

ARIZONA CERTIFIED NURSING ASSISTANT (CNA) 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.

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. A resident's hands shake when trying to drink liquids. What is the best response by the nurse aide?**
 - A. Encourage the resident to use a regular cup
 - B. Suggest that the resident might do well with a cup with a lid
 - C. Assist the resident in drinking
 - D. Provide a straw for easier intake
- 2. When a nurse aide finds a resident with a history of falls on the floor, what should they do first?**
 - A. Administer first aid
 - B. Call for help while keeping the resident calm
 - C. Check the resident for injuries
 - D. Help the resident to their feet immediately
- 3. Sim's position is best described as what?**
 - A. Flat on the back
 - B. Right side-lying with legs extended
 - C. Left side-lying with the upper leg flexed
 - D. Sitting with knees elevated
- 4. What level of assistance does a resident receiving passive range of motion (PROM) require from the nurse aide?**
 - A. No assistance required
 - B. Some assistance from the nurse aide
 - C. Full assistance with the nurse aide taking the joints through exercises
 - D. Independent with supervision
- 5. A resident usually responds verbally to greetings but seems to have trouble waking up. What should the nurse aide's next actions be?**
 - A. Try to wake the resident up gently
 - B. Call for the charge nurse immediately
 - C. Let the resident sleep
 - D. Assess vital signs on the resident

- 6. How should a nurse aide respond when a resident frequently requests to go to the bathroom while on a toileting schedule?**
- A. Tell the resident to wait their turn
 - B. Inform the resident that this is against the schedule
 - C. Take the resident to the bathroom as needed
 - D. Suggest the resident hold it until the next scheduled time
- 7. Which of the following illustrates an example of disinfection?**
- A. Washing hands with soap and water
 - B. Cleaning a shower chair with a chemical cleanser
 - C. Using a vacuum cleaner on the floor
 - D. Wiping down surfaces with a dry cloth
- 8. A resident with dementia is trying to get out of bed without help. What should the nurse aide do first?**
- A. Call for help immediately
 - B. Ensure safety by securing the resident in bed
 - C. Try to find out if there is something the resident needs
 - D. Assist the resident back to bed without speaking
- 9. What is the recommended position for giving an enema?**
- A. Sitting upright
 - B. Left Sims
 - C. Supine position
 - D. Right lateral position
- 10. When a resident is unable to stand, how is their height usually measured?**
- A. From head to heels while the resident is sitting
 - B. From head to heels while the resident is standing
 - C. From head to heels while the resident is flat in bed
 - D. Using a chair to approximate their height

Answers

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

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Explanations

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1. A resident's hands shake when trying to drink liquids. What is the best response by the nurse aide?

- A. Encourage the resident to use a regular cup
- B. Suggest that the resident might do well with a cup with a lid**
- C. Assist the resident in drinking
- D. Provide a straw for easier intake

The best response in this scenario involves suggesting the use of a cup with a lid. This approach addresses the resident's shaking hands by providing a practical solution that can help minimize spills and make drinking easier and more manageable. A cup with a lid can also enhance the resident's confidence and independence, as they may feel less anxiety about their ability to drink without making a mess. Using a lid can also help maintain the temperature of the beverage and keep it contained, which can be especially beneficial if the resident has difficulty coordinating their movements. This option not only promotes safety but also respects the dignity of the resident by encouraging their autonomy in self-care. While providing a straw could assist with easier intake, it may not address the potential for spills as effectively as a cup with a lid. Encouraging the use of a regular cup or directly assisting in drinking may undermine the resident's ability to drink independently, which is an important consideration in nursing care. Thus, suggesting a modified cup with a lid is the most supportive response for the situation.

2. When a nurse aide finds a resident with a history of falls on the floor, what should they do first?

- A. Administer first aid
- B. Call for help while keeping the resident calm**
- C. Check the resident for injuries
- D. Help the resident to their feet immediately

When a nurse aide finds a resident with a history of falls on the floor, the first action should be to call for help while keeping the resident calm. This approach is essential for several reasons. In situations where a resident has fallen, maintaining the safety and well-being of the individual is paramount. By calling for help, the nurse aide ensures that trained personnel are on hand to assist, which is crucial as moving the resident prematurely could exacerbate any potential injuries they may have sustained. Additionally, keeping the resident calm is vital. Falls can be disorienting and frightening, so offering reassurance can help mitigate anxiety and prevent further panic. This calm demeanor helps create a safer environment until professional assistance arrives. Checking for injuries or administering first aid are important follow-up actions, but they should occur after the initial step of ensuring help is on the way. Helping the resident to their feet immediately could lead to complications if they have sustained an injury, which is why this action should be avoided until a proper assessment is made by qualified personnel.

3. Sim's position is best described as what?

- A. Flat on the back
- B. Right side-lying with legs extended
- C. Left side-lying with the upper leg flexed**
- D. Sitting with knees elevated

Sim's position is characterized by a left side-lying posture where the upper leg is flexed at the hip and knee. This position allows for optimal drainage of fluids from the lungs and is frequently used for patients undergoing certain medical and surgical procedures. It is also comfortable for patients who may need to breathe more easily or require access to the rectal area for examinations or procedures. The positioning of the upper leg being flexed provides stability and comfort, alleviating pressure on bony prominences and helping to prevent skin breakdown. This position is often utilized in nursing practice for both comfort and medical necessity, demonstrating its essential role in patient care.

4. What level of assistance does a resident receiving passive range of motion (PROM) require from the nurse aide?

- A. No assistance required
- B. Some assistance from the nurse aide
- C. Full assistance with the nurse aide taking the joints through exercises**
- D. Independent with supervision

A resident receiving passive range of motion (PROM) exercises requires full assistance from the nurse aide because the primary purpose of PROM is to maintain joint mobility and prevent stiffness in individuals who cannot actively move the affected limbs themselves. This is particularly important for residents with mobility impairments, such as those recovering from surgery, neurological conditions, or severe weakness. During PROM, the nurse aide is responsible for gently moving the resident's joints through their full range of motion without any effort from the resident. This not only helps in maintaining flexibility and preventing contractures but also ensures that the exercises are performed safely and effectively. The aide needs to be attentive to the resident's comfort and any signs of discomfort or resistance during the movements, adjusting the technique as necessary. Therefore, full assistance is vital to ensure that the resident benefits from these therapeutic exercises.

5. A resident usually responds verbally to greetings but seems to have trouble waking up. What should the nurse aide's next actions be?

- A. Try to wake the resident up gently
- B. Call for the charge nurse immediately**
- C. Let the resident sleep
- D. Assess vital signs on the resident

The most appropriate action in this situation is to try to wake the resident up gently. When a resident typically responds verbally but is having difficulty waking up, it can be an indicator that something may be wrong. Gently waking the resident allows you to assess their level of consciousness and ensure their safety. It is important to monitor any changes in the resident's responsiveness, as this could lead to identifying a potential medical issue that requires immediate attention. Calling for the charge nurse immediately may be necessary if the gentle attempts to awaken the resident are unsuccessful, or if the resident shows signs of distress or has abnormal vital signs. However, taking the initiative to gently wake the resident is the first step in assessing the situation before escalating to seeking assistance. Letting the resident sleep without attempting to wake them could result in missing a serious health concern. Assessing vital signs should be considered after the attempt to awaken has been made and if the resident does not respond or shows further concerning symptoms. Therefore, trying to wake them up gently prioritizes the resident's safety and allows for appropriate follow-up actions based on their response.

6. How should a nurse aide respond when a resident frequently requests to go to the bathroom while on a toileting schedule?

- A. Tell the resident to wait their turn
- B. Inform the resident that this is against the schedule
- C. Take the resident to the bathroom as needed**
- D. Suggest the resident hold it until the next scheduled time

When a resident frequently requests to go to the bathroom while on a toileting schedule, responding by taking the resident to the bathroom as needed is the most appropriate approach. This response acknowledges the resident's individual needs and respects their comfort and dignity. In nursing care, it is essential to prioritize the well-being of residents, which includes their need to maintain regular and timely access to the bathroom. A rigid adherence to a predetermined schedule does not account for each resident's varying levels of bladder capacity, urgency, and individual preference. Many residents may feel discomfort or experience urgency that necessitates immediate action, making it vital for caregivers to be responsive rather than strictly adhering to a schedule. By accommodating the resident's requests, the nursing aide not only provides personal care but also fosters trust and promotes a positive care experience. Additionally, this responsiveness can help prevent incidents of incontinence, which can be distressing for residents and may lead to further complications or discomfort.

7. Which of the following illustrates an example of disinfection?

- A. Washing hands with soap and water
- B. Cleaning a shower chair with a chemical cleanser**
- C. Using a vacuum cleaner on the floor
- D. Wiping down surfaces with a dry cloth

Disinfection refers specifically to the process of using chemicals to eliminate or reduce harmful microorganisms on surfaces, making them safe for use, particularly in healthcare settings. In this context, cleaning a shower chair with a chemical cleanser is an example of disinfection because the chemical cleanser is designed to kill or inactivate pathogens that may be present on that surface. Washing hands with soap and water primarily serves to remove dirt, debris, and some microorganisms, but it does not necessarily kill all pathogens, thus it is more about sanitation than disinfection. Using a vacuum cleaner on the floor involves removing dirt and debris but does not specifically target pathogens, so it does not meet the criteria for disinfection. Wiping down surfaces with a dry cloth merely removes loose particles and does not actively kill germs or pathogens, also excluding it from the process of disinfection. Therefore, the action of cleaning a shower chair with a chemical cleanser stands out as an effective example of disinfection, emphasizing the importance of using the correct methods to ensure surfaces are safe in a healthcare environment.

8. A resident with dementia is trying to get out of bed without help. What should the nurse aide do first?

- A. Call for help immediately
- B. Ensure safety by securing the resident in bed
- C. Try to find out if there is something the resident needs**
- D. Assist the resident back to bed without speaking

When approaching a situation where a resident with dementia is trying to get out of bed without assistance, prioritizing communication and understanding the resident's needs is essential. The correct response involves trying to find out if there is something the resident needs. Residents with dementia may be confused and may not clearly communicate their desires or needs. By engaging them and seeking to understand their motivations, the nurse aide can assess whether the resident is trying to get out of bed for a specific reason, such as needing to use the restroom or feeling uncomfortable. This approach emphasizes patient-centered care, fostering an environment where residents feel their needs are acknowledged and respected. Additionally, it can help prevent potential accidents or injuries that could arise from unassisted movements. In this context, securing the resident's safety is crucial, but jumping to that action without understanding their needs first might not address the underlying issue leading to their attempt to get out of bed. Following a supportive inquiry can make all the difference in ensuring the resident's safety while also respecting their autonomy and dignity.

9. What is the recommended position for giving an enema?

- A. Sitting upright
- B. Left Sims**
- C. Supine position
- D. Right lateral position

The recommended position for giving an enema is the left Sims position. This positioning involves having the patient lie on their left side with the left leg straight and the right leg bent at the knee. This position is optimal because it allows gravity to assist the fluid in passing into the rectum and colon more effectively. It also helps to keep the intestinal tract open for the enema fluid to flow in, facilitating the procedure. The left Sims position is also advantageous for patient comfort and privacy, making it a standard choice in clinical settings. This position minimizes the risk of injury or discomfort, which is particularly important when the patient may experience anxiety or discomfort related to the procedure. The other positions may not provide the same level of ease and effectiveness in delivering the enema.

10. When a resident is unable to stand, how is their height usually measured?

- A. From head to heels while the resident is sitting
- B. From head to heels while the resident is standing
- C. From head to heels while the resident is flat in bed**
- D. Using a chair to approximate their height

Measuring the height of a resident who is unable to stand is typically done while they are lying flat in bed. This method ensures accuracy since the resident's full body length can be measured without the complications that may arise when trying to assess height from a sitting position. When the resident is flat in bed, a caregiver can extend a measuring tape or ruler from the top of the resident's head to the tips of their toes to get a precise measurement. Other potential methods, like measuring from a seated position, can lead to inconsistencies because sitting can alter the natural posture of an individual, thus making it harder to gauge their true height. Using a chair for approximation is also not an ideal method because it does not provide an accurate measurement of height; instead, it merely estimates based on the assumption that the seated height can be reliably converted to full height, which is often not the case.

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!

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