

Certified Dialysis Nurse 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. Which condition is characterized by the presence of protein in urine?**
 - A. Diabetic nephropathy**
 - B. Proteinuria**
 - C. Acute kidney injury**
 - D. Nephrosclerosis**
- 2. What is the main goal of dialysis treatment?**
 - A. To cure kidney disease completely**
 - B. To maintain life and improve quality of life**
 - C. To eliminate the need for medication**
 - D. To increase kidney function**
- 3. What characterizes dialysis disequilibrium syndrome?**
 - A. Severe dehydration and electrolyte imbalance**
 - B. Headaches, nausea, and confusion from rapid changes in blood composition**
 - C. A sudden drop in blood pressure**
 - D. Infection at the dialysis access site**
- 4. What are potential consequences of missing a dialysis session?**
 - A. Improved kidney function**
 - B. Buildup of toxins and fluid overload**
 - C. Increased energy levels**
 - D. Reduction in medication side effects**
- 5. Which of the following is a form of continuous dialysis?**
 - A. Hemodialysis**
 - B. Intermittent peritoneal dialysis**
 - C. Continuous ambulatory peritoneal dialysis**
 - D. Plasmapheresis**

- 6. Why is proper priming of the dialyzer important before use?**
- A. It helps to ensure proper blood flow**
 - B. It removes air and ensures adequate flow of dialysate**
 - C. It allows for faster treatment times**
 - D. It reduces the cost of dialysis**
- 7. What complication can arise from infection during peritoneal dialysis?**
- A. Hemorrhage**
 - B. Peritonitis**
 - C. Electrolyte imbalance**
 - D. Hypotension**
- 8. Which dietary change can help improve kidney health in dialysis patients?**
- A. Increasing high-sugar foods**
 - B. Consuming high-phosphorus foods**
 - C. Following a renal diet plan**
 - D. Reducing fluid intake only**
- 9. How does blurred vision relate to nephrology?**
- A. It indicates high blood pressure**
 - B. It is a symptom of renal failure**
 - C. It reflects poor glucose control**
 - D. It is a sign of diabetic nephropathy**
- 10. Which of the following is NOT a vascular access option for dialysis?**
- A. Arteriovenous fistulas**
 - B. Arteriovenous grafts**
 - C. Peripheral catheters**
 - D. Central venous catheters**

Answers

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

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Explanations

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1. Which condition is characterized by the presence of protein in urine?

- A. Diabetic nephropathy**
- B. Proteinuria**
- C. Acute kidney injury**
- D. Nephrosclerosis**

The condition characterized by the presence of protein in urine is proteinuria. Proteinuria is a clinical term that specifically refers to the abnormal excretion of protein in the urine, which can occur due to various underlying health issues, including kidney disease, diabetes, high blood pressure, and other conditions. Identifying proteinuria is essential as it often signifies that the kidneys are not functioning properly. It can also be an early indicator of kidney disease, making it a crucial sign for further evaluation and management. Regular screening for protein in urine is a common practice in managing patients, especially those at risk for kidney dysfunction. In contrast, diabetic nephropathy, acute kidney injury, and nephrosclerosis may involve proteinuria as a symptom, but they do not define the condition itself as effectively as the term "proteinuria." These other conditions might be associated with the presence of protein in urine but focus on specific causes or types of kidney damage rather than the symptom alone. Thus, proteinuria succinctly indicates the abnormal presence of protein in the urine, making it the most precise answer.

2. What is the main goal of dialysis treatment?

- A. To cure kidney disease completely**
- B. To maintain life and improve quality of life**
- C. To eliminate the need for medication**
- D. To increase kidney function**

The main goal of dialysis treatment is to maintain life and improve quality of life. Dialysis serves as an essential intervention for patients with kidney failure, where the kidneys are unable to effectively filter waste products and excess fluids from the blood. By performing these functions artificially, dialysis helps to stabilize the patient's medical condition, prevent the accumulation of harmful substances in the body, and alleviate symptoms associated with kidney failure, such as fatigue, swelling, and electrolyte imbalances. While some treatments aim to cure kidney disease or restore kidney function, dialysis is a supportive treatment rather than a curative one. It allows patients to manage their condition and continue their daily activities, significantly enhancing their quality of life. Consequently, maintaining life — by preventing potentially fatal complications of kidney failure — and improving the overall quality of life are primary objectives of undergoing dialysis.

3. What characterizes dialysis disequilibrium syndrome?

- A. Severe dehydration and electrolyte imbalance
- B. Headaches, nausea, and confusion from rapid changes in blood composition**
- C. A sudden drop in blood pressure
- D. Infection at the dialysis access site

Dialysis disequilibrium syndrome is primarily characterized by headaches, nausea, and confusion, which occur as a result of rapid changes in blood composition during the dialysis process. This condition arises due to the swift removal of urea and other solutes from the blood, leading to an imbalance between the blood and brain fluid concentrations. When a patient undergoes dialysis, particularly during the initial sessions, the body may struggle to adjust to these fluctuations in solute levels, causing osmotic shifts that can affect brain function. This can lead to neurological symptoms such as headaches, nausea, and confusion. The speed of the dialysis treatment and the patient's pre-existing medical condition can further exacerbate these symptoms. The other options, while relating to dialysis or general medical conditions, do not accurately define dialysis disequilibrium syndrome. Severe dehydration and electrolyte imbalances may occur in dialysis patients but do not specifically characterize this syndrome. A sudden drop in blood pressure can happen during dialysis but is more associated with different phenomena, such as intradialytic hypotension. Lastly, infection at the dialysis access site is a separate and critical concern but is not indicative of the metabolic disturbances seen in dialysis disequilibrium syndrome.

4. What are potential consequences of missing a dialysis session?

- A. Improved kidney function
- B. Buildup of toxins and fluid overload**
- C. Increased energy levels
- D. Reduction in medication side effects

Missing a dialysis session can lead to a serious buildup of toxins and fluid overload in the body. During dialysis, waste products such as urea and creatinine are removed from the bloodstream, and excess fluid is also cleared to help maintain a proper balance in the body. When a session is skipped, these harmful substances accumulate, which can lead to symptoms such as nausea, fatigue, muscle cramps, and confusion. Additionally, fluid overload can cause complications like hypertension and heart failure, as the body struggles to manage the excess volume. Therefore, the consequences of not attending a dialysis session are significant and necessitate careful management to avoid potentially life-threatening situations.

5. Which of the following is a form of continuous dialysis?

- A. Hemodialysis**
- B. Intermittent peritoneal dialysis**
- C. Continuous ambulatory peritoneal dialysis**
- D. Plasmapheresis**

Continuous ambulatory peritoneal dialysis (CAPD) is considered a form of continuous dialysis because it involves the ongoing exchange of dialysate in the peritoneal cavity throughout the day. In this method, patients typically perform multiple exchanges of dialysate that allow the removal of waste products and excess fluid continuously, enabling more stable control of fluid and electrolyte balance. This method distinguishes itself by being patient-driven and not requiring a machine to operate continuously, allowing individuals greater flexibility in their daily lives while still ensuring that their dialysis treatment is happening on a continuous basis. This modality is particularly beneficial for those who need to maintain daily activities without being tethered to a machine. In contrast, hemodialysis, while effective, is generally performed in sessions lasting several hours, usually three times a week, therefore not continuous. Intermittent peritoneal dialysis differs from continuous methods as well as it isn't performed continuously throughout the day or week. Plasmapheresis is a separate therapeutic procedure and does not fall under the category of dialysis for the treatment of end-stage renal failure.

6. Why is proper priming of the dialyzer important before use?

- A. It helps to ensure proper blood flow**
- B. It removes air and ensures adequate flow of dialysate**
- C. It allows for faster treatment times**
- D. It reduces the cost of dialysis**

Proper priming of the dialyzer is essential primarily because it removes air that can create bubbles within the dialysis system, which can lead to complications such as air embolism. Additionally, priming ensures that there is an adequate flow of dialysate, which is crucial for effective solute removal and fluid management during dialysis. This process allows the dialyzer to function optimally by ensuring that the necessary exchanges of waste products, electrolytes, and fluid can occur efficiently once treatment begins. Priming with the appropriate dialysate fluid helps fill the dialyzer with the fluid that will be used during the treatment. This step ensures that the membranes are fully saturated and can effectively perform their filtration role. Proper priming ultimately leads to sharper clinical performance during dialysis, reducing the chance of complications and enhancing patient safety and comfort throughout the procedure.

7. What complication can arise from infection during peritoneal dialysis?

- A. Hemorrhage**
- B. Peritonitis**
- C. Electrolyte imbalance**
- D. Hypotension**

Peritonitis is a significant complication that can arise from infection during peritoneal dialysis. This condition occurs when the peritoneum, the membrane lining the abdominal cavity, becomes inflamed, usually due to bacteria or pathogens entering through the catheter used for dialysis. Patients undergoing peritoneal dialysis are particularly at risk for peritonitis because of the direct exposure of the peritoneal cavity to external environments during the process. Symptoms of peritonitis can include abdominal pain, fever, and cloudy dialysate fluid, which is indicative of infection. Immediate and effective management is essential, as untreated peritonitis can lead to severe complications, including sepsis and damage to the peritoneal lining, impairing the ability to perform future dialysis treatments. While other options like hemorrhage can occur in different contexts, and electrolyte imbalance or hypotension can be associated with dialysis in general, they are not directly results of an infection during the procedure. The clear connection between infection and the development of peritonitis makes it the most relevant and critical complication to consider in this scenario.

8. Which dietary change can help improve kidney health in dialysis patients?

- A. Increasing high-sugar foods**
- B. Consuming high-phosphorus foods**
- C. Following a renal diet plan**
- D. Reducing fluid intake only**

Following a renal diet plan is essential for improving kidney health in dialysis patients because it is specifically designed to manage the unique nutritional needs and restrictions associated with kidney disease. A renal diet typically limits certain nutrients like sodium, potassium, and phosphorus, which are critical because patients with kidney impairment may struggle to maintain proper levels of these electrolytes. This type of diet helps prevent the accumulation of waste products in the bloodstream, reduces the risk of cardiovascular disease, and addresses other complications associated with dialysis treatment. It often emphasizes the consumption of high-quality protein while controlling the overall protein intake to prevent stress on the kidneys. By adhering to a renal diet plan, patients can experience better overall health, improved energy levels, and enhanced quality of life, making it a vital aspect of their treatment regimen.

9. How does blurred vision relate to nephrology?

- A. It indicates high blood pressure
- B. It is a symptom of renal failure
- C. It reflects poor glucose control
- D. It is a sign of diabetic nephropathy**

Blurred vision can be closely linked to diabetic nephropathy due to the underlying pathophysiological changes that occur in patients with diabetes. Diabetic nephropathy is a common complication of diabetes that affects the kidneys and can lead to kidney damage and eventual renal failure. The connection between blurred vision and diabetic nephropathy primarily arises from the effects of prolonged high blood glucose levels on the microvascular system. High glucose levels can cause changes in the eye's blood vessels, leading to diabetic retinopathy, which manifests as blurred vision or other visual disturbances. Since diabetic nephropathy is part of the continuum of diabetic complications, blurred vision can serve as an indicator of the extent of disease in diabetic patients. Understanding this relationship is crucial for healthcare providers, as blurred vision may prompt a more comprehensive assessment of the patient's diabetes management, kidney health, and overall systemic involvement. By addressing the visual impairment early, healthcare professionals can implement timely interventions to prevent further complications.

10. Which of the following is NOT a vascular access option for dialysis?

- A. Arteriovenous fistulas
- B. Arteriovenous grafts
- C. Peripheral catheters**
- D. Central venous catheters

In the context of dialysis, vascular access is crucial for effectively performing the treatment. Arteriovenous fistulas and arteriovenous grafts are both established vascular access options for hemodialysis. An arteriovenous fistula is a direct connection between an artery and a vein, usually created surgically in the patient's arm to allow for adequate blood flow during dialysis. Arteriovenous grafts, on the other hand, involve a synthetic tube that connects an artery to a vein, providing an alternative when a patient has poor veins or other issues that prevent a successful fistula. Central venous catheters are also a recognized form of vascular access for dialysis, especially in urgent situations or when immediate access is required. They are inserted into a large vein, typically in the neck or chest, allowing for blood to be drawn and returned during treatment. Peripheral catheters, however, are not a standard vascular access method for long-term dialysis. These catheters are typically used for short-term access and are inserted into small veins, which may not provide the adequate blood flow needed for dialysis over an extended period. Thus, while peripheral catheters can be utilized for temporary dialysis access, they do not serve as a reliable long-term

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://certifieddialysisnurse.examzify.com>

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