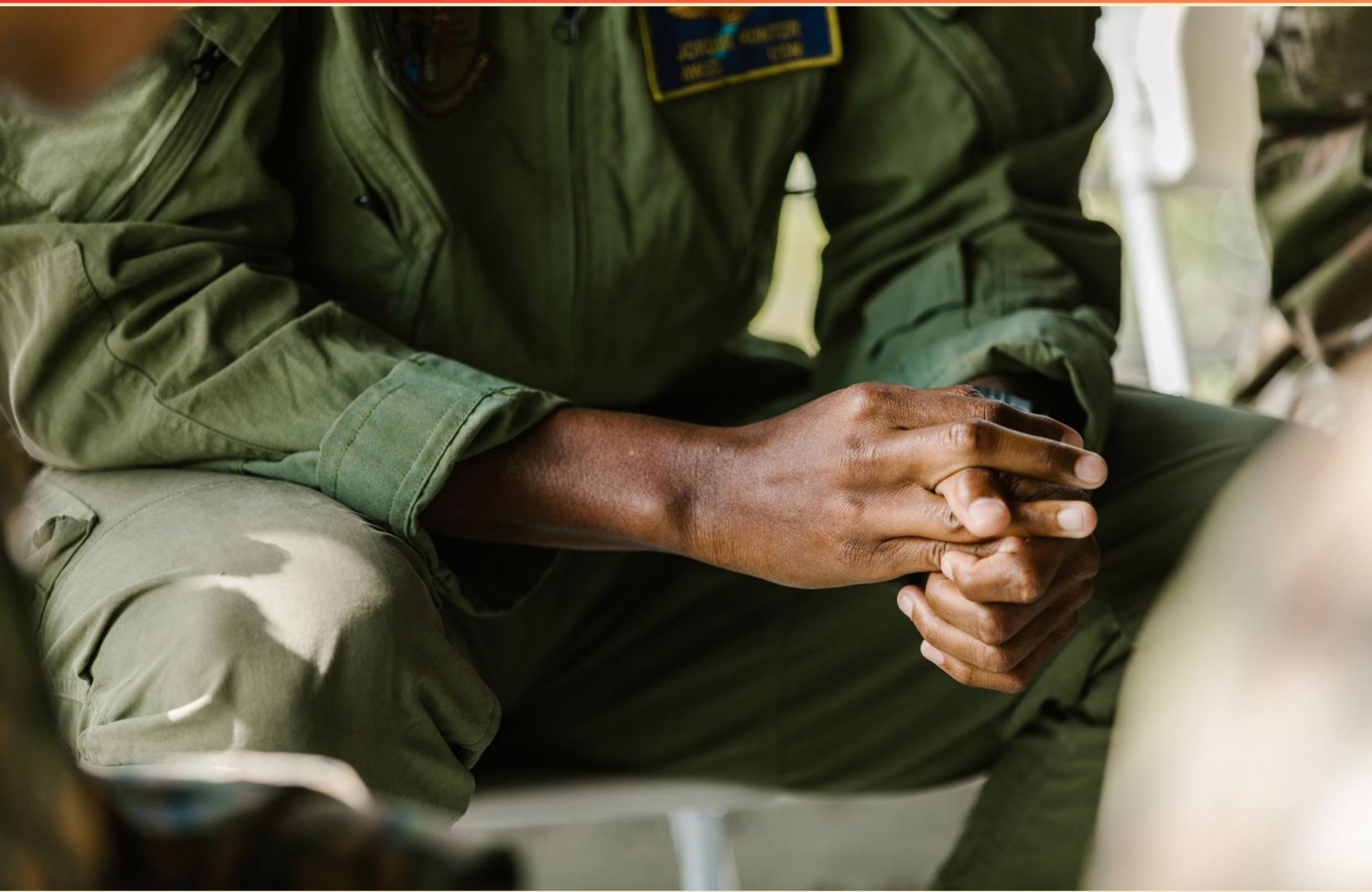


68W LIMITED PRIMARY CARE (LPC) PRACTICE EXAM (SAMPLE)

STUDY GUIDE



Prepare with structure. Pass with confidence



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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.

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!

Questions

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- 1. How should a 68W respond to a patient experiencing an acute asthma attack?**
 - A. Encourage deep breathing exercises
 - B. Ensure they use their rescue inhaler, monitor breathing, and assess for emergency assistance
 - C. Advise the patient to relax until symptoms pass
 - D. Make the patient run to increase oxygen flow
- 2. What is the main principle of surgical asepsis?**
 - A. Minimizing noise and distractions
 - B. Destruction of microorganisms from surfaces before they enter the body
 - C. Wearing personal protective equipment
 - D. Isolating patients with infections
- 3. What area should be avoided when performing venipuncture?**
 - A. Foot veins
 - B. Veins in the antecubital fossa
 - C. Veins near joints
 - D. Veins of the hand
- 4. Why is medication reconciliation particularly important during transitions in care?**
 - A. To ensure patient satisfaction
 - B. To prevent discrepancies
 - C. To increase the number of medications
 - D. To lower healthcare costs
- 5. What is a common symptom of a myocardial infarction?**
 - A. Rapid weight loss
 - B. Severe chest pain
 - C. Chronic cough
 - D. Dizziness with physical activity

- 6. What is the length of the needle commonly used for intramuscular injections in adults?**
- A. Less than 0.5 inches
 - B. 1 inch
 - C. 1.5 inches
 - D. 2 inches
- 7. What anatomical structure can be found within the antecubital fossa?**
- A. Brachial artery
 - B. Femoral artery
 - C. Radial artery
 - D. Ulnar artery
- 8. Which of the following best describes a financial constraint as a barrier to healthcare?**
- A. Costs related to transportation
 - B. Affordability of insurance premiums
 - C. General costs associated with groceries
 - D. Availability of payment plans
- 9. What are the primary components of the physical examination?**
- A. Listening, observing, analyzing, and diagnosing
 - B. Inspection, palpation, percussion, and auscultation
 - C. Checking vital signs and taking blood samples
 - D. Visual assessment and patient history review
- 10. What does "medical history" encompass when assessing a patient?**
- A. Only previous surgeries
 - B. Current medications and allergies
 - C. Past medical conditions, surgical history, medications, allergies, and family medical history
 - D. Only chronic diseases the patient has

Answers

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

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Explanations

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1. How should a 68W respond to a patient experiencing an acute asthma attack?

- A. Encourage deep breathing exercises
- B. Ensure they use their rescue inhaler, monitor breathing, and assess for emergency assistance**
- C. Advise the patient to relax until symptoms pass
- D. Make the patient run to increase oxygen flow

In the context of responding to a patient experiencing an acute asthma attack, ensuring the use of a rescue inhaler, monitoring breathing, and assessing for the need for emergency assistance is the most effective course of action. During an acute asthma attack, a patient experiences constricted airways, leading to difficulty breathing, wheezing, and chest tightness. Rescue inhalers, typically containing short-acting bronchodilators, are specifically designed to alleviate these symptoms rapidly by relaxing the muscles around the airways, allowing for improved airflow. Promptly using this inhaler is crucial to addressing the immediate respiratory distress. Monitoring the patient's breathing is essential for assessing the severity of the attack and determining if further medical intervention is required. If the patient does not respond to the inhaler or exhibits signs of severe distress, seeking emergency assistance becomes critical to ensure the patient receives the appropriate care. Other strategies like encouraging deep breathing exercises or advising relaxation may not provide adequate relief during an acute attack. These approaches can be counterproductive if the airway is significantly obstructed and immediate action is required. Additionally, suggesting physical activity, such as running, during an asthma attack is dangerous, as it can exacerbate the situation by further straining the respiratory system. Therefore, the most

2. What is the main principle of surgical asepsis?

- A. Minimizing noise and distractions
- B. Destruction of microorganisms from surfaces before they enter the body**
- C. Wearing personal protective equipment
- D. Isolating patients with infections

The main principle of surgical asepsis is the destruction of microorganisms from surfaces before they enter the body. Surgical asepsis, also known as sterile technique, aims to eliminate all forms of microbial life, including bacteria, viruses, and fungi, from the environments and instruments used in surgical procedures. This principle is crucial because even the slightest contamination can lead to serious infections. In practices involving surgical procedures, maintaining a sterile field is essential; this means all tools, drapes, and the surrounding environment must be free from pathogens to ensure the safety of the patient. Proper techniques ensure that when incisions are made or instruments are introduced into the body's sterile areas, there is a minimal risk of introducing harmful microorganisms that could cause postoperative infections. While minimizing noise and distractions, wearing personal protective equipment, and isolating patients with infections are important practices in an overall infection control strategy, they do not specifically address the creation of a sterile environment in the same way that the destruction of microorganisms does. These practices can support infection control but do not encompass the foundational aspect of surgical asepsis, which directly relates to maintaining sterility during surgical procedures.

3. What area should be avoided when performing venipuncture?

- A. Foot veins
- B. Veins in the antecubital fossa
- C. Veins near joints**
- D. Veins of the hand

When performing venipuncture, it is crucial to avoid veins near joints for several reasons. The area around joints can be more sensitive and lead to discomfort for the patient. Additionally, veins near joints are often more mobile and can move during the procedure, increasing the likelihood of failure to successfully puncture the vein or causing injury to surrounding tissues. Furthermore, inserting a needle into a joint area can result in complications such as bleeding into the joint space or damage to the structures surrounding the joint, which may lead to pain or functional impairment. In contrast, while the other choices may present their own considerations, they do not carry the same level of risk as veins near joints. For example, foot veins may not be ideal due to potential complications in certain populations, but they can still be accessed if necessary. Veins in the antecubital fossa are often the preferred site for venipuncture due to their size and accessibility. Similarly, veins of the hand are commonly used but can also yield varying degrees of success based on individual anatomy and conditions. Therefore, avoiding veins near joints minimizes risks and ensures a safer venipuncture experience for the patient.

4. Why is medication reconciliation particularly important during transitions in care?

- A. To ensure patient satisfaction
- B. To prevent discrepancies**
- C. To increase the number of medications
- D. To lower healthcare costs

Medication reconciliation plays a critical role during transitions in care primarily to prevent discrepancies in a patient's medication regimen. When patients move between different care settings—such as from a hospital to home, between clinics, or when transitioning to a long-term care facility—there is a significant risk that their medication lists may become inaccurate. This can occur due to various factors, including changes in medication orders, omissions, or duplications, which can lead to serious patient safety issues. By performing medication reconciliation, healthcare providers systematically review a patient's complete medication list and compare it against new orders or lists from other providers. This process ensures that any discrepancies are identified and corrected, thereby promoting safe medication practices and enhancing patient care continuity. Accurate medication reconciliation helps to ensure that patients receive the correct medications, at the correct doses, and minimizes the risk of adverse drug events.

5. What is a common symptom of a myocardial infarction?

- A. Rapid weight loss
- B. Severe chest pain**
- C. Chronic cough
- D. Dizziness with physical activity

Severe chest pain is a hallmark symptom of a myocardial infarction, commonly known as a heart attack. This pain is often described as a feeling of pressure, squeezing, or fullness in the chest and can persist for several minutes or come and go. It may radiate to the shoulders, neck, arms, back, teeth, or jaw and often occurs with other symptoms like shortness of breath, sweating, nausea, or lightheadedness. Recognizing this symptom is crucial for immediate medical intervention, as prompt treatment can significantly improve outcomes for individuals experiencing a myocardial infarction. While rapid weight loss, chronic cough, and dizziness during physical activity can be indicators of other health conditions, they are not specific to a myocardial infarction. Thus, they are less relevant for diagnosing this critical event in the cardiovascular system.

6. What is the length of the needle commonly used for intramuscular injections in adults?

- A. Less than 0.5 inches
- B. 1 inch**
- C. 1.5 inches
- D. 2 inches

The commonly used needle length for intramuscular injections in adults is typically 1 inch. This length is generally sufficient for administering injections into the deltoid muscle, which is the most commonly used site for vaccinations and other intramuscular medications in adults. A 1-inch needle is appropriate for most adult patients with average body mass, allowing for adequate penetration into the muscle without causing unnecessary discomfort or injury to surrounding tissues. For patients who are more robust or have greater adipose tissue, a longer needle may sometimes be needed to ensure that the medication is delivered to the muscle layer effectively. However, for the general population, particularly for the deltoid site, a 1-inch needle is the standard choice. The other options, such as needle lengths less than 1 inch, while sometimes used in specific scenarios (like pediatric patients or those with very low body fat), do not provide effective penetration of the muscle in the majority of adult patients. Additionally, needles that are 1.5 inches or 2 inches are usually reserved for specific situations where deeper muscle penetration is necessary, typically in larger muscle groups or in patients with higher body mass.

7. What anatomical structure can be found within the antecubital fossa?

A. Brachial artery

B. Femoral artery

C. Radial artery

D. Ulnar artery

The brachial artery is a major blood vessel that is found within the antecubital fossa, which is the triangular area on the anterior (front) side of the elbow. This artery is a continuation of the axillary artery as it passes down the arm and eventually bifurcates into the radial and ulnar arteries at the distal end of the forearm. The antecubital fossa serves as an important anatomical landmark for numerous clinical procedures, such as drawing blood or inserting intravenous lines, because the brachial artery is easily accessible in this area. Understanding the location of the brachial artery is essential for any medical professional as it plays a significant role in blood circulation to the forearm and hand. In contrast, the femoral artery is located in the thigh, while the radial and ulnar arteries branch from the brachial artery in the forearm rather than being found within the antecubital fossa itself. This distinction highlights the importance of knowing the anatomy of the upper limb for clinical practices and assessments.

8. Which of the following best describes a financial constraint as a barrier to healthcare?

A. Costs related to transportation

B. Affordability of insurance premiums

C. General costs associated with groceries

D. Availability of payment plans

Understanding financial constraints as barriers to healthcare is essential, especially when assessing access to necessary services. The best description of a financial constraint is the affordability of insurance premiums. This directly impacts an individual's ability to access healthcare services, as insurance acts as a primary means through which people pay for medical care. When premiums are unaffordable, individuals may opt not to purchase insurance, leaving them vulnerable to high out-of-pocket costs for medical services. This can lead to delayed care or avoidance of necessary treatment, ultimately worsening health outcomes. In contrast, while transportation costs and the general costs of groceries can certainly affect a person's overall financial situation, they do not specifically relate to the direct mechanism of accessing healthcare as effectively as insurance premiums. Payment plans can offer flexibility in managing healthcare costs but are typically a workaround that does not address the fundamental issue of whether or not individuals can afford insurance coverage in the first place. Thus, affordability of insurance premiums is the most relevant factor when considering financial constraints in healthcare access.

9. What are the primary components of the physical examination?

- A. Listening, observing, analyzing, and diagnosing
- B. Inspection, palpation, percussion, and auscultation**
- C. Checking vital signs and taking blood samples
- D. Visual assessment and patient history review

The primary components of a physical examination are represented by the process of inspection, palpation, percussion, and auscultation. Each of these techniques plays a crucial role in gathering information about a patient's health status. Inspection involves visually examining the patient for any signs of illness or abnormalities. This can include looking for irregularities in skin color, movement, or general appearance. Palpation is the technique of using the hands to feel areas of the body to identify any abnormalities such as lumps, tenderness, or organ size. Percussion involves tapping on specific areas of the body to assess the underlying structures. This helps in evaluating the size, density, and location of organs based on the sound produced. Auscultation is the listening to the internal sounds of the body, typically using a stethoscope, to evaluate heart, lung, and gastrointestinal function. Together, these components provide a comprehensive assessment of a patient's physical health, allowing healthcare providers to identify potential issues, monitor health status, and inform diagnoses. Other options, while related to patient assessment, do not encompass the core techniques utilized specifically in a physical examination. For instance, checking vital signs and taking blood samples are important practices, but they are adjuncts to the comprehensive physical assessment that these

10. What does "medical history" encompass when assessing a patient?

- A. Only previous surgeries
- B. Current medications and allergies
- C. Past medical conditions, surgical history, medications, allergies, and family medical history**
- D. Only chronic diseases the patient has

The concept of "medical history" is comprehensive and crucial in assessing a patient. It encompasses various elements that provide a well-rounded view of a patient's health background. This includes past medical conditions that could influence current health, a detailed surgical history which offers insights into previous interventions, a list of current medications to avoid potential drug interactions, documented allergies which are vital for patient safety, and family medical history that can reveal hereditary health risks. By gathering all these components, healthcare providers can formulate better diagnostic impressions and treatment plans. Each aspect contributes to understanding the overall health status of a patient, making option C the most accurate and complete representation of what constitutes medical history during an assessment. Understanding these elements facilitates a holistic approach to patient care, ensuring that all factors are considered in the clinical decision-making process.

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://68wlpc.examzify.com>

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

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