloves; standard precautions

B. Eye protection only

C. Copy of isolation protocol posted at doorway

D. N95 respirator (fit-tested), negative pressure room if available, eye protection as needed, gloves; standard precautions

3. Which management function is most directly about setting goals and outlining means to achieve them?

A. Monitoring

B. Planning

C. Organizing

D. Controlling

4. Which system describes team-based nursing, where care is delivered by a team under a team leader?

A. Modular nursing

B. Nursing care management

C. Primary nursing

D. Team nursing

5. What are priority actions for a patient with suspected sepsis?

A. Ensure airway, breathing, and circulation; obtain cultures; start broad-spectrum antibiotics within 1 hour; aggressive fluid resuscitation; monitor vitals.

B. Isolate the patient and limit fluids.

C. Administer antipyretics and monitor.

D. Delay antibiotic therapy until cultures are positive.

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6. Sensitivity of a diagnostic test is defined as what?

A. True positives divided by (true positives plus false negatives)

B. True negatives divided by (true negatives plus false positives)

C. True positives divided by (true positives plus false positives)

D. False negatives divided by (true positives plus false negatives)

7. If a patient asks to remove oxygen because they wish to die, which is the appropriate nursing response?

A. Refuse the patient and encourage him to verbalize his feelings

B. Follow the patient because it is his right to die gracefully

C. Refuse the patient since euthanasia is not accepted in the Philippines

D. Follow the patient as it is his right to determine the medical regimen he needs

8. Which organ is the principal site of detoxification and metabolism in the body?

A. Kidney

B. Spleen

C. Pancreas

D. Liver

9. What is the nurse's role in ethics and patient advocacy?

A. Protect autonomy, confidentiality, beneficence, nonmaleficence; obtain informed consent; advocate for appropriate care and safety.

B. Ignore confidentiality in emergencies.

C. Withhold information from family.

D. Prioritize staff convenience over patient safety.

10. Staphylococcus aureus is best described as which genus?

A. Streptococcus

B. Staphylococcus

C. Enterococcus

D. Listeria

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Answers

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

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Explanations

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1. Information in the patient's chart is inadmissible in court as evidence when

A. The client objects to its use

B. The handwriting is not legible

C. It has too many abbreviations that are 'unofficial'

D. The client's family refuses to have it used

Confidentiality of medical information is protected by physician-patient privilege, which means details from a patient's chart are not admissible in court unless the patient consents or a legal exception applies. When the patient objects to using their chart, the objection invokes that privacy protection, making the information inadmissible as evidence in that situation. Legibility, unofficial abbreviations, or a family's refusal do not automatically render records inadmissible. Unreadable notes can often be clarified or supplemented, and abbreviations can be explained by the clinician or properly authenticated. Family refusal does not override the patient's privacy rights or the privilege, which is why the patient's objection is the decisive factor.

2. PPE and precautions for airborne infection isolation.

A. Surgical mask and gloves; standard precautions

B. Eye protection only

C. Copy of isolation protocol posted at doorway

D. N95 respirator (fit-tested), negative pressure room if available, eye protection as needed, gloves; standard precautions

Airborne infection isolation relies on protecting the wearer from inhaling aerosols and containing contaminated air in the environment, plus basic protection for the patient and care providers. The best approach includes a properly fitted respirator (fit-tested N95 or higher), a negative pressure room if available to keep contaminated air from spreading, eye protection as needed, and gloves as part of standard precautions (with gown applied as indicated). These elements together address inhalation risk, exposure to mucous membranes, and universal precautions for care. Surgical masks and gloves don't shield against airborne particles, eye protection alone doesn't prevent inhalation exposure, and simply posting an isolation protocol doesn't provide physical protection.

3. Which management function is most directly about setting goals and outlining means to achieve them?

A. Monitoring

B. Planning

C. Organizing

D. Controlling

Setting goals and mapping out how to reach them is the planning function in management. Planning focuses on the future, identifying what the organization aims to accomplish and deciding the actions, resources, and timelines needed to reach those goals. It answers questions like what to do, how to do it, what resources are required, and by when. Monitoring tracks progress against the plan, organizing arranges resources and tasks to implement the plan, and controlling measures results and makes adjustments to stay on course. So planning is the step that explicitly sets objectives and outlines the means to achieve them.

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4. Which system describes team-based nursing, where care is delivered by a team under a team leader?

A. Modular nursing

B. Nursing care management

C. Primary nursing

D. Team nursing

Team nursing is a care-delivery approach in which a team, led by a team leader, provides care for a group of patients. The team typically includes a registered nurse, licensed practical nurse, and assistive personnel who work together, with the leader planning the care plan, assigning tasks based on each member's skills, and ensuring clear communication and continuity of care. This setup allows flexibility in workload and ensures comprehensive patient coverage, as the team can coordinate and adjust as patient needs change. It differs from other models that focus on individual nurse-patient assignment (primary nursing), care divided by tasks rather than patient needs (functional or modular nursing), or care management that centers on coordinating care across settings rather than bedside team collaboration.

5. What are priority actions for a patient with suspected sepsis?

A. Ensure airway, breathing, and circulation; obtain cultures; start broad-spectrum antibiotics within 1 hour; aggressive fluid resuscitation; monitor vitals.

B. Isolate the patient and limit fluids.

C. Administer antipyretics and monitor.

D. Delay antibiotic therapy until cultures are positive.

Immediate stabilization and rapid broad-spectrum antibiotics are the priority when sepsis is suspected. Start with airway, breathing, and circulation to support oxygenation and perfusion, and monitor the patient closely. While stabilizing, obtain blood cultures (and other relevant cultures) before antibiotics if feasible so the pathogen can be identified later. Do not delay antibiotic therapy—give broad-spectrum antibiotics within one hour of recognizing sepsis. For patients showing hypotension or signs of poor perfusion, begin aggressive IV fluid resuscitation with crystalloids (about 30 mL/kg) and reassess response promptly. Ongoing monitoring, reassessment, and timely source control guide further management. Isolation or limiting fluids, and giving antipyretics alone, do not address the underlying threat and delaying antibiotics worsens outcomes.

6. Sensitivity of a diagnostic test is defined as what?

A. True positives divided by (true positives plus false negatives)

B. True negatives divided by (true negatives plus false positives)

C. True positives divided by (true positives plus false positives)

D. False negatives divided by (true positives plus false negatives)

Sensitivity measures the test's ability to identify those who actually have the disease. It answers: among people with the condition, what fraction test positive? It is calculated as true positives divided by the sum of true positives and false negatives. This reflects how well the test catches real cases and minimizes missed diseases. For context, specificity uses true negatives over (true negatives plus false positives), while the false negative rate uses false negatives over (true positives plus false negatives), and precision (positive predictive value) uses true positives over (true positives plus false positives).

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7. If a patient asks to remove oxygen because they wish to die, which is the appropriate nursing response?

A. Refuse the patient and encourage him to verbalize his feelings

B. Follow the patient because it is his right to die gracefully

C. Refuse the patient since euthanasia is not accepted in the Philippines

D. Follow the patient as it is his right to determine the medical regimen he needs

When someone expresses a wish to die by stopping a life-sustaining treatment, the priority is to protect the patient's life while exploring the distress behind the request. The best response is to refuse to remove the oxygen—so you do not aid self-harm—and invite the patient to talk about what they're feeling. Acknowledge their pain, fear, or hopelessness and encourage them to verbalize these thoughts. This opens the door to assess for depression, physical discomfort, spiritual or existential distress, and to address any immediate safety concerns. It also signals that you take their feelings seriously while staying with them in a supportive, nonjudgmental way. Involve the physician and, if appropriate, palliative care or mental health professionals to discuss goals of care, comfort measures, and next steps. Other approaches that suggest yielding to the request or focusing only on legal or rights considerations miss the essential step of addressing the patient's suffering and safeguarding their life.

8. Which organ is the principal site of detoxification and metabolism in the body?

A. Kidney

B. Spleen

C. Pancreas

D. Liver

The liver handles most detoxification and metabolic processing because it has a large array of enzymes specialized for transforming and neutralizing compounds that come from the gut and bloodstream. It uses these enzymes in two main phases: Phase I reactions, like oxidation by cytochrome P450 enzymes, which introduce or expose functional groups, and Phase II reactions, such as conjugation with glucuronide, sulfate, or glutathione, which make substances more water-soluble. This makes drugs, hormones, and toxins easier to excrete, either into bile or the urine. The liver also processes bilirubin, ammonia, and other waste products, and it serves as a key hub for nutrient metabolism, energy storage, and hormone regulation. Its blood supply from the digestive tract means it immediately encounters many potential toxins, so it's well suited to detoxification and metabolic work. While kidneys filter waste and fluids, and spleen and pancreas serve other essential roles, they're not the primary sites of detoxification and metabolic processing like the liver is.

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9. What is the nurse's role in ethics and patient advocacy?

A. Protect autonomy, confidentiality, beneficence, nonmaleficence; obtain informed consent; advocate for appropriate care and safety.

B. Ignore confidentiality in emergencies.

C. Withhold information from family.

D. Prioritize staff convenience over patient safety.

Nurses advocate for patients by upholding ethical principles that guide care: respecting autonomy, protecting confidentiality, and promoting beneficence while preventing harm. Respecting autonomy means supporting patients' right to make informed choices about their own care, which includes clear communication and obtaining informed consent before any procedure or treatment. Protecting confidentiality means safeguarding a patient's private information and sharing details only with those who are authorized or as required by law or safety needs. Beneficence and nonmaleficence drive nurses to act in the patient's best interest and to avoid causing harm, which translates into managing pain, preventing complications, and ensuring safer, higher-quality care. This advocacy also means speaking up when care isn't appropriate or safe, coordinating with the health care team, and helping patients and families understand options so they can participate in decisions. For example, ensuring a patient understands the risks and benefits of a treatment and confirming consent, protecting medical information during handoffs, and pushing for safe staffing, accurate monitoring, and effective safety measures. Actions that ignore confidentiality, withhold information from family, or put staff convenience above patient safety conflict with these ethical roles and can undermine trust, autonomy, and safety in care.

10. Staphylococcus aureus is best described as which genus?

A. Streptococcus

B. Staphylococcus

C. Enterococcus

D. Listeria

In binomial nomenclature, the first part of a two-part name is the genus. For Staphylococcus aureus, the genus is Staphylococcus, and aureus is the species epithet. Among the choices, only Staphylococcus designates the genus; the others—Streptococcus, Enterococcus, and Listeria—are different genera. So the genus described by Staphylococcus aureus is Staphylococcus. Clinically, bacteria in this genus are typically Gram-positive cocci that form grape-like clusters and are catalase-positive, helping distinguish them from other genera like Streptococcus, which are catalase-negative and usually form chains.

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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://palmerpnle.examzify.com

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

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