

CEA Nursing 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 is a common cause of nonpitting periorbital edema and thinned hair in a patient?**
 - A. Severe hypothyroidism.**
 - B. Grave's disease.**
 - C. Addison's disease.**
 - D. Alzheimer's.**
- 2. A patient states his scrotum feels enlarged. Which diagnosis is likely?**
 - A. Varicocele**
 - B. Meningocele**
 - C. Rectocele**
 - D. Hydrocele**
- 3. What is the most appropriate medication to prescribe for a patient suspected of having community-acquired pneumonia?**
 - A. Cephalexin**
 - B. Cefuroxime (Ceftin)**
 - C. Amoxicillin (Amoxil)**
 - D. Metronidazole**
- 4. Which symptom is typically not associated with hyperthyroid crisis?**
 - A. Increased heart rate.**
 - B. Loss of weight.**
 - C. Cold intolerance.**
 - D. Increased sweating.**
- 5. In which chamber(s) of the eye can the transparent mass of gelatinous material, associated with gas pneumopexy, be commonly found?**
 - A. Anterior only.**
 - B. Posterior only.**
 - C. Both but greater in the anterior chamber.**
 - D. None of the above; it's only seen as an abnormal finding with malignancy.**

- 6. What factor primarily determines the potency of a topical corticosteroid?**
- A. None of these are correct**
 - B. Duration of use (once, continuous, etc)**
 - C. Site of use (back, face, arms, etc)**
 - D. Vehicle of delivery (cream, lotion, elixir, etc)**
- 7. Which condition is indicated by the presence of floaters, flashes of light, and a curtain over the visual field?**
- A. Cataract.**
 - B. Acute angle closure glaucoma.**
 - C. Retinal detachment.**
 - D. Diabetic retinopathy.**
- 8. What is the recommended initial management approach for a patient with suspected heart failure?**
- A. Diuretics**
 - B. Beta-blockers**
 - C. ACE inhibitors**
 - D. Cardiac rehabilitation**
- 9. What is the best strategy for managing lip smacking and uncontrolled movements in a patient on haloperidol?**
- A. Continue with haloperidol (Haldol) as this is expected**
 - B. Switch to quetiapine (Seroquel)**
 - C. Increase the dose of haloperidol (Haldol) as these side effects are common at lower doses**
 - D. Switch to pimozide (Ozap)**
- 10. If a patient holds a familiar object in their hand to identify it, what test is being performed?**
- A. Monognometrics**
 - B. Graphesthesia**
 - C. Two Point Discrimination**
 - D. Stereognosis**

Answers

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

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Explanations

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1. What is a common cause of nonpitting periorbital edema and thinned hair in a patient?

A. Severe hypothyroidism.

B. Grave's disease.

C. Addison's disease.

D. Alzheimer's.

Severe hypothyroidism is commonly associated with nonpitting periorbital edema and thinned hair due to its impact on metabolism and fluid retention. In hypothyroidism, the thyroid hormone levels are low, which leads to a decreased metabolic rate and can result in various signs and symptoms. The nonpitting periorbital edema occurs because of the accumulation of glycosaminoglycans in the interstitial tissues, leading to a swelling effect around the eyes. This specific type of edema does not retain an indentation when pressure is applied, distinguishing it from pitting edema. Additionally, thinned hair is a consequence of the hormonal imbalance in severe hypothyroidism. The lack of thyroid hormones affects the hair growth cycle, leading to hair loss and changes in hair texture. These clinical manifestations are directly linked to the body's slowed metabolism and altered fluid dynamics due to inadequate thyroid hormone production, making severe hypothyroidism a well-recognized cause of these symptoms.

2. A patient states his scrotum feels enlarged. Which diagnosis is likely?

A. Varicocele

B. Meningocele

C. Rectocele

D. Hydrocele

The correct diagnosis for a patient reporting an enlarged scrotum is hydrocele. A hydrocele occurs when fluid accumulates in the scrotal sac, leading to swelling and the sensation of enlargement. This condition is typically characterized by a painless swelling, and it can result from various factors, including trauma or inflammation. While a varicocele, which involves the enlargement of veins in the scrotum (often described as a "bag of worms" sensation), can also cause scrotal swelling, it is more specifically associated with dilated veins rather than fluid accumulation. The other conditions mentioned, such as meningocele and rectocele, pertain to different anatomical areas and issues, and are not relevant to scrotal enlargement. Meningocele is a spinal condition, while rectocele is related to the rectum bulging into the vagina. Thus, hydrocele is the most appropriate diagnosis for the symptom of enlarged scrotum.

3. What is the most appropriate medication to prescribe for a patient suspected of having community-acquired pneumonia?

- A. Cephalexin**
- B. Cefuroxime (Ceftin)**
- C. Amoxicillin (Amoxil)**
- D. Metronidazole**

In cases of community-acquired pneumonia (CAP), the first-line treatment often includes antibiotics that are effective against common pathogens such as *Streptococcus pneumoniae*, which is the leading cause of pneumonia in adults. Amoxicillin is a broad-spectrum penicillin antibiotic that is highly effective against these pathogens and is therefore a preferred choice for uncomplicated CAP. Its ability to cover typical bacteria associated with pneumonia makes it an appropriate medication to start treatment, particularly for patients who have no significant comorbidities or recent antibiotic use. Other choices, while useful in different contexts, may not target the most common bacteria responsible for CAP as effectively. Cephalexin is more suitable for skin infections or urinary tract infections rather than pneumonia. Cefuroxime, although it has a broader spectrum, is often recommended for more complicated cases or when patients have specific risk factors. Metronidazole is primarily used for anaerobic infections or certain parasitic infections instead of typical bacterial pneumonia. Therefore, Amoxicillin stands out as the most directly effective treatment option for community-acquired pneumonia in a typical patient scenario.

4. Which symptom is typically not associated with hyperthyroid crisis?

- A. Increased heart rate.**
- B. Loss of weight.**
- C. Cold intolerance.**
- D. Increased sweating.**

Hyperthyroid crisis, also known as thyroid storm, is characterized by a significant increase in metabolic activity due to excessive levels of thyroid hormones. One of the hallmark symptoms of hyperthyroid crisis is an increased heart rate, which occurs as the heart works harder to meet the body's elevated demands for energy and oxygen. Additionally, individuals with this condition often experience weight loss, as the accelerated metabolic rate leads to burning more calories than the individual consumes. Increased sweating is also common, as the body attempts to dissipate excess heat generated by the heightened metabolic processes. Cold intolerance, on the other hand, is typically associated with hypothyroidism rather than hyperthyroidism. In hyperthyroid conditions, patients tend to experience heat intolerance, as their bodies are unable to effectively regulate temperature due to the high levels of circulating thyroid hormones. This discrepancy highlights why cold intolerance is not a symptom associated with hyperthyroid crisis. Recognizing the differences in symptoms is essential for the appropriate management and treatment of the various thyroid disorders.

5. In which chamber(s) of the eye can the transparent mass of gelatinous material, associated with gas pneumopexy, be commonly found?

A. Anterior only.

B. Posterior only.

C. Both but greater in the anterior chamber.

D. None of the above; it's only seen as an abnormal finding with malignancy.

The correct choice illustrates that the transparent mass of gelatinous material associated with gas pneumopexy can indeed be found in both chambers of the eye, though it is typically greater in the anterior chamber. Gas pneumopexy is often utilized in retinal surgeries for the treatment of retinal detachments. During this procedure, a gas bubble is introduced into the vitreous cavity, which can lead to the formation of a gelatinous mass as the gas dissolves and interacts with the surrounding vitreous gel. This process impacts the anterior chamber, which is the space between the cornea and the iris, and it also affects the posterior chamber located behind the iris and in front of the lens. While it is not unusual to see similar gelatinous material in the posterior chamber, its presence is often more pronounced in the anterior chamber during the postoperative recovery period. This phenomenon emphasizes the dynamic interaction of the eye's compartments and how surgical interventions can lead to identifiable findings in both chambers. Understanding these anatomical locations and their relevance during procedures is crucial for interpreting postoperative outcomes and monitoring for complications.

6. What factor primarily determines the potency of a topical corticosteroid?

A. None of these are correct

B. Duration of use (once, continuous, etc)

C. Site of use (back, face, arms, etc)

D. Vehicle of delivery (cream, lotion, elixir, etc)

The potency of a topical corticosteroid is primarily determined by the vehicle of delivery. The formulation of the drug can significantly influence its absorption through the skin and, consequently, its effectiveness. Different vehicles such as creams, ointments, lotions, gels, and elixirs have varying characteristics that affect how much of the corticosteroid penetrates the skin barrier. For instance, ointments are typically more occlusive than creams or lotions, which can result in better drug absorption and enhanced potency, especially in inflamed or thickened skin. In contrast, lotions may be less potent due to their higher water content and faster evaporation, which can reduce the amount of medication available for absorption. Therefore, the choice of vehicle is crucial in determining the level of therapeutic effect achieved with a particular topical corticosteroid. While duration of use and site of application can impact the effectiveness and safety of topical corticosteroids in a broader sense, they do not primarily dictate the inherent potency of the corticosteroid itself. Instead, they may influence clinical outcomes or the potential for side effects when the corticosteroid is applied.

7. Which condition is indicated by the presence of floaters, flashes of light, and a curtain over the visual field?

- A. Cataract.**
- B. Acute angle closure glaucoma.**
- C. Retinal detachment.**
- D. Diabetic retinopathy.**

The presence of floaters, flashes of light, and a sensation of a curtain over the visual field strongly indicates retinal detachment. This condition arises when the retina separates from the underlying supportive tissue, leading to visual disturbances. Floaters are small specks or shapes that drift through the field of vision, resulting from changes in the vitreous gel in the eye. Flashes of light, or photopsia, occur when the retina is stimulated mechanically due to the traction or pulling that occurs with detachment. The feeling of a curtain descending over the vision is often described by patients experiencing this condition, as it can create a shadow effect in the visual field. Understanding these symptoms is critical for timely assessment and intervention, as retinal detachment can lead to permanent vision loss if not promptly treated. The other conditions listed have different presentations and associated symptoms that do not typically include the combination of floaters, flashes of light, and a curtain effect in vision, reinforcing the distinct nature of retinal detachment as the correct answer here.

8. What is the recommended initial management approach for a patient with suspected heart failure?

- A. Diuretics**
- B. Beta-blockers**
- C. ACE inhibitors**
- D. Cardiac rehabilitation**

The initial management of a patient with suspected heart failure often involves the use of diuretics. This approach is taken because one of the primary issues in heart failure is fluid overload due to the heart's decreased ability to pump effectively. Diuretics, such as furosemide, help to remove excess fluid from the body, thus alleviating symptoms such as edema, shortness of breath, and congestion. This reduction in fluid retention can lead to improved patient comfort and is critical for stabilizing the patient early in the treatment process. In contrast, while beta-blockers and ACE inhibitors are important for managing heart failure in the long term and improving overall outcomes, they are typically not the first interventions initiated in acute situations. These medications are valuable for their ability to improve heart function and reduce mortality over time but may take longer to exhibit their effects. Cardiac rehabilitation, on the other hand, involves structured exercise and education programs and is usually not initiated in the acute setting of suspected heart failure. It is more appropriate after stabilization has occurred and the patient is ready to engage in recovery and rehabilitation efforts. Therefore, the use of diuretics is the most immediate and relevant intervention for managing symptoms in the early stages of heart failure.

9. What is the best strategy for managing lip smacking and uncontrolled movements in a patient on haloperidol?

- A. Continue with haloperidol (Haldol) as this is expected**
- B. Switch to quetiapine (Seroquel)**
- C. Increase the dose of haloperidol (Haldol) as these side effects are common at lower doses**
- D. Switch to pimozide (Ozap)**

For a patient experiencing lip smacking and uncontrolled movements while on haloperidol, switching to quetiapine is the best strategy. These symptoms are indicative of tardive dyskinesia, a potential side effect of long-term use of first-generation antipsychotics like haloperidol. Quetiapine, an atypical antipsychotic, has a more favorable side effect profile, particularly in terms of movement disorders. By transitioning the patient to quetiapine, there is a lower risk of exacerbating movement disorders, as atypical antipsychotics generally have a reduced likelihood of causing such symptoms compared to first-generation agents. In managing such side effects, it's crucial to consider the adverse effects associated with ongoing therapy. Continuing with haloperidol would not be appropriate, as it could lead to further complications and does not address the current symptoms. Increasing the dose of haloperidol would likely worsen the movement symptoms instead of alleviating them. Switching to pimozide, another antipsychotic, might not provide the safety net against movement disorders that quetiapine offers. Each of these alternatives fails to adequately consider the long-term management of side effects associated with antipsychotic medications, whereas quetiapine presents

10. If a patient holds a familiar object in their hand to identify it, what test is being performed?

- A. Monognometrics**
- B. Graphesthesia**
- C. Two Point Discrimination**
- D. Stereognosis**

The test being described is stereognosis, which refers to the ability to identify objects through touch by recognizing their shape, size, texture, and other physical properties without relying on vision. When a patient holds a familiar object in their hand, they use their tactile senses and previous experiences to determine what the object is, showcasing their sensory integration and memory. This type of sensory testing is particularly significant in neurological assessments, as it can help in identifying conditions that may impair sensory processing. Stereognosis assesses not only the functional ability to perceive tactile stimuli but also the brain's capability to interpret those stimuli based on prior knowledge and familiarity with the objects. Other options describe different sensory tests. For example, graphesthesia assesses the ability to recognize letters or numbers written on the skin, two-point discrimination measures the distance at which a person can discern two discrete points on the skin, and monognometrics is not a standard term related to sensory assessment. Understanding these distinctions is essential for correctly identifying the type of sensory examination being conducted.

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://cea-nursingpractice.examzify.com>

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