

AIDS Certified Registered Nurse (ACRN) Certification Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

This is a sample study guide. To access the full version with hundreds of 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.

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. Don't worry about getting everything right, 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, and take breaks to retain information better.

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.

7. Use Other Tools

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

- 1. Who can legally have the HIV antibody test performed without their consent?**
 - A. Minor child seeking health care**
 - B. Adult in residential drug treatment**
 - C. Illegal alien seeking medical care**
 - D. Active member of armed forces**
- 2. How does smoking specifically affect individuals living with HIV?**
 - A. It lowers their immune response**
 - B. It increases the risk of cardiovascular disease and lung cancer**
 - C. It has no significant effect**
 - D. It creates a protective effect against infections**
- 3. HIV transmission has been most often associated with which of the following?**
 - A. Blood transfusions**
 - B. Injection drug use**
 - C. Perinatal transmission**
 - D. Unprotected sexual activity**
- 4. Which opportunistic infection is characterized by a dry cough and is common in AIDS patients?**
 - A. Histoplasmosis**
 - B. Pneumocystis pneumonia**
 - C. Cytomegalovirus**
 - D. Tuberculosis**
- 5. What is the role of the ACRN in patient care?**
 - A. To conduct laboratory tests**
 - B. To provide specialized nursing care for patients living with HIV/AIDS**
 - C. To manage pharmacy benefits**
 - D. To develop pharmaceutical treatments**

- 6. Which two conditions are considered AIDS-defining illnesses?**
- A. Diabetes and Hypertension**
 - B. Kaposi's sarcoma and opportunistic infections**
 - C. Hepatitis and Tuberculosis**
 - D. Heart Disease and Stroke**
- 7. A patient with acquired microsporidia is likely to develop which condition?**
- A. Laryngitis**
 - B. Pneumonia**
 - C. Enteritis**
 - D. Arthritis**
- 8. In the context of HIV transmission, which bodily fluid has the highest concentration of HIV?**
- A. Saliva**
 - B. Blood**
 - C. Urine**
 - D. Sweat**
- 9. Which factor contributes to the increased effectiveness of HIV management strategies?**
- A. Limited patient education**
 - B. Enhancing patient support systems**
 - C. Reducing healthcare access**
 - D. Encouraging untreated conditions**
- 10. A patient with HIV and cryptococcal meningitis should be treated with amphotericin and which other medication?**
- A. Trimethoprim**
 - B. Ketoconazole**
 - C. Flucytosine**
 - D. Nystatin**

Answers

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

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Explanations

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1. Who can legally have the HIV antibody test performed without their consent?

- A. Minor child seeking health care**
- B. Adult in residential drug treatment**
- C. Illegal alien seeking medical care**
- D. Active member of armed forces**

The active member of the armed forces can legally have the HIV antibody test performed without their consent due to the specific regulations and oversight within military health care systems. In many jurisdictions, military personnel undergo routine health screenings, including tests for infectious diseases like HIV, as part of their medical readiness and deployment requirements. The military has established protocols designed to maintain the health and safety of all service members, which include the ability to conduct necessary medical tests without individual consent in certain situations. Options regarding minors, adults in residential drug treatment, and illegal aliens are generally governed by different laws that often require either parental consent for minors or specific legal parameters for others. These groups typically maintain the right to consent to medical procedures, including HIV testing, to ensure that their autonomy and rights are respected within medical and legal frameworks.

2. How does smoking specifically affect individuals living with HIV?

- A. It lowers their immune response**
- B. It increases the risk of cardiovascular disease and lung cancer**
- C. It has no significant effect**
- D. It creates a protective effect against infections**

Individuals living with HIV are particularly vulnerable to the effects of smoking, which can exacerbate health complications. Smoking increases the risk of cardiovascular disease and lung cancer, conditions that are already heightened in those with HIV due to the virus's impact on the immune system. The presence of HIV and the additional strain caused by smoking can lead to significant health deterioration, as both conditions compromise overall health and resilience against other diseases. This makes the associated risks of smoking—especially regarding cardiovascular health and increased incidence of lung cancer—particularly concerning for those with an HIV diagnosis. Understanding the implications of smoking for those living with HIV is crucial for effective health management and prevention strategies. The cumulative toll that smoking can take on the body further underscores the importance of cessation efforts in this population to optimize their health outcomes.

3. HIV transmission has been most often associated with which of the following?

- A. Blood transfusions**
- B. Injection drug use**
- C. Perinatal transmission**
- D. Unprotected sexual activity**

Unprotected sexual activity is the most frequently associated mode of HIV transmission. This mode of transmission occurs when bodily fluids, such as blood, semen, vaginal fluids, or breast milk, come into contact with mucous membranes during sexual intercourse. The virus is present in high concentrations in these fluids, particularly in semen and vaginal secretions, which facilitates the transmission during unprotected sex. Furthermore, engaging in unprotected sexual activity increases exposure risk, especially in cases where one partner is HIV positive. Even when viral loads are undetectable due to effective antiretroviral therapy, risk may still be present if appropriate precautions aren't used. In the context of public health, campaigns often emphasize the importance of using protection to reduce the risk of HIV and other sexually transmitted infections (STIs). While other routes such as blood transfusions, injection drug use, and perinatal transmission are significant, they represent less common transmission pathways compared to the prevalence of sexual transmission in the general population.

4. Which opportunistic infection is characterized by a dry cough and is common in AIDS patients?

- A. Histoplasmosis**
- B. Pneumocystis pneumonia**
- C. Cytomegalovirus**
- D. Tuberculosis**

Pneumocystis pneumonia, commonly caused by the microorganism *Pneumocystis jirovecii*, is an opportunistic infection frequently seen in individuals with AIDS characterized by dry cough, fever, and difficulty breathing. In patients with HIV/AIDS, the immune system is compromised, leading to increased susceptibility to infections that typically do not pose a threat to immunocompetent individuals. The association between *Pneumocystis pneumonia* and AIDS is particularly significant because this infection often arises when the CD4 T-cell count falls below 200 cells/mm³, indicating advanced immunosuppression. The dry cough is a hallmark symptom, often accompanied by a gradual onset of respiratory distress. This infection can be life-threatening if not promptly recognized and treated. Other infections such as histoplasmosis, cytomegalovirus, and tuberculosis can also affect individuals with AIDS, but they manifest with different symptomatology and risk factors. For instance, histoplasmosis often presents with systemic symptoms and can lead to a more diffuse pulmonary process, while cytomegalovirus typically affects the eyes or gastrointestinal tract in HIV patients. Tuberculosis, although it can cause a cough, often presents with a productive cough along with constitutional symptoms like fever and night sweats. Therefore,

5. What is the role of the ACRN in patient care?

- A. To conduct laboratory tests
- B. To provide specialized nursing care for patients living with HIV/AIDS**
- C. To manage pharmacy benefits
- D. To develop pharmaceutical treatments

The role of the ACRN, or AIDS Certified Registered Nurse, is fundamentally centered around providing specialized nursing care for patients living with HIV/AIDS. This includes not only addressing the medical needs associated with the disease but also offering holistic care that considers the psychological, social, and emotional impacts of living with HIV/AIDS. The ACRN is trained to understand the complexities of the condition, stays updated on the latest treatment protocols, and is equipped to provide education and support to patients, which are crucial aspects of managing their health and well-being. In contrast, while conducting laboratory tests, managing pharmacy benefits, and developing pharmaceutical treatments may be components of healthcare, they do not capture the primary mission of the ACRN. The emphasis is placed on direct patient interaction, fostering relationships that enable better adherence to treatment plans, and navigating the challenges faced by individuals living with HIV/AIDS.

6. Which two conditions are considered AIDS-defining illnesses?

- A. Diabetes and Hypertension
- B. Kaposi's sarcoma and opportunistic infections**
- C. Hepatitis and Tuberculosis
- D. Heart Disease and Stroke

The identification of Kaposi's sarcoma and opportunistic infections as AIDS-defining illnesses is crucial in understanding the progression of HIV infection to AIDS. Kaposi's sarcoma is a cancer that often presents in individuals with advanced HIV due to their compromised immune systems. It is characterized by the emergence of abnormal blood vessels leading to purple lesions on the skin and other organs. The onset of this cancer signals significant immune system damage, which is a key criterion for diagnosing AIDS. Opportunistic infections are another hallmark of AIDS. These infections take advantage of an individual's weakened immune response and can include various pathogens that a healthy immune system would typically fend off, such as *Pneumocystis pneumonia* and certain types of fungal infections. When a person with HIV develops one or more of these infections, it indicates that their immune system has deteriorated to a level consistent with AIDS. Thus, the association of these conditions with a severely compromised immune system underlines why they are classified as AIDS-defining illnesses. Other options listed do not correlate with the criteria for AIDS classification as they refer to conditions unrelated to HIV and its effects on the immune system.

7. A patient with acquired microsporidia is likely to develop which condition?

- A. Laryngitis**
- B. Pneumonia**
- C. Enteritis**
- D. Arthritis**

The development of enteritis in a patient with acquired microsporidia is linked to the fact that microsporidia are opportunistic pathogens that primarily affect individuals with compromised immune systems, particularly those with HIV/AIDS. These parasites are known to infect the gastrointestinal tract, leading to enteric symptoms such as diarrhea and abdominal pain. Enteritis involves inflammation of the intestines, which can cause significant gastrointestinal distress. Microsporidia, especially species like *Enterocytozoon bienersi*, are commonly associated with chronic diarrhea in immunocompromised individuals. The underlying immunosuppression allows these organisms to proliferate within the intestines, causing enteritis as one of the key manifestations of the infection. Thus, in the context of a patient with acquired microsporidia, enteritis is the expected condition resulting from this opportunistic infection.

8. In the context of HIV transmission, which bodily fluid has the highest concentration of HIV?

- A. Saliva**
- B. Blood**
- C. Urine**
- D. Sweat**

Blood has the highest concentration of HIV among the bodily fluids listed. The presence of the virus in blood can be significantly higher compared to other fluids, such as saliva, urine, or sweat. This is key in understanding how HIV is transmitted, as blood is a primary mode through which the virus can be spread, especially through activities like unprotected sexual intercourse, sharing needles, or from mother to child during childbirth. In saliva, urine, and sweat, the concentrations of HIV are either undetectable or extremely low, making these fluids much less likely to pose a transmission risk. The clinical significance of the concentration levels in blood underscores the importance of prevention strategies that focus on behaviors and situations that expose individuals to blood rather than fluids like saliva or sweat.

9. Which factor contributes to the increased effectiveness of HIV management strategies?

- A. Limited patient education**
- B. Enhancing patient support systems**
- C. Reducing healthcare access**
- D. Encouraging untreated conditions**

Enhancing patient support systems is a crucial factor that significantly contributes to the increased effectiveness of HIV management strategies. Support systems can include a range of services such as counseling, peer support groups, access to mental health resources, and assistance with navigating healthcare services. When patients feel supported, they are more likely to adhere to their treatment regimens, engage in regular follow-up care, and maintain open communication with healthcare providers about their health concerns. Effective support systems can help alleviate the stigma associated with HIV, reduce feelings of isolation, and encourage patients to take a proactive role in managing their condition. Furthermore, a robust support network can assist in addressing other social determinants of health, such as housing instability or food insecurity, which can directly impact a patient's ability to manage their condition effectively. In contrast, limited patient education, reduced healthcare access, and encouraging untreated conditions contribute negatively to HIV management. These factors can hinder a patient's ability to understand their condition, access necessary treatment, and maintain overall health, ultimately leading to poorer health outcomes.

10. A patient with HIV and cryptococcal meningitis should be treated with amphotericin and which other medication?

- A. Trimethoprim**
- B. Ketoconazole**
- C. Flucytosine**
- D. Nystatin**

The correct choice is flucytosine, which is commonly used in combination with amphotericin B for the treatment of cryptococcal meningitis, particularly in patients with HIV. This combination therapy is crucial for effectively reducing the fungal load in the central nervous system. Flucytosine works as an antifungal agent by interfering with the synthesis of fungal RNA and proteins, leading to the disruption of fungal cell replication. When used with amphotericin B, which binds to the fungal cell membrane and increases membrane permeability, this combination maximizes the antifungal effect and helps improve outcomes for patients with severe infections like cryptococcal meningitis. The other options do not play a significant role in this specific treatment regimen for cryptococcal meningitis. Trimethoprim is primarily used as an antibiotic against bacterial infections, ketoconazole is an antifungal but not commonly used in acute cryptococcal infections due to concerns about effectiveness and safety, and nystatin is primarily used for superficial fungal infections rather than serious systemic infections like meningitis. Thus, flucytosine stands out as an essential agent in managing cryptococcal meningitis in patients with HIV.

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://acrn.examzify.com>

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