

Arizona Certified Nursing Assistant (CNA) Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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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

- 1. What is one of the main symptoms of atrophy?**
 - A. Increased muscle mass**
 - B. Stiffness in joints**
 - C. Decrease in muscle size**
 - D. Heightened reflexes**
- 2. What does Hepatitis B vaccination protect against?**
 - A. A respiratory disease**
 - B. A disease that affects the liver**
 - C. A neurological disorder**
 - D. A skin infection**
- 3. A resident with advance directions has a DNR order. What does this mean?**
 - A. The resident should receive all possible treatments**
 - B. The resident should not be resuscitated**
 - C. The resident's wishes are not documented**
 - D. The resident has chosen to end all treatments**
- 4. What is the correct disposal method for a used disposable razor?**
 - A. Throw it in the regular trash**
 - B. Place it in a sharps container immediately**
 - C. Flush it down the toilet**
 - D. Give it to a nurse for disposal**
- 5. Why is the Health Insurance Portability and Accountability Act (HIPAA) important for nurse aides?**
 - A. It provides guidelines for safe patient handling**
 - B. It identifies protected health information that must remain confidential**
 - C. It outlines the roles and responsibilities of nursing staff**
 - D. It ensures residents receive timely medical interventions**

- 6. What is a common reason for a resident to worry about confession upon nearing death?**
- A. The fear of losing consciousness**
 - B. Concern about dying in a state of sin**
 - C. Worry about family conflicts**
 - D. Stress from lack of food intake**
- 7. How can a nurse aide foster effective communication with a resident who has dementia?**
- A. By using technical language and instructions**
 - B. By frequently changing topics**
 - C. By providing simple and clear sentences**
 - D. By asking closed-ended questions**
- 8. Which of the following actions is inappropriate when dealing with a resident's personal information?**
- A. Discussing the resident's health with authorized personnel**
 - B. Sharing information with the resident's family without consent**
 - C. Keeping detailed records of the resident's care**
 - D. Reporting changes in the resident's status to the nurse**
- 9. What precaution should be taken when a resident is receiving oxygen?**
- A. Ensure the tubing is free of kinks**
 - B. Keep the oxygen tank close**
 - C. Limit resident movement**
 - D. Monitor the flow rate regularly**
- 10. If a resident is choking and cannot speak, what is the first action a nurse aide should take?**
- A. Call for help immediately**
 - B. Give the resident water to drink**
 - C. Provide abdominal thrusts from behind**
 - D. Check the resident's airway visually**

Answers

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

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Explanations

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1. What is one of the main symptoms of atrophy?

- A. Increased muscle mass**
- B. Stiffness in joints**
- C. Decrease in muscle size**
- D. Heightened reflexes**

Atrophy refers to the decrease in size or wasting away of a body part, particularly muscle tissue. The main symptom of atrophy is a noticeable decrease in muscle size, which can occur due to a variety of reasons such as disuse, aging, or medical conditions affecting the nervous system. When muscles are not regularly engaged in activity or exercise, they can shrink in size, leading to weakness and reduced functionality. This aligns with the understanding of how atrophy manifests, making the option indicating a decrease in muscle size the correct choice. Increased muscle mass would indicate growth, stiffness in joints is more associated with arthritis or injury rather than atrophy, and heightened reflexes suggest a heightened neurological response, which is not indicative of muscle atrophy. Understanding these distinctions is crucial for recognizing the signs of musculoskeletal conditions and their effects on a patient's overall health.

2. What does Hepatitis B vaccination protect against?

- A. A respiratory disease**
- B. A disease that affects the liver**
- C. A neurological disorder**
- D. A skin infection**

Hepatitis B vaccination specifically protects against Hepatitis B, a viral infection that primarily targets the liver. The infection can lead to serious health issues, including chronic liver disease, liver cirrhosis, and even liver cancer. This vaccination plays a crucial role in public health by preventing the transmission of the virus, which can be spread through contact with infectious body fluids, such as blood. Due to the focus on the liver's role in the impact of Hepatitis B, it is essential to understand that the other choices do not pertain to the virus. A respiratory disease would involve a different set of pathogens and vaccination strategies, while neurological disorders and skin infections are also unrelated to Hepatitis B. Therefore, the correct implication of the Hepatitis B vaccine is its protective effect against liver disease.

3. A resident with advance directions has a DNR order. What does this mean?

- A. The resident should receive all possible treatments**
- B. The resident should not be resuscitated**
- C. The resident's wishes are not documented**
- D. The resident has chosen to end all treatments**

A Do Not Resuscitate (DNR) order indicates that the resident has made the decision that they do not wish to undergo cardiopulmonary resuscitation (CPR) or advanced cardiac life support in the event that their heart stops or they stop breathing. This is a legal document that reflects the resident's wishes regarding end-of-life care, emphasizing the importance of respecting their autonomy and choices regarding treatment. In this context, the DNR order signifies that if a medical emergency occurs where resuscitation would typically be administered, medical professionals should honor the resident's preference and refrain from initiating those life-saving measures. It is important to note that a DNR order does not mean that the resident will not receive other forms of medical care. Instead, it specifically relates to the actions taken in the event of cardiac arrest. The other provided choices describe situations or concepts that do not align with the specific implications of a DNR order, making them less relevant to the question regarding what the DNR means for the resident's care.

4. What is the correct disposal method for a used disposable razor?

- A. Throw it in the regular trash**
- B. Place it in a sharps container immediately**
- C. Flush it down the toilet**
- D. Give it to a nurse for disposal**

The proper disposal method for a used disposable razor is to place it in a sharps container immediately. This is because disposable razors have sharp edges that can pose a risk of cuts and injury to anyone who might come into contact with them if not disposed of properly. Using a designated sharps container, which is constructed to safely contain such sharp objects, mitigates the risk of injury and ensures that the razor will be handled safely during the disposal process. Disposing of razors in any other manner, such as throwing them in the regular trash, flushing them down the toilet, or giving them to a nurse, increases the likelihood of injury either to waste management personnel, sanitation workers, or even patients and staff in a healthcare setting. A sharps container is specifically designed for the safe disposal of items like needles and razors, adhering to medical waste disposal regulations and ensuring safety in healthcare environments.

5. Why is the Health Insurance Portability and Accountability Act (HIPAA) important for nurse aides?

- A. It provides guidelines for safe patient handling**
- B. It identifies protected health information that must remain confidential**
- C. It outlines the roles and responsibilities of nursing staff**
- D. It ensures residents receive timely medical interventions**

The importance of the Health Insurance Portability and Accountability Act (HIPAA) for nurse aides lies primarily in its provision for the protection of patients' health information. HIPAA establishes national standards to safeguard medical records and other personal health information, ensuring that this sensitive data is kept confidential and secure. For nurse aides, understanding and adhering to HIPAA guidelines is critical as they are often in direct contact with patients' medical records. This compliance not only helps protect the privacy of patients but also fosters trust between patients and healthcare providers. Failure to uphold these confidentiality standards can lead to severe consequences such as legal actions and loss of professional licensure. Therefore, knowledge of what constitutes protected health information and the necessity to keep it confidential is foundational for nurse aides as they perform their duties in various healthcare settings. The other options do not align with the primary objective of HIPAA. While safe patient handling, the roles of nursing staff, and ensuring timely medical interventions are essential aspects of healthcare, they do not embody the core purpose of HIPAA, which is fundamentally about privacy and security of health information.

6. What is a common reason for a resident to worry about confession upon nearing death?

- A. The fear of losing consciousness**
- B. Concern about dying in a state of sin**
- C. Worry about family conflicts**
- D. Stress from lack of food intake**

A common concern for residents nearing death is the fear of dying in a state of sin. Many individuals have deeply held beliefs about morality, spirituality, and the afterlife, which often include the importance of confession or seeking forgiveness for their sins. This concern may lead them to feel anxious or fearful about not having the opportunity to reconcile with their faith before passing away. The desire for spiritual reassurance can be a significant factor in their emotional and psychological state as they approach the end of life. The other options, while they may contribute to a person's anxiety in different contexts, do not specifically relate to the spiritual and moral considerations that are typically at the forefront when one is contemplating their life and impending death. Fear of losing consciousness can be a general anxiety but doesn't directly connect to the need for confession. Worry about family conflicts, although relevant, is more emotionally transient. Lack of food intake can cause physical stress but doesn't hold the same spiritual implications that prompt worry about dying without confession.

7. How can a nurse aide foster effective communication with a resident who has dementia?

- A. By using technical language and instructions**
- B. By frequently changing topics**
- C. By providing simple and clear sentences**
- D. By asking closed-ended questions**

Fostering effective communication with a resident who has dementia involves using simple and clear sentences. This technique helps to minimize confusion and enhances understanding. Residents with dementia may struggle with processing complex language or multi-step instructions, so breaking down information into straightforward, concise phrases can make it easier for them to comprehend what is being communicated. Using simple language allows the nurse aide to convey information in a manner that aligns with the resident's cognitive abilities, promoting not only better understanding but also encouraging them to engage in the conversation. It creates a supportive environment where the resident feels more comfortable and less overwhelmed, ultimately improving the overall quality of care and interaction. In contrast, using technical language can lead to further confusion, frequently changing topics may disorient the resident, and closed-ended questions, while sometimes useful, can limit the resident's ability to express themselves fully, potentially leading to frustration. Each of these approaches may not account for the cognitive challenges faced by individuals with dementia, underscoring the importance of clear and simple communication.

8. Which of the following actions is inappropriate when dealing with a resident's personal information?

- A. Discussing the resident's health with authorized personnel**
- B. Sharing information with the resident's family without consent**
- C. Keeping detailed records of the resident's care**
- D. Reporting changes in the resident's status to the nurse**

Sharing information with the resident's family without consent is considered inappropriate because it violates the resident's right to privacy and confidentiality. In healthcare, personal information is protected under laws such as HIPAA (Health Insurance Portability and Accountability Act), which establishes strict guidelines on how and when patient information can be disclosed. Family members or anyone else not directly involved in the resident's care cannot be given access to that individual's healthcare information unless the resident has provided explicit consent. On the other hand, discussions about the resident's health with authorized personnel, keeping detailed records of the resident's care, and reporting changes in the resident's status to the nurse are all actions that respect the confidentiality policies and are essential for providing safe and effective care. These actions ensure that necessary information is shared with individuals who have a legitimate need to know for the purpose of treatment and care management.

9. What precaution should be taken when a resident is receiving oxygen?

- A. Ensure the tubing is free of kinks**
- B. Keep the oxygen tank close**
- C. Limit resident movement**
- D. Monitor the flow rate regularly**

Ensuring the tubing is free of kinks is vital when a resident is receiving oxygen because kinks can restrict airflow, reducing the effectiveness of the oxygen delivery. When the tubing is obstructed, the patient may not receive the necessary amount of oxygen, which can lead to respiratory distress or other complications. It is essential for healthcare staff to regularly check the tubing about its condition to maintain an unobstructed pathway for oxygen. This precaution helps ensure that the resident receives a consistent and adequate supply of oxygen, which is critical for their wellbeing. Maintaining proper tubing condition directly impacts the patient's oxygen saturation levels and overall health; therefore, this precaution is considered best practice in a clinical setting.

10. If a resident is choking and cannot speak, what is the first action a nurse aide should take?

- A. Call for help immediately**
- B. Give the resident water to drink**
- C. Provide abdominal thrusts from behind**
- D. Check the resident's airway visually**

When a resident is choking and unable to speak, the priority is to clear the airway to prevent further harm. Providing abdominal thrusts from behind is the appropriate response in this situation as it is the most effective first aid technique for someone who is choking and unresponsive. This method works by creating an upward pressure in the abdomen, which can help dislodge the object blocking the airway. Immediately attempting to provide rescue measures is vital because the longer the airway remains obstructed, the greater the risk of severe complications, including loss of consciousness or even death. In contrast, calling for help can be important as well but should generally be done after initiating abdominal thrusts, especially if the situation appears life-threatening. Giving a resident water to drink is not advisable, as it can worsen the choking. Visually checking the airway may provide some information, but it delays the critical intervention needed to assist the resident. Therefore, abdominal thrusts are the correct first action to take.

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://arizonacertifiednursingassistant.examzify.com>

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