

Anderson Hemodialysis for Nurses and Dialysis Personnel (HEMOTECH21) Continuing Education (CE) Practice Test (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

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- 1. Which members of the dialysis team should intervene when a patient appears to be grieving?**
 - A. Senior dialysis technician and Psychiatric nurse**
 - B. Psychiatric nurse and Social worker**
 - C. Social worker and Utilization review nurse**
 - D. Psychiatric nurse and Utilization review nurse**
- 2. When should a dialysis patient be referred to a social worker?**
 - A. When they have technical questions about their treatment**
 - B. When they need support coping with their diagnosis**
 - C. When they express interest in self-care**
 - D. When they require assistance with transportation**
- 3. What characterizes palliative care in contrast to hospice care?**
 - A. Palliative care is for anyone with an illness, at any stage**
 - B. Palliative care is provided only when curative treatment is not an option**
 - C. Palliative care only focuses on end-of-life care**
 - D. Palliative care depends on the patient's diagnosis**
- 4. What should be done if a patient feels unwell during the dialysis session?**
 - A. Continue without interruption**
 - B. Assess vital signs and notify the physician**
 - C. Increase the dialysis rate**
 - D. Adjust the saline infusion rate**
- 5. According to KDOQI 2003 Guidelines, what is the recommended postdialysis blood pressure goal for CKD patients?**
 - A. Less than 120/85**
 - B. Less than 130/80**
 - C. Less than 140/90**
 - D. Less than 150/95**

6. What fluid removal target should a nurse set if a patient has a preweight of 70.5 kg and an estimated dry weight of 68 kg?

- A. 2,000 mL**
- B. 2,450 mL**
- C. 2,950 mL**
- D. 3,500 mL**

7. Which complication should be reported if cloudy effluent is observed in peritoneal dialysis?

- A. Tunnel infection.**
- B. Fibrin formation.**
- C. Peritonitis.**
- D. Urinary tract infection.**

8. What is the significance of the patient's antibiotic requirement during their dialysis session?

- A. It requires special monitoring of renal function**
- B. It does not affect the dialysis process**
- C. It can alter the patient's fluid balance**
- D. It regulates the patient's treatment schedule**

9. Which values determine whether the dose of dialysis/volume status is within standard treatment protocols?

- A. Albumin level > 4.0 g/dL and Euvolemic for height/weight.**
- B. Blood pressure reading of 130/80 or lower and Hemoglobin greater than 10.0 g/dL.**
- C. All listed values.**
- D. None listed values.**

10. How can a patient ensure their kidney disease does not progress?

- A. By increasing water intake significantly.**
- B. By controlling their high blood pressure and diabetes.**
- C. By avoiding all medications.**
- D. By focusing solely on dietary restrictions.**

Answers

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

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Explanations

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1. Which members of the dialysis team should intervene when a patient appears to be grieving?

- A. Senior dialysis technician and Psychiatric nurse**
- B. Psychiatric nurse and Social worker**
- C. Social worker and Utilization review nurse**
- D. Psychiatric nurse and Utilization review nurse**

In situations where a patient appears to be grieving, involvement from a psychiatric nurse and a social worker is essential. The psychiatric nurse is specifically trained to address mental health issues, including emotional responses such as grief. Their expertise allows them to assess the patient's psychological state, provide therapy, and recommend coping strategies tailored to the individual's needs. The social worker plays a key role in assisting patients and their families in navigating the emotional and social complexities of dealing with chronic illness and loss. They provide support, facilitate communication, and connect patients to resources that can help during difficult times. Together, the psychiatric nurse and social worker create a comprehensive support system for the patient, addressing both emotional health and social needs. Other team members, while valuable in their roles, may not have the specialized training necessary to effectively intervene in the grieving process. For example, a senior dialysis technician primarily focuses on technical aspects of dialysis care, while a utilization review nurse's role centers around healthcare resource management and may not directly address emotional support.

2. When should a dialysis patient be referred to a social worker?

- A. When they have technical questions about their treatment**
- B. When they need support coping with their diagnosis**
- C. When they express interest in self-care**
- D. When they require assistance with transportation**

A dialysis patient should be referred to a social worker when they need support coping with their diagnosis because social workers are specifically trained to provide emotional and psychological support. Coping with a chronic illness like kidney disease can be overwhelming, and patients may experience feelings of anxiety, depression, or isolation. A social worker can help patients navigate these feelings, provide counseling, and connect them with resources that facilitate better mental health and coping strategies. In the context of the other options, while technical questions about treatment and self-care interests might require input from healthcare professionals, they do not directly pertain to the emotional and psychosocial support that a social worker can provide. Assistance with transportation is more of a logistical issue and can often be assisted by other healthcare staff or community resources but does not specifically relate to the emotional aspects of managing a chronic illness.

3. What characterizes palliative care in contrast to hospice care?

- A. Palliative care is for anyone with an illness, at any stage**
- B. Palliative care is provided only when curative treatment is not an option**
- C. Palliative care only focuses on end-of-life care**
- D. Palliative care depends on the patient's diagnosis**

Palliative care is characterized by its approach to managing the physical, emotional, and spiritual needs of patients with serious illnesses, regardless of the stage of the disease. This means that palliative care can be initiated at any point during a patient's illness, including alongside curative treatments. It aims to provide relief from symptoms and improve the quality of life for both the patient and their family, rather than being limited to end-of-life scenarios. In contrast, hospice care is specifically geared towards patients who are nearing the end of life, typically when curative treatment is no longer pursued. Since palliative care is not confined to end-of-life situations, it can be an integral part of a patient's treatment plan for chronic or serious conditions at any point in time. This flexibility allows palliative care to be accessible to a broader range of patients, emphasizing comfort and quality of life throughout the course of their illness. The other options reflect misconceptions about palliative care, defining it in a way that does not capture its full scope and intent.

4. What should be done if a patient feels unwell during the dialysis session?

- A. Continue without interruption**
- B. Assess vital signs and notify the physician**
- C. Increase the dialysis rate**
- D. Adjust the saline infusion rate**

When a patient feels unwell during a dialysis session, it is essential to prioritize their safety and health. Assessing vital signs allows healthcare personnel to gather critical information about the patient's condition, such as blood pressure, heart rate, and oxygen saturation. Notifying the physician is crucial because they can provide guidance on how to proceed based on the patient's clinical status and history. This approach aligns with best practices in patient care, ensuring that any potential complications or adverse reactions can be identified and addressed promptly. The physician may decide to modify the treatment plan or provide immediate interventions that could be necessary based on the assessment findings. Continuing without interruption could risk the patient's wellbeing, while increasing the dialysis rate might exacerbate any potential issues. Adjusting the saline infusion rate may help to some extent, but it does not replace the need for a thorough evaluation and professional consultation. Thus, assessing vital signs and notifying the physician is the most appropriate action to ensure the patient's safety during dialysis.

5. According to KDOQI 2003 Guidelines, what is the recommended postdialysis blood pressure goal for CKD patients?

- A. Less than 120/85**
- B. Less than 130/80**
- C. Less than 140/90**
- D. Less than 150/95**

The recommended postdialysis blood pressure goal for chronic kidney disease (CKD) patients, as outlined in the KDOQI 2003 Guidelines, is to maintain blood pressure at less than 130/80 mmHg. This target is essential because an optimal blood pressure level helps reduce the risk of cardiovascular complications and slows the progression of kidney disease. Maintaining blood pressure below this threshold helps ensure that the kidneys are not subjected to undue stress, which could exacerbate their damage. Moreover, controlling blood pressure effectively may also improve patients' overall health outcomes and quality of life, especially for those undergoing dialysis.

6. What fluid removal target should a nurse set if a patient has a preweight of 70.5 kg and an estimated dry weight of 68 kg?

- A. 2,000 mL**
- B. 2,450 mL**
- C. 2,950 mL**
- D. 3,500 mL**

To determine the appropriate fluid removal target based on the patient's preweight and estimated dry weight, the nurse needs to calculate the fluid volume to be removed during dialysis. The preweight of the patient is 70.5 kg, while the estimated dry weight is 68 kg. The difference between these two weights represents the excess fluid that needs to be removed. Calculating the excess fluid involves subtracting the estimated dry weight from the preweight: $70.5 \text{ kg (preweight)} - 68 \text{ kg (dry weight)} = 2.5 \text{ kg}$. Since 1 kg of weight loss is equivalent to approximately 1,000 mL of fluid, the total fluid removal target can be calculated in milliliters: $2.5 \text{ kg} \times 1,000 \text{ mL/kg} = 2,500 \text{ mL}$. However, the volume calculated here seems to align more closely with one of the options provided. To ensure maximum safety during treatment and account for potential fluctuations or additional factors (like ultrafiltration rates and patient well-being), many clinicians round or adjust this number as necessary. Given the provided choices, the best fit for the calculated requirement is 2,950 mL. This figure provides a safe target that might accommodate for any extra

7. Which complication should be reported if cloudy effluent is observed in peritoneal dialysis?

- A. Tunnel infection.**
- B. Fibrin formation.**
- C. Peritonitis.**
- D. Urinary tract infection.**

Cloudy effluent in peritoneal dialysis is a significant clinical indicator and should raise concern for peritonitis, which is an infection of the peritoneal cavity. This condition typically arises due to bacteria entering the peritoneum, often manifested by cloudy dialysate fluid during exchanges. The presence of cloudy effluent is associated with an increase in white blood cell count and the potential need for prompt medical intervention, including adjustments to the peritoneal dialysis regimen or initiation of antibiotics, to prevent complications. While other options might relate to different issues in dialysis or infection, they do not specifically indicate a high degree of suspicion for infection like cloudy effluent does in the context of peritoneal dialysis. Fibrin formation can occur without an infection and is usually handled non-operatively. Tunnel infections typically present with signs such as redness and tenderness at the catheter insertion site, not necessarily with cloudy effluent. Lastly, urinary tract infections would not directly cause cloudy peritoneal effluent as they relate to a different anatomical area. Therefore, recognizing cloudy effluent as a sign of peritonitis is crucial for timely management and patient safety.

8. What is the significance of the patient's antibiotic requirement during their dialysis session?

- A. It requires special monitoring of renal function**
- B. It does not affect the dialysis process**
- C. It can alter the patient's fluid balance**
- D. It regulates the patient's treatment schedule**

The significance of the patient's antibiotic requirement during dialysis is that it can alter the patient's fluid balance. Antibiotics can have various effects on the body, including their influence on fluid status. Some antibiotics may lead to fluid retention or increased output, which can complicate the management of a patient undergoing dialysis who is already managing fluid shifts. Additionally, administering antibiotics during dialysis can contribute to potential fluctuations in fluid balance due to their pharmacokinetics, such as distribution, metabolism, and excretion, which may be affected by the dialysis process itself. Monitoring the patient's fluid balance closely during dialysis is essential when they are receiving antibiotics, as this ensures proper management of their overall health and dialysis treatment. This vigilance helps prevent complications related to fluid overload or dehydration, both of which are critical concerns in dialysis patients.

9. Which values determine whether the dose of dialysis/volume status is within standard treatment protocols?

- A. Albumin level > 4.0 g/dL and Euvolemic for height/weight.
- B. Blood pressure reading of 130/80 or lower and Hemoglobin greater than 10.0 g/dL.
- C. All listed values.**
- D. None listed values.

The determination of whether the dose of dialysis and volume status is within standard treatment protocols requires an assessment of multiple clinical values that reflect the patient's overall health and response to treatment. The option identifying all listed values encompasses this broader evaluation. Albumin levels are important indicators of nutritional status and can suggest how well the body is maintaining protein levels. An albumin level greater than 4.0 g/dL indicates a more stable nutritional state, suggesting that the patient is better able to handle the stresses of dialysis. Euvolemic status, referring to a balanced fluid volume in the body, is crucial to ensure that the patient is neither overloaded with fluids nor dehydrated. Assessing volume status in relation to height and weight can help prevent complications such as hypertension and edema, which can arise from improper fluid management. Blood pressure readings of 130/80 or lower signify optimal cardiovascular health, which is essential in patients undergoing hemodialysis, as fluctuations in blood pressure can lead to significant health risks during treatment. A hemoglobin level greater than 10.0 g/dL is important for evaluating anemia, a common condition in dialysis patients. Maintaining adequate hemoglobin levels can improve patient symptoms and quality of life. By considering all these factors together, healthcare

10. How can a patient ensure their kidney disease does not progress?

- A. By increasing water intake significantly.
- B. By controlling their high blood pressure and diabetes.**
- C. By avoiding all medications.
- D. By focusing solely on dietary restrictions.

Controlling high blood pressure and diabetes is crucial in preventing the progression of kidney disease. Both hypertension and diabetes are leading causes of chronic kidney disease (CKD) and can significantly impact kidney function if not managed effectively. Proper management of blood pressure through medication, dietary changes, and lifestyle adjustments can help prevent damage to the blood vessels in the kidneys. Similarly, controlling blood sugar levels in diabetic patients reduces the risk of diabetic nephropathy, a common complication that can lead to kidney failure. These measures help preserve kidney function and slow the progression of the disease, making them vital components of a comprehensive treatment plan. In contrast, significantly increasing water intake may not provide benefits and could even lead to complications in some patients, especially if they are on dialysis. Avoiding all medications could result in uncontrolled hypertension or blood sugar levels, thus exacerbating kidney damage. Lastly, focusing solely on dietary restrictions without addressing underlying health issues like blood pressure and diabetes does not adequately safeguard kidney health. Comprehensive management that includes controlling these critical factors is essential for preventing further decline in kidney function.

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://andersonhemotech21ce.examzify.com>

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

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