RNPEDIA: PNLE NURSING PRACTICE 1 TEST 1 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. **A client is using a walker. Which practice indicates the walker is being used correctly?**

   A. Puts all the four points of the walker flat on the floor, puts weight on the hand pieces, and then walks into it.

   B. Puts weight on the hand pieces, moves the walker forward, and then walks into it.

   C. Puts weight on the hand pieces, slides the walker forward, and then walks into it.

   D. Walks into the walker, puts weight on the hand pieces, and then puts all four points of the walker flat on the floor.

2. **During a leadership conference, a trauma center is described as task-oriented and directive. This leadership style is best identified as which of the following?**

   A. Laissez-faire

   B. Autocratic

   C. Democratic

   D. Situational

3. **Which is a common reference range for adult white blood cell count?**

   A. 2,000-6,000 cells/mcL

   B. 7,000-14,000 cells/mcL

   C. 4,000-11,000 cells/mcL

   D. 1,000-5,000 cells/mcL

4. **Immediately after sublingual nitroglycerin administration, which symptom is commonly experienced by the patient?**

   A. Throbbing headache or dizziness

   B. Nervousness or paresthesia

   C. Drowsiness or blurred vision

   D. Tinnitus or diplopia

5. **Which statement about BCG vaccine is true?**

   A. It is given at birth

   B. It is given at 2 years

   C. It is given only if exposed to TB

   D. It is not part of immunization programs

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6. Which of the following is considered the most important nursing action when a client returns from surgery?

A. Assess the IV for type of fluid and rate of flow.

B. Assess the client for presence of pain.

C. Assess the Foley catheter for patency and urine output

D. Assess the dressing for drainage.

7. The legal doctrine in which the injury to a patient is taken as evidence of negligence is called?

A. Force majeure

B. Respondeat superior

C. Holdover doctrine

D. Res ipsa loquitor

8. Which statement best describes functional nursing?

A. Concentrates on tasks and activities.

B. One-to-one nurse patient ratio.

C. Provides continuous, coordinated and comprehensive nursing services.

D. Emphasize the use of group collaboration.

9. Which stage of pressure ulcer development extends into the subcutaneous tissue?

A. Stage I

B. Stage II

C. Stage III

D. Stage IV

10. Which statement best explains why the walker is moved two feet forward and kept flat before the client bears weight?

A. To help the client walk faster

B. To confuse the client

C. To increase energy expenditure

D. To prevent stress cracks and ensure safe weight bearing

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Answers

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

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Explanations

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1. A client is using a walker. Which practice indicates the walker is being used correctly?

A. Puts all the four points of the walker flat on the floor, puts weight on the hand pieces, and then walks into it.

B. Puts weight on the hand pieces, moves the walker forward, and then walks into it.

C. Puts weight on the hand pieces, slides the walker forward, and then walks into it.

D. Walks into the walker, puts weight on the hand pieces, and then puts all four points of the walker flat on the floor.

When using a walker, stability first. The base must be solid before you transfer your weight or step into it. So you place all four points of the walker on the floor to establish a stable, wide base. Then you bear weight through the handgrips to control and support yourself, keeping yourself upright and balanced. Only after that solid setup do you step into the walker, bringing your feet forward one after the other while maintaining even weight through the arms. This sequence minimizes the risk of the walker tipping, slipping, or moving unexpectedly, which protects balance and safety. The other approaches can create instability: moving the walker forward or stepping into it before its legs are all firmly on the floor can cause it to shift or fall away, and sliding or pushing without a stable base doesn't provide the controlled support you need.

2. During a leadership conference, a trauma center is described as task-oriented and directive. This leadership style is best identified as which of the following?

A. Laissez-faire

B. Autocratic

C. Democratic

D. Situational

Task-oriented and directive leadership fits autocratic leadership, where a single leader makes decisions and issues clear, direct orders with little input from others. In a trauma center, this approach supports rapid, coordinated action: a definite chain of command, immediate task assignment, and strict adherence to standardized protocols to stabilize patients quickly. The emphasis is on efficiency and control, which is essential in high-stakes emergencies where delays and ambiguity can cost lives. Laissez-faire would be too hands-off for such urgent situations, Democratic focuses on collaboration and input which slows decision-making, and Situational involves adapting style to the context rather than maintaining a consistently directive, task-focused approach.

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3. Which is a common reference range for adult white blood cell count?

A. 2,000-6,000 cells/mcL

B. 7,000-14,000 cells/mcL

C. 4,000-11,000 cells/mcL

D. 1,000-5,000 cells/mcL

Normal adult white blood cell count is about 4,000–11,000 cells per microliter (4.0–11.0 x 10^9/L). This range covers the typical variation seen in healthy individuals, with values below suggesting leukopenia and values above suggesting leukocytosis. The range that matches this standard span is 4,000–11,000, because it includes the lower and upper ends of normal. A range like 2,000–6,000 would omit the higher end of normal (6,000–11,000) and could misclassify healthy counts as abnormal; a range of 7,000–14,000 would miss many normal low counts (below 7,000); a range of 1,000–5,000 would miss the normal high counts (above 5,000).

4. Immediately after sublingual nitroglycerin administration, which symptom is commonly experienced by the patient?

A. Throbbing headache or dizziness

B. Nervousness or paresthesia

C. Drowsiness or blurred vision

D. Tinnitus or diplopia

Nitroglycerin works by dilating blood vessels, including cerebral vessels. When given sublingually, this rapid vasodilation can trigger a throbbing headache and may be accompanied by dizziness as blood pressure falls a bit. This headache is a classic, immediate effect of nitrate therapy. The other symptoms listed—nervousness or paresthesia, drowsiness or blurred vision, and tinnitus or diplopia—are not the typical immediate experience after this route of administration.

5. Which statement about BCG vaccine is true?

A. It is given at birth

B. It is given at 2 years

C. It is given only if exposed to TB

D. It is not part of immunization programs

BCG is given at birth as part of routine immunization to protect infants against severe forms of tuberculosis, especially tuberculous meningitis and disseminated TB. The rationale is to provide early, broad protection in the setting where infants are most vulnerable, rather than waiting for exposure to TB. It's a one-time intradermal vaccine given in the newborn period, and it is normally included in national immunization schedules. It is not delayed until after exposure to TB, nor is it used only if exposure has occurred. That's why this statement is true: it is given at birth.

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6. Which of the following is considered the most important nursing action when a client returns from surgery?

A. Assess the IV for type of fluid and rate of flow.

B. Assess the client for presence of pain.

C. Assess the Foley catheter for patency and urine output

D. Assess the dressing for drainage.

Immediately after surgery, managing the patient's comfort is essential because pain directly impacts breathing, mobility, and recovery. Assessing for pain helps you determine whether analgesia is effective and allows timely adjustment of medications to relieve discomfort without causing excess sedation. When pain is well controlled, patients take deeper breaths, perform effective coughing and incentive spirometry, and engage in early ambulation, all of which reduce the risk of respiratory complications and promote faster recovery. In addition, pain assessment provides a clear signal of the patient's current needs and can reveal evolving problems such as inadequate anesthesia or unexpected surgical pain, guiding urgent interventions if needed. While monitoring IV fluids, urine output, and dressings are important, they do not influence immediate safety and functional recovery as directly as ensuring adequate pain control in the immediate post-op period.

7. The legal doctrine in which the injury to a patient is taken as evidence of negligence is called?

A. Force majeure

B. Respondeat superior

C. Holdover doctrine

D. Res ipsa loquitor

Res ipsa loquitur means "the thing speaks for itself." It applies when the injury is of a type that normally would not happen without negligence, and the thing that caused the injury was under the defendant's control. In medical cases, this lets the fact finder infer negligence from the mere occurrence of the injury without requiring proof of the exact act that caused it (for example, leaving a surgical instrument inside a patient). The plaintiff's job is to show that the injury would not ordinarily occur without negligence and that the instrumentality was under the defendant's control; then the burden shifts to the defense to prove there was no negligence or to offer an explanation. If the defense cannot do that, negligence can be inferred. The other terms relate to different areas entirely—their doctrine doesn't support inferring negligence from the injury itself in a medical context. Force majeure concerns contract obligations due to unforeseen events; respondeat superior involves an employer's liability for an employee's actions; the holdover doctrine applies to other legal scenarios, not medical negligence.

8. Which statement best describes functional nursing?

A. Concentrates on tasks and activities.

B. One-to-one nurse patient ratio.

C. Provides continuous, coordinated and comprehensive nursing services.

D. Emphasize the use of group collaboration.

Functional nursing organizes care by assigning specific tasks to different members of the nursing team, rather than having one nurse handle all aspects of a patient's care. The statement that best describes this approach is that it provides continuous, coordinated and comprehensive nursing services. By dividing duties—such as meds administration, monitoring, hygiene, and education—staff cover the full range of nursing needs and coordinate handoffs between shifts, ensuring the patient receives a continuous and complete level of care. The focus isn't solely on individual tasks or on a one-to-one ratio, and it differs from models that emphasize group-based collaboration or single-provider responsibility.

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9. Which stage of pressure ulcer development extends into the subcutaneous tissue?

A. Stage I

B. Stage II

C. Stage III

D. Stage IV

The depth of tissue destruction in a pressure ulcer drives its stage. When a wound reaches the subcutaneous tissue, it means full-thickness skin loss through the epidermis and dermis into the fat layer underneath. This describes Stage III, where you see a deeper crater with possible exposure of subcutaneous fat, but the bone, tendon, or muscle are not exposed yet. Stage II, by contrast, involves only partial-thickness loss through the epidermis and into the dermis, often presenting as a shallow, red or pink wound. Stage I is nonblanchable redness over intact skin, and Stage IV goes deeper still, with exposure of bone, tendon, or muscle and often tunneling or undermining.

10. Which statement best explains why the walker is moved two feet forward and kept flat before the client bears weight?

A. To help the client walk faster

B. To confuse the client

C. To increase energy expenditure

D. To prevent stress cracks and ensure safe weight bearing

Moving the walker two feet forward and keeping it flat creates a stable base of support for the client to begin weight bearing. This setup allows the patient to comfortably push into the walker with their hands, step forward into the walker, and shift weight gradually while maintaining balance. Keeping the walker flat prevents wobbling or tipping, which reduces the risk of falls and makes weight-bearing safer. It supports a controlled gait and safer energy use, rather than speeding up walking, confusing the client, or increasing energy expenditure.

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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://rnpediapnlenp1test1.examzify.com

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

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