

Cardiac Vascular Nursing Certification Practice Exam (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 does the letter 'D' signify in pacemaker settings?**
 - A. Dual pacing and sensing**
 - B. Only atrium is paced**
 - C. Only ventricle is paced**
 - D. No response to intrinsic beats**

- 2. What defines stage 2 hypertension according to current guidelines?**
 - A. SBP greater than 140 mmHg or DBP greater than 90 mmHg**
 - B. SBP greater than 160 mmHg or DBP greater than 100 mmHg**
 - C. SBP greater than 140 mmHg and DBP greater than 80 mmHg**
 - D. SBP and DBP levels below 140/90 mmHg**

- 3. Which of the following virtues is NOT included in the five moral virtues for health professionals?**
 - A. Integrity**
 - B. Conscientiousness**
 - C. Jealousy**
 - D. Compassion**

- 4. What is the formula for calculating Mean Arterial Pressure (MAP)?**
 - A. Systolic + 2(diastolic)/ 3**
 - B. Diastolic + (Systolic/2)**
 - C. (Systolic + Diastolic) / 2**
 - D. Systolic - Diastolic**

- 5. What effect does decreased blood pressure against baroreceptors have on the sympathetic nervous system?**
 - A. It leads to increased vasodilation**
 - B. It causes the release of parasympathetic nervous system**
 - C. It results in sympathetic nervous system activation**
 - D. It decreases heart rate**

- 6. Which undesirable effect can occur in patients taking beta-blockers?**
- A. Corneal deposits**
 - B. Asthma exacerbation**
 - C. Severe constipation**
 - D. Angioedema**
- 7. What is a common symptom of intermittent claudication?**
- A. Severe headache**
 - B. Leg pain with activity**
 - C. Chest tightness**
 - D. Shortness of breath**
- 8. Which dietary component is emphasized in the DASH diet for hypertension management?**
- A. High protein intake**
 - B. Low saturated fat intake**
 - C. Increased sodium intake**
 - D. High carbohydrate intake**
- 9. What distinguishes restrictive cardiomyopathy from other types?**
- A. The presence of myocardial infarction**
 - B. Patient experiences a significantly dilated heart**
 - C. The heart size is normal but muscles cannot stretch**
 - D. Increased wall thickness without systolic dysfunction**
- 10. What patient assessment techniques are included in a cardiovascular examination?**
- A. Inspection and auscultation only**
 - B. Palpation, percussion, and auscultation only**
 - C. Inspection, palpation, percussion, and auscultation**
 - D. Inspection, auscultation, and lab tests**

Answers

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

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Explanations

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1. What does the letter 'D' signify in pacemaker settings?

- A. Dual pacing and sensing**
- B. Only atrium is paced
- C. Only ventricle is paced
- D. No response to intrinsic beats

In pacemaker settings, the letter 'D' signifies "Dual," indicating that both pacing and sensing are occurring in both the atria and the ventricles. This setting is used when there is a need to stimulate the heart in both chambers, ensuring coordinated contractions and improving overall cardiac output. By using dual pacing and sensing, the pacemaker monitors the heart's intrinsic activity in both the atrial and ventricular chambers, allowing it to adjust the pacing accordingly. This is particularly important in conditions where the heart's electrical signaling is impaired, such as in certain types of heart block or atrial fibrillation. In contrast, the other options represent more specific pacing settings. For example, pacing only the atrium would limit the pacemaker's functionality to managing atrial contractions without addressing ventricular action. Similarly, pacing only the ventricle would not accommodate issues arising in the atria. Lastly, the scenario where there is "no response to intrinsic beats" does not pertain to the context of "D" in the pacemaker settings, as it does not reflect dual function but rather a disregard for the heart's existing electrical activity. Therefore, recognizing 'D' as representing dual pacing and sensing is crucial for understanding how pacemakers support comprehensive cardiac function.

2. What defines stage 2 hypertension according to current guidelines?

- A. SBP greater than 140 mmHg or DBP greater than 90 mmHg
- B. SBP greater than 160 mmHg or DBP greater than 100 mmHg**
- C. SBP greater than 140 mmHg and DBP greater than 80 mmHg
- D. SBP and DBP levels below 140/90 mmHg

Stage 2 hypertension is characterized by more severe elevations in blood pressure compared to Stage 1. According to current guidelines from organizations such as the American College of Cardiology and the American Heart Association, Stage 2 hypertension is defined by a systolic blood pressure (SBP) greater than 160 mmHg or a diastolic blood pressure (DBP) greater than 100 mmHg. This reflects a higher risk for cardiovascular events and typically signifies a need for more aggressive management and intervention. The other definitions do not meet the criteria established for Stage 2 hypertension. A definition that includes an SBP greater than 140 mmHg or DBP greater than 90 mmHg indicates Stage 1 hypertension, where the thresholds are lower. The option detailing SBP greater than 140 mmHg and DBP greater than 80 mmHg also reflects more mild hypertension, falling under Stage 1. Finally, the option that suggests SBP and DBP levels below 140/90 mmHg does not align with any hypertension stage, as it indicates normal blood pressure values. Thus, the answer accurately identifies the criterion for Stage 2 hypertension as per the latest clinical guidelines.

3. Which of the following virtues is NOT included in the five moral virtues for health professionals?

- A. Integrity**
- B. Conscientiousness**
- C. Jealousy**
- D. Compassion**

The correct response is C, as jealousy is not recognized as a virtue within the five moral virtues for health professionals. The five virtues typically regarded in the healthcare profession include integrity, conscientiousness, compassion, and often others such as humility and respect. Integrity promotes honesty and accountability, essential for building trust between health professionals and patients. Conscientiousness reflects the dedication to fulfilling one's responsibilities and duties with attention and care, which is necessary for patient safety and effective care. Compassion highlights the importance of empathy and the ability to understand and effectively respond to the emotional needs of patients. Jealousy, however, does not fit within this framework of moral virtues. It is generally recognized as a negative emotion that can disrupt professional relationships and compromise the patient-caregiver dynamic. Therefore, it is excluded from the ethical principles that guide health professionals in their practice.

4. What is the formula for calculating Mean Arterial Pressure (MAP)?

- A. Systolic + 2(diastolic)/ 3**
- B. Diastolic + (Systolic/2)**
- C. (Systolic + Diastolic) / 2**
- D. Systolic - Diastolic**

The formula for calculating Mean Arterial Pressure (MAP) is critical in assessing overall blood flow to organs and tissues. The correct calculation is derived from the understanding that MAP represents the average pressure in a person's arteries during one cardiac cycle. The formula involves taking the diastolic blood pressure and adding one-third of the difference between the systolic and diastolic pressures. This is represented mathematically as: $MAP = Diastolic + \frac{1}{3}(Systolic - Diastolic)$. When this is simplified, it can be expressed in a form that looks similar to option A, particularly when rearranging terms. The significance of this formula is rooted in the fact that the heart spends more time in diastole (the relaxation phase) than in systole (the contraction phase). Thus, the weighted average correctly reflects the blood pressure profile over the whole cycle, accounting for the longer duration of diastole. Other options do not reflect the proper understanding of cardiovascular dynamics or do not consider how diastolic and systolic pressures relate in terms of time and physiological relevance.

5. What effect does decreased blood pressure against baroreceptors have on the sympathetic nervous system?

- A. It leads to increased vasodilation**
- B. It causes the release of parasympathetic nervous system**
- C. It results in sympathetic nervous system activation**
- D. It decreases heart rate**

Decreased blood pressure against baroreceptors triggers a reflex response in the body. Baroreceptors, which are sensitive to changes in blood pressure, are located in the carotid sinus and aortic arch. When blood pressure drops, these receptors detect the change and send fewer signals to the central nervous system regarding the decreased pressure. In response, the central nervous system stimulates the sympathetic nervous system. This activation has several physiological effects designed to restore blood pressure to normal levels. Firstly, it increases heart rate and the force of cardiac contractions, leading to greater cardiac output. Additionally, it causes vasoconstriction of peripheral blood vessels, which increases systemic vascular resistance and helps to elevate blood pressure. This coordinated response effectively mobilizes the body's resources to counteract the drop in blood pressure, aiming to restore hemodynamic stability. Understanding this mechanism is crucial for recognizing how the body responds to changes in blood pressure and the important role that the sympathetic nervous system plays in maintaining cardiovascular health.

6. Which undesirable effect can occur in patients taking beta-blockers?

- A. Corneal deposits**
- B. Asthma exacerbation**
- C. Severe constipation**
- D. Angioedema**

Beta-blockers are commonly prescribed to manage various cardiovascular conditions, but they have the potential to cause respiratory complications, particularly in patients with a history of asthma or reactive airway diseases. The mechanism by which beta-blockers can exacerbate asthma involves their action on beta-2 adrenergic receptors, which are primarily found in the bronchial smooth muscle. By blocking these receptors, beta-blockers can cause bronchoconstriction, leading to difficulty in breathing and worsening asthma symptoms. In contrast, corneal deposits are more associated with certain medications like chloroquine and tamoxifen rather than beta-blockers. Severe constipation is not a typical side effect of beta-blockers, as they do not significantly affect gut motility. Angioedema, which involves swelling of the deeper layers of the skin, is more commonly associated with ACE inhibitors rather than beta-blockers. Thus, the potential for asthma exacerbation is a well-recognized, undesirable effect specifically associated with beta-blocker therapy.

7. What is a common symptom of intermittent claudication?

- A. Severe headache**
- B. Leg pain with activity**
- C. Chest tightness**
- D. Shortness of breath**

Intermittent claudication is commonly characterized by leg pain or cramping during physical activity, such as walking or exercise, which resolves with rest. This symptom is specifically due to insufficient blood flow to the muscles, often as a result of peripheral artery disease. When a person exercises, their muscles require more oxygen, but if there are blockages in the arteries, this demand cannot be met, leading to pain. While other options might represent symptoms linked to different cardiovascular or respiratory conditions, they do not align with the hallmark signs of intermittent claudication. Severe headaches are generally associated with conditions affecting cerebral circulation, chest tightness is often related to cardiac issues such as angina, and shortness of breath typically indicates pulmonary problems or heart failure. Understanding the specific symptoms associated with conditions like intermittent claudication helps in accurate diagnosis and treatment plans.

8. Which dietary component is emphasized in the DASH diet for hypertension management?

- A. High protein intake**
- B. Low saturated fat intake**
- C. Increased sodium intake**
- D. High carbohydrate intake**

The DASH diet, which stands for Dietary Approaches to Stop Hypertension, emphasizes low saturated fat intake as a key component for managing hypertension. This diet encourages the consumption of fruits, vegetables, whole grains, and lean protein sources while minimizing saturated fats and cholesterol. By reducing saturated fat intake, individuals can help lower blood cholesterol levels and improve overall cardiovascular health, making it an effective strategy for hypertension management. The focus on low saturated fat is grounded in the understanding that high intake of saturated fats can contribute to the development of cardiovascular disease and exacerbate hypertension. Therefore, choosing healthier fats, such as those found in fish, nuts, and olive oil, is recommended within the DASH framework. In contrast, the other options do not represent the foundational principles of the DASH diet. High protein intake, increased sodium intake, and high carbohydrate intake do not align with the goals of the DASH diet, which aims to promote heart health through balanced nutrient intake and reduced sodium consumption. This highlights the critical role that low saturated fat plays in both dietary management of hypertension and broader cardiovascular health.

9. What distinguishes restrictive cardiomyopathy from other types?

- A. The presence of myocardial infarction**
- B. Patient experiences a significantly dilated heart**
- C. The heart size is normal but muscles cannot stretch**
- D. Increased wall thickness without systolic dysfunction**

Restrictive cardiomyopathy is characterized by a normal heart size coupled with impaired diastolic filling due to the inability of the heart muscle to stretch. This leads to a situation where the ventricles are unable to accommodate the normal volume of blood filling them during diastole, resulting in elevated filling pressures. Unlike other cardiomyopathies, such as dilated cardiomyopathy, where the heart becomes enlarged and chambers are dilated, or hypertrophic cardiomyopathy, where wall thickness increases, restrictive cardiomyopathy maintains normal ventricular dimensions. The inability of the myocardial tissue to expand limits the heart's capacity to fill properly, which is a crucial clinical distinction in recognizing this form of cardiomyopathy. This understanding can influence the approach to treatment and management of patients presenting with this condition.

10. What patient assessment techniques are included in a cardiovascular examination?

- A. Inspection and auscultation only**
- B. Palpation, percussion, and auscultation only**
- C. Inspection, palpation, percussion, and auscultation**
- D. Inspection, auscultation, and lab tests**

The choice identifying inspection, palpation, percussion, and auscultation encompasses the complete set of assessment techniques typically employed during a cardiovascular examination. Each of these techniques plays a vital role in gathering comprehensive information about a patient's cardiovascular health. Inspection involves visually examining the patient for any signs of cardiovascular issues, such as cyanosis, edema, or abnormal pulsations. Palpation allows the nurse to feel for any abnormalities in the heartbeat or circulation, assess peripheral pulses, and detect temperature changes in extremities. Percussion, although less commonly used in cardiovascular assessments as compared to other systems, can still provide additional insights into size and density of underlying structures, such as the heart and lungs. Auscultation, a critical component, involves listening to the heart sounds to detect abnormalities such as murmurs, gallops, or rubs. The inclusion of all four techniques ensures a thorough evaluation, enabling the clinician to form a complete picture of the patient's cardiovascular condition. While the other answer choices limit the assessment to subsets of these techniques, they do not provide the comprehensive approach necessary for effective cardiovascular assessment. Hence, the answer that includes all four assessment techniques is the most accurate and appropriate.

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://cardiovascularnursing.examzify.com>

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