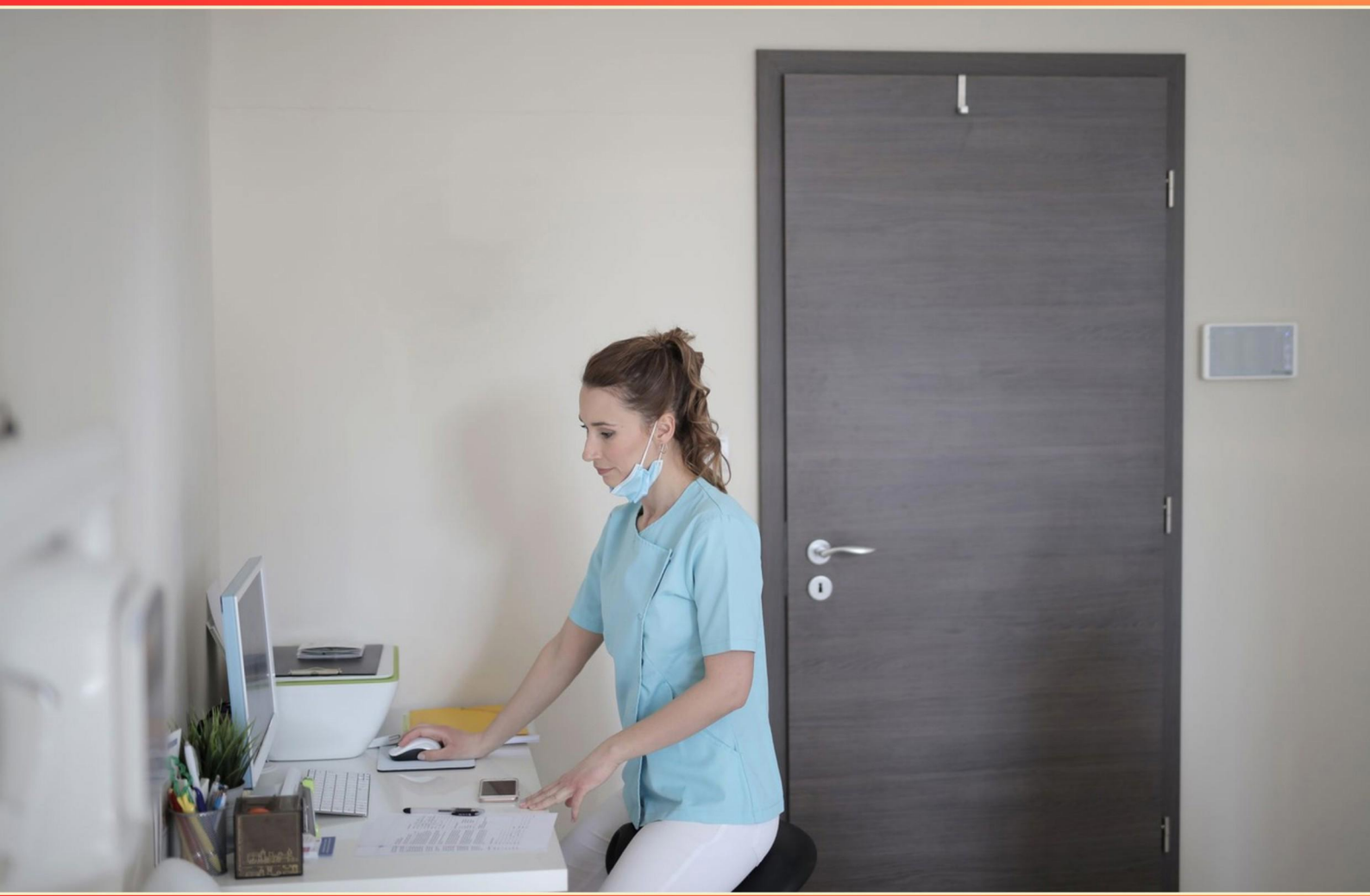
RELIAS LICENSED PRACTICAL NURSE (LPN) PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR THE FULL VERSION STUDY GUIDE

https://reliaslpn.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 16

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 assessment finding is considered a priority when monitoring a patient?**

   A. Stable vital signs

   B. Changes in mental status

   C. Increased appetite

   D. Skin integrity

2. **A provider gives you a written order to give a medication STAT. Upon review you note the dose has been omitted. What would be your NEXT appropriate action?**

   A. Administer half the missing dose

   B. Contact provider for order clarification

   C. Guess and administer the common dose

   D. Document the missing dose without further action

3. **Why is assessing a patient's pain level important?**

   A. To determine the appropriate medication schedule

   B. To ensure proper pain management and improve patient comfort

   C. To document patient progress in the chart

   D. To evaluate the effectiveness of treatment

4. **What action should be taken if a patient exhibits signs of an allergic reaction?**

   A. Ignore the symptoms

   B. Immediately notify the physician and provide prescribed treatment

   C. Conduct a thorough patient interview

   D. Administer additional medications as needed

5. **What is a crucial step in preventing infection in a healthcare setting?**

   A. Skipping hand hygiene when short on time

   B. Properly washing hands before and after patient contact

   C. Wearing gloves without changing them

   D. Using antibacterial soap only once a day

SAMPLE

6. You have found your patient unresponsive in bed. The patient has a DNR order in place. You do not feel a carotid pulse. What should you do NEXT?

A. Call for the registered nurse

B. Begin CPR immediately

C. Document the situation

D. Notify family members

7. Which of the following is a sign of effective communication with patients?

A. Patients ignore instructions

B. Patients ask relevant questions

C. Frequent misunderstandings occur

D. Patients exhibit anxiety and confusion

8. How should an LPN respond to a patient expressing anxiety?

A. Dismiss their feelings

B. Set strict expectations for behavior

C. Acknowledge their feelings and offer support

D. Reassure them without further discussion

9. What steps should you take when providing care for a confused patient who has a history of grabbing staff?

A. Remove your stethoscope

B. Engage in distracting conversation

C. Call a security guard for assistance

D. Restrain the patient immediately

10. What is the first step in the nursing process?

A. Evaluation

B. Assessment

C. Planning

D. Implementation

SAMPLE

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. Which assessment finding is considered a priority when monitoring a patient?

A. Stable vital signs

B. Changes in mental status

C. Increased appetite

D. Skin integrity

Changes in mental status are considered a priority assessment finding when monitoring a patient due to their potential implications for the patient's overall health and safety. Mental status alterations can indicate various critical issues, such as hypoxia, metabolic imbalances, neurological events, or psychological disturbances. Prompt recognition of these changes is essential because they can rapidly worsen and lead to severe consequences if not addressed. For instance, a patient exhibiting confusion or altered consciousness may be at risk for falling, may not be able to follow medical instructions, or could have an underlying medical condition that requires immediate attention. This is why monitoring cognitive function is vital, as it can reflect not only the patient's neurological status but also their overall physiological condition. On the other hand, stable vital signs, while important, do not convey the full picture of a patient's health status compared to changes in mental status. An increased appetite, although a positive sign in certain contexts, does not typically indicate immediate clinical issues. Lastly, skin integrity is crucial for preventing complications like pressure ulcers, but alterations in mental status can have more immediate and far-reaching impacts on safety and care interventions. Therefore, prioritizing changes in mental status allows healthcare providers to address potentially life-threatening conditions promptly.

2. A provider gives you a written order to give a medication STAT. Upon review you note the dose has been omitted. What would be your NEXT appropriate action?

A. Administer half the missing dose

B. Contact provider for order clarification

C. Guess and administer the common dose

D. Document the missing dose without further action

When a medication order is received that is missing critical information, such as the dose, the next appropriate action is to contact the provider for clarification. This ensures patient safety and adherence to best practices for medication administration. Administering any medication without a complete order could lead to negative patient outcomes, including underdosing or overdosing, both of which pose significant health risks. Clarifying the order with the provider not only protects the patient but also complies with legal and ethical standards in nursing practice. It demonstrates a commitment to safety and accurate medication administration, ensuring that the nurse is acting on valid and comprehensive information. Other options, such as administering half the missing dose or guessing the common dose, could endanger the patient's well-being. Documenting the missing dose without further action would ignore the responsibility to verify medication orders accurately and could lead to legal and professional repercussions. Therefore, seeking clarification from the provider is the most appropriate and responsible course of action.

SAMPLE

3. Why is assessing a patient's pain level important?

A. To determine the appropriate medication schedule

B. To ensure proper pain management and improve patient comfort

C. To document patient progress in the chart

D. To evaluate the effectiveness of treatment

Assessing a patient's pain level is crucial for ensuring proper pain management and improving patient comfort. Pain is a subjective experience that varies significantly from person to person, and understanding a patient's pain level directly influences how healthcare professionals approach treatment. When pain is effectively assessed, nurses and other healthcare providers can tailor interventions to address the specific needs of the patient, ultimately enhancing their overall quality of life and recovery process. Effective pain management is not only about alleviating discomfort; it also plays a role in promoting healing and can impact a patient's ability to participate in their own care. Additionally, regular assessment of pain levels enables healthcare providers to engage in ongoing communication with the patient, fostering a better therapeutic relationship, and building trust. When patients feel heard and cared for, their overall experience in the healthcare setting improves, which is why addressing pain assessments as a priority can lead to more comprehensive and compassionate care.

4. What action should be taken if a patient exhibits signs of an allergic reaction?

A. Ignore the symptoms

B. Immediately notify the physician and provide prescribed treatment

C. Conduct a thorough patient interview

D. Administer additional medications as needed

When a patient shows signs of an allergic reaction, the most appropriate action is to immediately notify the physician and provide the prescribed treatment. This approach is essential for several reasons. First and foremost, allergic reactions can escalate quickly and may lead to severe complications, such as anaphylaxis, which is a life-threatening condition. Swift intervention is critical in managing the patient's safety and preventing the reaction from worsening. By notifying the physician, the healthcare provider ensures that the patient receives the appropriate and timely care, which may include administering medications like antihistamines or epinephrine, depending on the severity of the reaction. Additionally, having a set protocol for handling allergic reactions helps maintain a standard of care that promotes patient safety and emphasizes the importance of teamwork in healthcare settings. This action reflects a commitment to the well-being of the patient, ensuring that they receive the appropriate interventions based on their medical needs. In contrast, ignoring symptoms could lead to serious health risks for the patient. Conducting a thorough patient interview, while important for understanding the patient's history and potential allergens, should be secondary to ensuring immediate medical intervention. Administering additional medications without a physician's order could lead to errors and complications, further reinforcing the necessity of proper communication and authorized treatment in such situations.

SAMPLE

5. What is a crucial step in preventing infection in a healthcare setting?

A. Skipping hand hygiene when short on time

B. Properly washing hands before and after patient contact

C. Wearing gloves without changing them

D. Using antibacterial soap only once a day

Properly washing hands before and after patient contact is fundamental in preventing infection in a healthcare setting. This practice reduces the transmission of pathogens between healthcare providers and patients, as well as among patients themselves. Hand hygiene is essential because healthcare environments often harbor a high concentration of microorganisms, and hands can easily become contaminated through contact with various surfaces and individuals. Effective hand washing involves using soap and water or alcohol-based hand sanitizers to thoroughly clean hands, removing dirt, organic material, and pathogens. This step is especially important in preventing healthcare-associated infections (HAIs), which are significant causes of morbidity and mortality in patients. Establishing a routine of hand hygiene contributes to creating a safe environment for both staff and patients, reducing the risk of outbreaks and promoting overall patient safety. Therefore, ensuring proper hand hygiene is crucial for infection control practices in any healthcare setting.

6. You have found your patient unresponsive in bed. The patient has a DNR order in place. You do not feel a carotid pulse. What should you do NEXT?

A. Call for the registered nurse

B. Begin CPR immediately

C. Document the situation

D. Notify family members

In the scenario where a patient with a Do Not Resuscitate (DNR) order is found unresponsive and lacks a carotid pulse, the appropriate next step is to call for the registered nurse. This action is crucial because the registered nurse has the authority and training to interpret the DNR order and to provide guidance on how to proceed, given the specific circumstances. While the patient has a DNR in place, it indicates that in the event of cardiac arrest or respiratory failure, the patient has designated not to receive immediate resuscitation efforts like CPR. The role of the nurse at that moment is vital for ensuring that the care given aligns with the patient's wishes and the legal implications of the DNR order. Additionally, calling the registered nurse ensures that a professional assesses the situation comprehensively, which is important for patient safety and adherence to medical protocols. Once the registered nurse arrives, they will carry out further assessments and make decisions based on the patient's condition and the DNR directives. The other options, while possibly important later, do not address the immediate need to ensure that the situation is handled correctly according to the DNR directive. Starting CPR would violate the DNR order, and documenting the situation and notifying family members would generally occur after ensuring

SAMPLE

7. Which of the following is a sign of effective communication with patients?

A. Patients ignore instructions

B. Patients ask relevant questions

C. Frequent misunderstandings occur

D. Patients exhibit anxiety and confusion

Effective communication with patients is demonstrated when patients ask relevant questions. This response signifies that the patients are actively engaged and interested in their care. When individuals seek clarification or additional information, it indicates that they understand the material presented to them and are considering it thoughtfully. Asking questions is a constructive behavior that fosters a collaborative relationship between patients and healthcare providers, enhancing overall patient outcomes. In contrast, when patients ignore instructions, it may suggest that they did not comprehend the information provided or did not find it relevant, indicating a breakdown in communication. Frequent misunderstandings highlight a similar issue—if misunderstandings are common, it reflects inadequate communication that fails to convey essential information clearly. Lastly, patients exhibiting anxiety and confusion often indicate that the communication process has not been effective, as effective communication typically alleviates concerns rather than exacerbates them. Thus, the presence of relevant questions from patients clearly shows that communication has been effective.

8. How should an LPN respond to a patient expressing anxiety?

A. Dismiss their feelings

B. Set strict expectations for behavior

C. Acknowledge their feelings and offer support

D. Reassure them without further discussion

When a patient expresses anxiety, the most effective response is to acknowledge their feelings and offer support. This approach is crucial because it validates the patient's emotions, making them feel heard and understood. When patients express anxiety, they often seek a safe space to discuss their fears and concerns. By acknowledging their feelings, the LPN fosters a therapeutic environment where the patient feels comfortable sharing more about their anxiety, which can lead to better care and coping strategies. Offering support may involve providing information, resources, or simply being present to listen, all of which can greatly alleviate the patient's distress. This empathetic engagement not only helps in building trust between the patient and the nurse but also encourages the patient to actively participate in their own care plan, enhancing their overall experience and outcome.

SAMPLE

9. What steps should you take when providing care for a confused patient who has a history of grabbing staff?

A. Remove your stethoscope

B. Engage in distracting conversation

C. Call a security guard for assistance

D. Restrain the patient immediately

When caring for a confused patient who has a history of grabbing staff, it's essential to prioritize safety while also ensuring a calm environment. Removing your stethoscope can be a beneficial step. By doing so, you minimize potential triggers that could escalate the patient's confusion or anxiety. The stethoscope can be perceived as a tool associated with medical intervention, which may lead to discomfort or fear in a confused patient. Creating a serene environment is critical in this scenario, and this can be supported by removing any items that might be seen as intimidating or aggressive, like medical equipment. The intent is to promote trust and reduce anxiety in the patient, allowing for a more effective and safe interaction during care. While engaging in conversation may seem helpful, it must be approached carefully. Distraction can be effective, but the conversation needs to be soothing and not overwhelming. Similarly, involving security may be necessary if the patient poses an imminent threat, but it should not be the first course of action in providing care. Restraining a patient should be a last resort in the care process and typically involves protocols and considerations related to the patient's rights and needs. Always focusing on de-escalation and comfort is key when dealing with confused patients.

10. What is the first step in the nursing process?

A. Evaluation

B. Assessment

C. Planning

D. Implementation

The first step in the nursing process is assessment. This initial phase involves the systematic collection and analysis of data regarding the patient's health status. During assessment, nurses gather information through various methods such as patient interviews, physical examinations, and review of medical records. The purpose of this step is to gain a comprehensive understanding of the patient's needs, conditions, and concerns, which forms the foundation for all subsequent steps in the nursing process. Assessment is crucial as it influences the diagnosis, planning, implementation, and evaluation phases. Without a thorough assessment, the nurse may not accurately identify patient problems or needs, which could lead to inadequate care. This step emphasizes the importance of critical thinking and observational skills in nursing practice, as data collected during this phase helps inform appropriate interventions and care strategies. The other steps in the nursing process—evaluation, planning, and implementation—follow the assessment phase. Each of these steps relies heavily on the information gathered during the assessment to ensure patient care is tailored and effective.

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://reliaslpn.examzify.com

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

SAMPLE