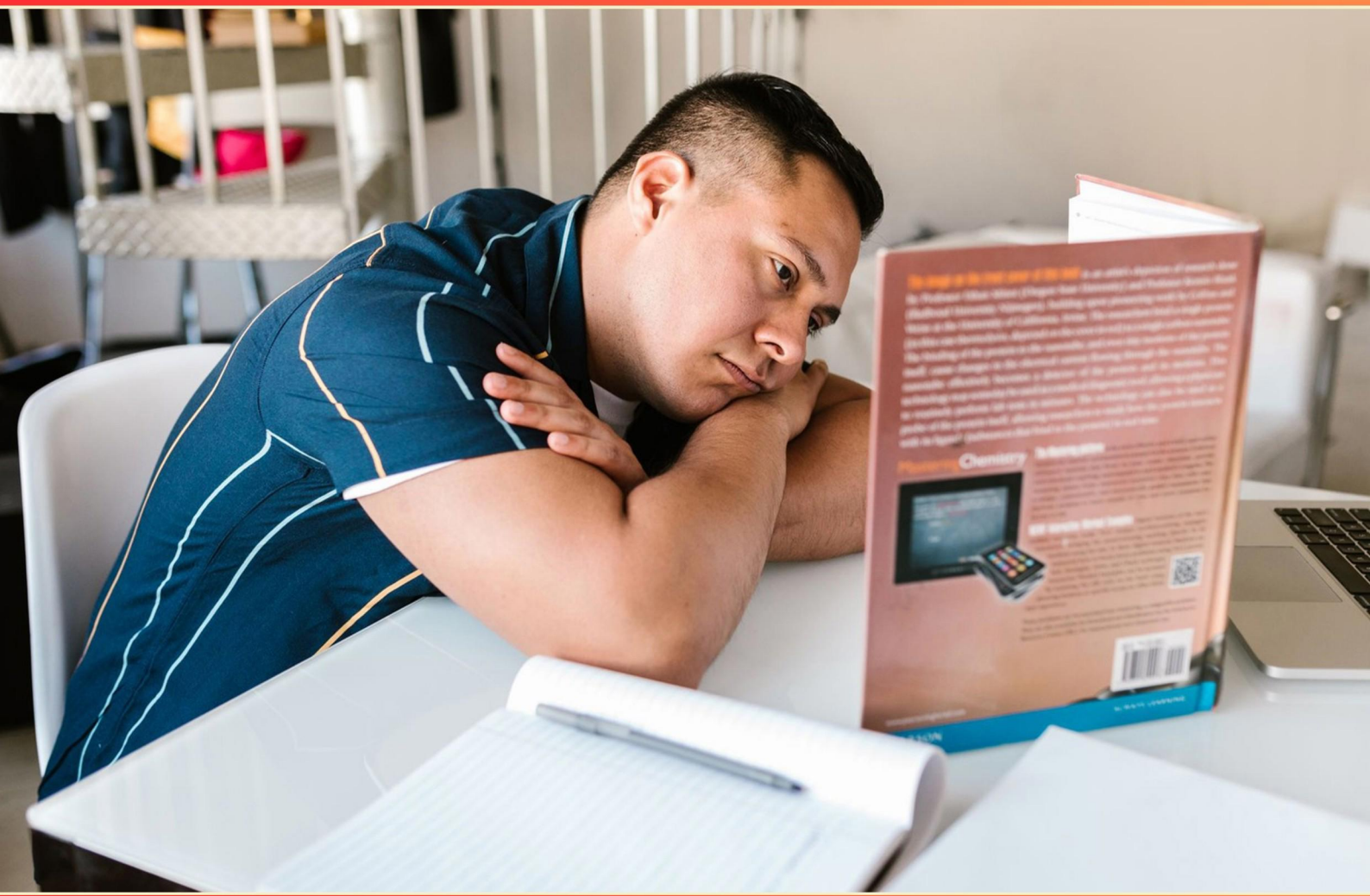
REGISTRATION EXAM FOR PRACTICAL NURSING (REX-PN) PRACTICE TEST (SAMPLE)

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. Which complication is associated with a client diagnosed with acute pericarditis?

A. Cardiac tamponade

B. Hemothorax

C. Pulmonary embolism

D. Tension pneumothorax

2. What is the first action a nurse should take when assessing a client with abdominal pain and diarrhea?

A. Ask about recent travel to Asia or the Middle East

B. Screen for upper respiratory symptoms

C. Determine immunization status

D. Call an ambulance

3. In the management of acute respiratory distress, what is the primary goal of using non-invasive positive pressure ventilation (NIPPV)?

A. Providing supplemental oxygen to correct hypoxemia

B. Reducing the work of breathing and improving ventilation

C. Treating underlying pulmonary infections with positive pressure

D. Preventing the development of tension pneumothorax

4. In a client with suspected renal failure, which laboratory result should prompt immediate nursing intervention?

A. Low hemoglobin levels

B. High potassium levels

C. Increased blood urea nitrogen (BUN)

D. Elevated creatinine levels

5. According to Erikson's psychosocial stages, which stage is a 2-year-old in?

A. Initiative vs. Guilt

B. Industry vs. Inferiority

C. Trust vs. Mistrust

D. Autonomy vs. Shame and Doubt

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6. Which of the following is an appropriate nursing intervention for a client exhibiting signs of hypovolemic shock?

A. Administer insulin immediately

B. Provide isotonic fluids as prescribed

C. Encourage high-sugar snacks

D. Limit fluid intake until stabilized

7. Which of the following demonstrates neologisms in speech in a client with schizophrenia?

A. Words that rhyme or have a similar beginning sound.

B. Reduction in speech; short-worded replies.

C. Words or phrases with meaning only for the client.

D. Going off on tangents and never reaching the point.

8. Which symptom is indicative of enterobiasis in children?

A. Intense perianal itching

B. Fever

C. Foul-smelling stools

D. Decreased appetite

9. When assessing a 4-month-old male infant's heart rate, which action is correct?

A. Auscultate the 4th intercostal space for 60 seconds.

B. Palpate the 5th intercostal space for 30 seconds.

C. Palpate the brachial pulse for 60 seconds.

D. Auscultate the radial pulse for 30 seconds.

10. What initial intervention should the nurse implement for a client with suspected rhabdomyolysis?

A. Administering intravenous fluids

B. Placing the client on a low-potassium diet

C. Administering corticosteroids

D. Initiating prophylactic antibiotic therapy

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Answers

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

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Explanations

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1. Which complication is associated with a client diagnosed with acute pericarditis?

A. Cardiac tamponade

B. Hemothorax

C. Pulmonary embolism

D. Tension pneumothorax

Acute pericarditis, which is the inflammation of the pericardium (the fibrous sac surrounding the heart), can lead to several complications, one of which is cardiac tamponade. This occurs when fluid accumulates in the pericardial space, increasing pressure on the heart and impairing its ability to pump effectively. In acute pericarditis, inflammation can result in an effusion (fluid accumulation), and if this fluid builds up significantly, it creates a situation where the heart is compressed, leading to cardiac tamponade. Symptoms of cardiac tamponade can include hypotension, muffled heart sounds, and jugular venous distention, often referred to as Beck's triad. The other complications listed—hemothorax, pulmonary embolism, and tension pneumothorax—are not primarily associated with acute pericarditis. Hemothorax involves blood accumulation in the pleural space, pulmonary embolism pertains to a blockage in the pulmonary arteries often due to blood clots, and tension pneumothorax involves air trapping in the pleural space leading to lung collapse. While these conditions are serious, they do not result directly from the inflammation associated with acute pericarditis as cardiac tamponade does

2. What is the first action a nurse should take when assessing a client with abdominal pain and diarrhea?

A. Ask about recent travel to Asia or the Middle East

B. Screen for upper respiratory symptoms

C. Determine immunization status

D. Call an ambulance

When assessing a client with abdominal pain and diarrhea, asking about recent travel to regions such as Asia or the Middle East is critical because certain infectious diseases prevalent in these areas, such as viral gastroenteritis, travel-related illnesses, or foodborne pathogens, could significantly impact the client's condition. Travel history can help healthcare professionals identify possible causes of symptoms and guide further diagnostic and treatment decisions. Gathering this information early in the assessment process can expedite appropriate interventions and limit complications. Understanding potential exposure to infectious agents allows for targeted assessments, laboratory testing, and possibly preventive measures to protect both the client and others in case of a contagious illness.

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3. In the management of acute respiratory distress, what is the primary goal of using non-invasive positive pressure ventilation (NIPPV)?

A. Providing supplemental oxygen to correct hypoxemia

B. Reducing the work of breathing and improving ventilation

C. Treating underlying pulmonary infections with positive pressure

D. Preventing the development of tension pneumothorax

The primary goal of using non-invasive positive pressure ventilation (NIPPV) in the management of acute respiratory distress is to reduce the work of breathing and improve ventilation. NIPPV helps patients breathe more easily by delivering air under positive pressure, which assists in opening the airways and promoting better gas exchange in the lungs. This method not only relieves the burden on the respiratory muscles but also enhances oxygenation and ventilation without the need for invasive procedures like intubation. While supplemental oxygen is critical for addressing hypoxemia, NIPPV specifically targets the mechanics of breathing and efficacy of ventilation. It does not directly treat infections but rather supports respiratory function. Furthermore, while the prevention of complications like tension pneumothorax is essential in overall patient care, this is not the main focus of NIPPV. The emphasis on reducing the work of breathing is vital in scenarios like acute respiratory distress, where patients often struggle with low tidal volumes and increased respiratory effort. Thus, NIPPV plays a crucial role in facilitating better respiratory dynamics and improving patient outcomes.

4. In a client with suspected renal failure, which laboratory result should prompt immediate nursing intervention?

A. Low hemoglobin levels

B. High potassium levels

C. Increased blood urea nitrogen (BUN)

D. Elevated creatinine levels

In the context of a client with suspected renal failure, high potassium levels are critical because they can indicate hyperkalemia, a potentially life-threatening condition. The kidneys play a vital role in regulating potassium levels in the body, and when renal function declines, potassium can accumulate due to decreased excretion. Elevated potassium levels can lead to serious complications, such as cardiac arrhythmias or cardiac arrest. Immediate nursing intervention is warranted with high potassium levels due to these risks. Interventions may include administering medications to stabilize the heart (like calcium gluconate), insulin and glucose to drive potassium back into cells, or dialysis in severe cases. Monitoring cardiac rhythms is also essential because changes in potassium levels can adversely affect the heart. While low hemoglobin levels, increased blood urea nitrogen (BUN), and elevated creatinine levels are pertinent laboratory findings that warrant attention in renal failure, they do not carry the same immediate life-threatening implications as hyperkalemia. Therefore, high potassium levels should be addressed as a priority in this scenario.

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5. According to Erikson's psychosocial stages, which stage is a 2-year-old in?

A. Initiative vs. Guilt

B. Industry vs. Inferiority

C. Trust vs. Mistrust

D. Autonomy vs. Shame and Doubt

A 2-year-old child is in the stage of Autonomy vs. Shame and Doubt, according to Erikson's psychosocial stages of development. This stage, which typically occurs between the ages of 1 and 3 years, is characterized by a child's growing sense of independence as they learn to assert their autonomy. During this time, toddlers begin to explore their environment, make choices, and engage in self-care activities, which is essential for their development of self-confidence. Success in this stage leads to a sense of autonomy, where the child feels capable and confident in their abilities, while failure can result in feelings of shame and doubt, potentially hindering their willingness to try new things. The emphasis on choice and control is crucial, as it fosters their developing identity and sense of self. In contrast, the other stages mentioned focus on different developmental tasks and are not applicable to the 2-year-old age group.

6. Which of the following is an appropriate nursing intervention for a client exhibiting signs of hypovolemic shock?

A. Administer insulin immediately

B. Provide isotonic fluids as prescribed

C. Encourage high-sugar snacks

D. Limit fluid intake until stabilized

Providing isotonic fluids as prescribed is an appropriate nursing intervention for a client exhibiting signs of hypovolemic shock because the primary goal in treating this condition is to restore adequate blood volume and improve circulation. Hypovolemic shock results from a significant loss of blood or fluids, leading to decreased perfusion and oxygenation of tissues. Administering isotonic fluids helps to quickly expand intravascular volume, supports blood pressure, and enhances tissue perfusion. The choice of isotonic solutions, such as normal saline or lactated Ringer's, is essential because they closely match the body's natural electrolyte composition, minimizing the risk of complications and promoting effective fluid resuscitation. This intervention can help stabilize the client and prevent further deterioration of their condition. This action directly addresses the underlying issue of volume loss, making it critical in the management of hypovolemic shock. Proper fluid management is a cornerstone of effective nursing care in such scenarios.

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7. Which of the following demonstrates neologisms in speech in a client with schizophrenia?

A. Words that rhyme or have a similar beginning sound.

B. Reduction in speech; short-worded replies.

C. Words or phrases with meaning only for the client.

D. Going off on tangents and never reaching the point.

Neologisms are a characteristic symptom often observed in individuals with schizophrenia, where the individual creates new words or phrases that hold specific meanings unique to them, which might not be understood by others. The correct answer highlights this phenomenon, demonstrating that the client's speech includes these invented terms or expressions, which can significantly impair communication. In this context, the client's language reflects their altered perception and cognitive processes associated with schizophrenia, and such neologisms can indicate a level of disconnection from reality or a different thought process that is distinct from conventional language use. Understanding that the patient's communication relies on personal meaning underscores the challenges in effective interaction and the necessity of empathetic engagement when communicating with individuals experiencing this symptom. The other options illustrate different types of speech disorganization or communication challenges but do not specifically address the creation of new words or the unique meanings tied to those words, which are central to understanding neologisms.

8. Which symptom is indicative of enterobiasis in children?

A. Intense perianal itching

B. Fever

C. Foul-smelling stools

D. Decreased appetite

Intense perianal itching is a classic symptom indicative of enterobiasis, which is caused by an infestation of Enterobius vermicularis, commonly known as pinworms. This itching occurs due to the female pinworms migrating to the anal area to lay their eggs, typically at night. The movement of the worms can create significant irritation of the sensitive skin surrounding the anus, leading to discomfort and a strong urge to scratch, which is often most pronounced at night and can disrupt a child's sleep. In contrast, symptoms such as fever, foul-smelling stools, and decreased appetite are not typical features of enterobiasis. Fever may indicate an underlying infection but is not directly related to pinworm infection, while foul-smelling stools could suggest other gastrointestinal issues. Decreased appetite can occur for several reasons, including other illnesses or stress, but again is not a distinguishing symptom of enterobiasis. Therefore, the intense perianal itching is the hallmark symptom that effectively identifies this parasitic condition in children.

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9. When assessing a 4-month-old male infant's heart rate, which action is correct?

A. Auscultate the 4th intercostal space for 60 seconds.

B. Palpate the 5th intercostal space for 30 seconds.

C. Palpate the brachial pulse for 60 seconds.

D. Auscultate the radial pulse for 30 seconds.

Auscultating the heart rate at the 4th intercostal space for 60 seconds is the correct approach for assessing an infant's heart rate. This area is located where the heart is best heard, providing an accurate measurement of the heart's sounds and rhythm. For infants, a thorough assessment often involves counting the heart rate for a full minute to account for any fluctuations and ensure an accurate reading, especially given their higher and variable heart rates compared to older children and adults. In clinical practice, listening to the heart over the appropriate intercostal space allows the examiner to hear the heart sounds clearly. For infants, the 4th intercostal space aligns with the anatomical location of the heart, facilitating effective auscultation. Alternative methods, such as palpating pulses in other areas, may not provide as reliable or comprehensive a measurement in infants. The brachial pulse can also be used but is typically an adjunct method rather than the primary means of assessing heart rate. Additionally, while the radial pulse can be assessed in older children and adults, it is not the best option for infants because it is less palpable due to their smaller size.

10. What initial intervention should the nurse implement for a client with suspected rhabdomyolysis?

A. Administering intravenous fluids

B. Placing the client on a low-potassium diet

C. Administering corticosteroids

D. Initiating prophylactic antibiotic therapy

Administering intravenous fluids is crucial as an initial intervention for a client with suspected rhabdomyolysis because this condition is characterized by the breakdown of muscle tissue, which releases myoglobin into the bloodstream. Myoglobin can lead to kidney damage as it is processed by the kidneys, and adequate hydration helps to dilute myoglobin in the urine and promotes its excretion. Intravenous fluids, typically a saline solution, help to maintain renal perfusion, prevent acute kidney injury, and facilitate the removal of nephrotoxic substances. In cases of rhabdomyolysis, ensuring sufficient fluid intake is vital to mitigate potential complications such as acute kidney failure due to the high levels of toxins released from damaged muscle tissue. While other options like dietary adjustments or medications may be relevant later in the treatment process, they do not address the immediate need to protect the kidneys and ensure the safe removal of myoglobin from the body.

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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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