

# ATI Fundamentals 5 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

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- 1. A parent tells the nurse that their preschool-aged child has suddenly become disinterested in certain foods. Which statement should the nurse make?**
  - A. During this phase, feed your child anything that she will eat**
  - B. Provide a large variety of fruit juices for your child to choose from**
  - C. Keep a diary of the foods your child eats each day**
  - D. Increase the amount of calories and water your child consumes**
  
- 2. Which statement describes the appropriate administration of potassium in hypokalemia?**
  - A. Administer IV potassium push when available**
  - B. Administer IV potassium via rapid bolus**
  - C. Administer oral potassium only**
  - D. Administer IV potassium via piggyback infusion with continuous ECG monitoring**
  
- 3. For bladder scanner post-void residual assessment, which action is correct?**
  - A. Have client urinate 10 minutes before scan**
  - B. Position the scanner head at the symphysis pubis**
  - C. Apply light pressure to the scanner head**
  - D. Assist the client into a semi-Fowler's position**
  
- 4. If a client receives the wrong medication, which action should the nurse take first?**
  - A. Complete a medication error report**
  - B. Notify the prescribing provider**
  - C. Assess the client**
  - D. Notify the charge nurse**

- 5. To promote wound healing in a postoperative patient with inadequate intake, which protein intake per kilogram is recommended?**
- A. 0.8 g/kg**
  - B. 1.0 g/kg**
  - C. 1.5 g/kg**
  - D. 2.0 g/kg**
- 6. Which practice most supports safe enteral feeding via NG tube?**
- A. Flush tubing with 15 mL after feeding**
  - B. Elevate the head of the bed to 30-45 degrees before feeding**
  - C. Auscultate bowel sounds after feeding**
  - D. Give the formula cold prior to administration**
- 7. To insert an NG tube for a client who has a bowel obstruction, what should the nurse do first?**
- A. Give the client a glass of water**
  - B. Assist the client in a sitting position**
  - C. Explain the procedure to the client**
  - D. Measure the length of tubing to be inserted**
- 8. To confirm NG tube placement in the stomach, the nurse checks gastric fluid pH. Which value indicates gastric contents?**
- A. 6**
  - B. 2**
  - C. 10**
  - D. 8**
- 9. A nurse caring for a client with MRSA should implement which precaution?**
- A. Dispose of all bed linens used by the client**
  - B. Wear a gown when in the client's room**
  - C. Wear a mask when providing care**
  - D. Place the client in a semi-private room**

- 10. A nurse is preparing to administer a unit of packed RBCs when the IV line is not patent. The IV team says a new line will be ready in 30 minutes. What should the nurse do with the blood product?**
- A. Return the blood to the laboratory**
  - B. Place the blood in the medication room**
  - C. Place the blood in the refrigerator**
  - D. Leave the blood at the client's bedside**

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## Answers

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

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## **Explanations**

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1. A parent tells the nurse that their preschool-aged child has suddenly become disinterested in certain foods. Which statement should the nurse make?
- A. During this phase, feed your child anything that she will eat
  - B. Provide a large variety of fruit juices for your child to choose from
  - C. Keep a diary of the foods your child eats each day**
  - D. Increase the amount of calories and water your child consumes

When a preschooler shows disinterest in certain foods, the best next step is to systematically track what the child eats with a daily food diary. Recording all foods offered and consumed, including serving sizes and meal times, gives a clear picture of intake and patterns over days. This helps you see if the child is getting a balanced mix of nutrients (such as protein, fruits/vegetables, grains, calcium) and whether there are persistent gaps or preferences that could affect growth. With this information, parents and clinicians can tailor strategies—like repeated but pressure-free exposure to new foods, maintaining regular meals and snacks, and addressing textures or sensory issues—without undermining growth. Keeping a diary is more useful than simply feeding the child anything, which can reinforce picky eating and insufficient nutrition. Relying on a large variety of fruit juices isn't advisable because juice is high in sugar and can reduce appetite for solid foods and lead to nutritional imbalances. Simply increasing calories and water isn't targeted or supportive of establishing healthy eating patterns; the focus should be on offering balanced meals and appropriate portions while tracking intake to ensure growth and development are on track.

2. Which statement describes the appropriate administration of potassium in hypokalemia?
- A. Administer IV potassium push when available
  - B. Administer IV potassium via rapid bolus
  - C. Administer oral potassium only
  - D. Administer IV potassium via piggyback infusion with continuous ECG monitoring**

Potassium replacement must be given in a controlled, monitored way because rapid changes in serum potassium can trigger dangerous heart rhythms. Intravenous potassium should never be given as a push or a rapid bolus; concentrated potassium solutions can cause vein irritation and may lead to life-threatening arrhythmias if given too quickly. Oral potassium can be used for mild deficits, but in more significant hypokalemia or when oral therapy isn't feasible, IV replacement is necessary. The safest and most reliable method is IV potassium delivered via a piggyback infusion with continuous ECG monitoring. This setup allows a slow, controlled rate through an IV pump, with ongoing observation for any arrhythmias and frequent reassessment of potassium levels to avoid both under-treatment and overcorrection.

**3. For bladder scanner post-void residual assessment, which action is correct?**

- A. Have client urinate 10 minutes before scan**
- B. Position the scanner head at the symphysis pubis**
- C. Apply light pressure to the scanner head**
- D. Assist the client into a semi-Fowler's position**

In post-void bladder scanning, getting an accurate residual volume depends on good contact between the probe and the skin so the ultrasound can clearly visualize the bladder. The best action is to lightly press the scanner head against the lower abdomen. This light pressure helps the ultrasound waves pass through the tissue, reduces artifacts from air or gas, and improves visualization of the bladder, leading to a more accurate measurement. It's important not to press hard, which can compress the bladder and distort the reading, and to place the probe on the lower abdomen just above the pubic bone rather than directly at the pubic symphysis. The scan is done after the client voids, not before or long after, and the patient is typically positioned supine rather than semi-Fowler's.

**4. If a client receives the wrong medication, which action should the nurse take first?**

- A. Complete a medication error report**
- B. Notify the prescribing provider**
- C. Assess the client**
- D. Notify the charge nurse**

The immediate priority is to assess the client. When a medication error occurs, you first determine the patient's condition to see if harm has occurred and what urgent actions are needed. Check vital signs and basic stability, evaluate airway, breathing, and circulation, and look for signs of an adverse reaction or overdose (such as confusion, dizziness, shortness of breath, rash, or changes in skin color). This assessment guides the next steps—whether to hold further doses, initiate any emergency interventions, or administer antidotes or supportive care as needed. After you've gauged the patient's status, you would notify the prescriber and begin the required documentation and reporting according to policy.

**5. To promote wound healing in a postoperative patient with inadequate intake, which protein intake per kilogram is recommended?**

- A. 0.8 g/kg
- B. 1.0 g/kg
- C. 1.5 g/kg**
- D. 2.0 g/kg

Protein needs rise during wound healing because amino acids are the building blocks for repairing tissue, making collagen, and supporting the immune response. When intake is inadequate, providing enough protein helps create a positive nitrogen balance so the body can devote its resources to repair rather than breaking down lean tissue. For someone recovering from surgery with insufficient calories or protein intake, around 1.5 g of protein per kilogram of body weight each day is a practical target to support healing. This level provides more than maintenance (about 0.8 g/kg) but isn't excessive for most patients unless there's extreme stress or kidney concerns. Distribute that protein across meals and ensure overall energy needs are met, because adequate calories help spare protein for tissue repair. If intake remains low, consider supplementation or tube feeding to meet these needs.

**6. Which practice most supports safe enteral feeding via NG tube?**

- A. Flush tubing with 15 mL after feeding
- B. Elevate the head of the bed to 30-45 degrees before feeding**
- C. Auscultate bowel sounds after feeding
- D. Give the formula cold prior to administration

Preventing aspiration is the main safety concern with NG-tube feeds. Elevating the head of the bed to 30-45 degrees helps keep gastric contents low in the stomach and reduces the chance that they will reflux into the esophagus and be aspirated into the lungs. This position should be maintained during the feeding and for a period afterward to maximize protection. Flushing the tubing after feeding helps keep the line patent, which is important but does not directly prevent aspiration. Listening for bowel sounds after feeding isn't a reliable safety check and doesn't address the risk of aspirating formula. Giving cold formula isn't a safety measure and can cause discomfort; the critical factor for safety is maintaining an upright position to minimize reflux and aspiration risk.

**7. To insert an NG tube for a client who has a bowel obstruction, what should the nurse do first?**

- A. Give the client a glass of water**
- B. Assist the client in a sitting position**
- C. Explain the procedure to the client**
- D. Measure the length of tubing to be inserted**

The first step is to explain the procedure to the client. Before an invasive action like inserting an NG tube, you need to obtain informed cooperation by describing what will be done, why it's needed, and what sensations or risks to expect. This helps the patient understand, ask questions, and consent (even if consent is implied by allowing the procedure). Once the patient is informed, you can move on to the practical steps—positioning the patient, measuring the tubing, and then the insertion itself. The other options aren't appropriate as the initial action: giving water may be unsafe if the patient is NPO or at risk for aspiration, and the actual positioning or measuring are actions that follow the explanation and consent.

**8. To confirm NG tube placement in the stomach, the nurse checks gastric fluid pH. Which value indicates gastric contents?**

- A. 6**
- B. 2**
- C. 10**
- D. 8**

Gastric contents are highly acidic because of stomach acid. When you aspirate from an NG tube and test the pH, a value around 2 indicates the fluid is gastric. Higher, more alkaline values (like 6, 8, or 10) suggest the fluid is not gastric and could come from the intestines or respiratory tract, or it might be affected by antacid use. So a pH of about 2 is the best sign that the tube is in the stomach. If aspiration is not obtainable or pH is inconclusive, follow your facility's protocol for imaging confirmation.

**9. A nurse caring for a client with MRSA should implement which precaution?**

- A. Dispose of all bed linens used by the client**
- B. Wear a gown when in the client's room**
- C. Wear a mask when providing care**
- D. Place the client in a semi-private room**

MRSA spreads mainly through direct and indirect contact, so protecting yourself with contact precautions is essential. Wearing a gown when you enter the client's room creates a barrier between your clothing and any contaminated surfaces or secretions, helping prevent transmission to you and to other patients. This barrier, typically used with gloves and strict hand hygiene, directly tackles the main way MRSA spreads in a health-care setting. The other options don't address the primary transmission route: masks are for protecting against respiratory droplets, not MRSA transmission via contact; placing the client in a semi-private room isn't a precaution by itself when MRSA is present (private room is preferred when possible, but the key action is using contact precautions); and handling linens properly is important, but MRSA prevention centers on barrier protection (gloves and gown) to stop contact transmission.

**10. A nurse is preparing to administer a unit of packed RBCs when the IV line is not patent. The IV team says a new line will be ready in 30 minutes. What should the nurse do with the blood product?**

- A. Return the blood to the laboratory**
- B. Place the blood in the medication room**
- C. Place the blood in the refrigerator**
- D. Leave the blood at the client's bedside**

When a blood product is prepared for transfusion, it must be kept under proper temperature and started promptly. If the IV line isn't ready within the expected time, the safest action is to return the unit to the blood bank/laboratory. This preserves the product's safety and integrity and allows it to be reissued for another patient if needed, rather than risking contamination or temperature abuse by leaving it at the bedside or storing it in an inappropriate location.

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# 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](mailto:hello@examzify.com).**

**Or visit your dedicated course page for more study tools and resources:**

**<https://atifunds5.examzify.com>**

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

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