

Certified Nephrology Nurse Certification (CNN) Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

This is a sample study guide. To access the full version with hundreds of 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. Don't worry about getting everything right, 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, and take breaks to retain information better.

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.

7. Use Other Tools

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!

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Questions

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- 1. What is a common risk factor for developing kidney stones?**
 - A. Dehydration leading to concentrated urine**
 - B. High intake of caffeine**
 - C. Excessive exercise**
 - D. Low protein diet**

- 2. What is the basic unit of the kidney responsible for filtering blood?**
 - A. Glomerulus**
 - B. Nephron**
 - C. Collecting duct**
 - D. Renal pelvis**

- 3. What is the primary role of dialysis in the management of chronic kidney disease?**
 - A. It assists in kidney transplant procedures**
 - B. It helps to enhance kidney function**
 - C. It helps to remove waste products and excess fluid from the body**
 - D. It prevents all forms of kidney disease**

- 4. What is the initial treatment goal for acute kidney injury?**
 - A. Reduce Protein Intake**
 - B. Restore Renal Perfusion and Function**
 - C. Decrease Blood Pressure**
 - D. Initiate Dialysis**

- 5. Why is proteinuria significant in nephrology?**
 - A. It indicates kidney infection**
 - B. It is a marker of kidney disease progression**
 - C. It shows normal kidney function**
 - D. It reflects hydration status**

6. Which immunosuppressive agent is commonly used in kidney transplant patients?

- A. Cyclosporine**
- B. Sirolimus**
- C. Tacrolimus**
- D. Azathioprine**

7. What is nephrotoxic injury?

- A. Damage to the kidneys caused by drugs or other substances**
- B. Infection of the kidneys leading to inflammation**
- C. Reversible kidney function impairment due to dehydration**
- D. Structural abnormalities in the kidney's anatomy**

8. What condition is often checked for when a patient presents with hematuria?

- A. Polycystic Kidney Disease**
- B. Nephritic Syndrome**
- C. Chronic Kidney Disease**
- D. Gestational Hypertension**

9. What is one of the five models of symptom management?

- A. The Symptom Self-Care Response Model**
- B. The Symptom Evaluation Model**
- C. The Symptom Prevention Model**
- D. The Symptom Activation Model**

10. Which of the following best describes the role of hyperimmune gamma globulin?

- A. Enhances renal function**
- B. Provides passive immunity against infections**
- C. Aids in protein loss in kidney diseases**
- D. Regulates blood cell production**

Answers

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

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Explanations

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1. What is a common risk factor for developing kidney stones?

- A. Dehydration leading to concentrated urine**
- B. High intake of caffeine**
- C. Excessive exercise**
- D. Low protein diet**

Dehydration leading to concentrated urine is a well-documented risk factor for developing kidney stones. When the body is dehydrated, the urine becomes more concentrated, meaning there is less fluid to dilute the waste products and minerals present in the urine. This concentration can lead to the formation of crystals, which can grow and develop into kidney stones. Having a sufficient intake of fluids is essential in preventing stone formation, as it helps to keep urine dilute, reducing the likelihood of mineral deposits crystallizing. Concentrated urine can result from various factors, including inadequate fluid intake, excessive sweating, or certain medical conditions that affect fluid balance. In contrast, high intake of caffeine, excessive exercise, and a low protein diet do not have the same direct impact on stone formation compared to the effects of hydration on urine concentration. While these factors may have some influence on overall kidney health or other conditions, they are not considered primary risk factors for the development of kidney stones in the same way that dehydration is.

2. What is the basic unit of the kidney responsible for filtering blood?

- A. Glomerulus**
- B. Nephron**
- C. Collecting duct**
- D. Renal pelvis**

The nephron is indeed the fundamental structural and functional unit of the kidney responsible for filtering blood. Each kidney contains approximately one million nephrons, which perform the critical functions of filtration, reabsorption, and secretion. Within the nephron, the glomerulus plays a key role by filtering blood under pressure, but it is just one component of the nephron. The filtered fluid then passes through various segments of the nephron, including the proximal tubule, loop of Henle, distal convoluted tubule, and finally the collecting duct, where further adjustments occur before the urine is formed. The collecting duct is involved in the final concentration of urine but is not involved in the initial filtration process. The renal pelvis serves as a funnel for urine as it exits the kidney to enter the ureter, but it does not play a role in filtration.

Understanding the nephron's overall role in kidney function is essential for comprehending how the kidneys maintain homeostasis in the body, deal with waste elimination, and manage fluid and electrolyte balance. Therefore, identifying the nephron as the basic unit responsible for filtering blood sets the foundation for further learning in nephrology.

3. What is the primary role of dialysis in the management of chronic kidney disease?

- A. It assists in kidney transplant procedures
- B. It helps to enhance kidney function
- C. It helps to remove waste products and excess fluid from the body**
- D. It prevents all forms of kidney disease

The primary role of dialysis in the management of chronic kidney disease is to remove waste products and excess fluid from the body. As chronic kidney disease progresses, the kidneys become less effective at filtering out toxins, electrolytes, and waste products from the blood. Dialysis serves as an artificial replacement for kidney function, ensuring that these harmful substances do not accumulate to dangerous levels in the body. This treatment is essential for patients who are facing renal failure as it helps to maintain electrolyte balance, correct acidosis, and manage fluid overload. By performing these functions, dialysis plays a crucial role in improving the overall quality of life for individuals with chronic kidney disease, allowing them to live longer and healthier lives even in the absence of effective kidney function.

4. What is the initial treatment goal for acute kidney injury?

- A. Reduce Protein Intake
- B. Restore Renal Perfusion and Function**
- C. Decrease Blood Pressure
- D. Initiate Dialysis

The initial treatment goal for acute kidney injury centers around restoring renal perfusion and function. In acute kidney injury (AKI), the kidneys may not be functioning adequately due to various factors such as decreased blood flow, blockage, or injury. Therefore, the primary focus must be on addressing the underlying cause of the injury and improving blood flow to the kidneys. This can involve fluid resuscitation and correcting any hemodynamic issues, which are vital to enabling the kidneys to recover their normal function. Restoring renal perfusion helps in promoting the kidneys' ability to filter waste from the bloodstream effectively and can prevent further damage or complications from occurring. If renal function is successfully restored, patients often recover without the need for more invasive treatments. Other choices, while relevant to kidney health and management, do not address the immediate priority of restoring blood flow and kidney function. For instance, reducing protein intake may be necessary in the context of chronic kidney disease but is not an initial treatment for AKI. Decreasing blood pressure can be important if hypertension contributes to the AKI, but it isn't a primary target. Initiating dialysis becomes necessary only if there is a failure to recover renal function or in cases of severe AKI with complications, but it is not the first step

5. Why is proteinuria significant in nephrology?

- A. It indicates kidney infection
- B. It is a marker of kidney disease progression**
- C. It shows normal kidney function
- D. It reflects hydration status

Proteinuria is significant in nephrology primarily because it serves as an important marker of kidney disease progression. When the kidneys are functioning properly, there is usually a very low level of protein in the urine, as the glomeruli (the filtering units of the kidneys) protect against the loss of plasma proteins. However, when there is damage to the glomeruli, proteins, particularly albumin, may leak into the urine, resulting in proteinuria. The presence and amount of protein in the urine can indicate the degree of kidney damage and may be used to monitor the progression of kidney diseases such as diabetic nephropathy or glomerulonephritis. Increased levels of proteinuria often signal worsening renal function and may prompt further diagnostic evaluation and treatment to prevent or slow down the progression to end-stage kidney disease. While it might be tempting to associate proteinuria with conditions like infections or dehydration, these interpretations do not reflect the broader implications of protein loss for kidney health and disease monitoring. The significant correlation between proteinuria and kidney disease progression makes option B the clear focus in nephrology assessments.

6. Which immunosuppressive agent is commonly used in kidney transplant patients?

- A. Cyclosporine
- B. Sirolimus
- C. Tacrolimus**
- D. Azathioprine

Tacrolimus is a cornerstone immunosuppressive agent frequently utilized in kidney transplant patients due to its potent efficacy in preventing organ rejection. It functions by inhibiting T-lymphocyte activation and proliferation, which are critical processes in the immune response that could lead to the rejection of the transplanted kidney.

Tacrolimus is typically prescribed as part of a combination therapy alongside corticosteroids and other immunosuppressants, creating a robust regimen designed to minimize the risks of both acute and chronic rejection. Its use has been associated with improved graft survival rates when compared to some older agents. While cyclosporine is another immunosuppressant commonly used in transplant settings, tacrolimus has largely become the preferred choice because it has a more favorable pharmacokinetic profile, which allows for less frequent dosing and better management of drug levels in patients. Sirolimus and azathioprine also play roles in immunosuppression; however, they are used in different contexts or as adjuncts in some cases. Sirolimus, for example, is used for its ability to inhibit cell division and has nephroprotective properties but can lead to different side effects and complications when used solely for kidney transplant patients. Azathioprine is an older

7. What is nephrotoxic injury?

- A. Damage to the kidneys caused by drugs or other substances**
- B. Infection of the kidneys leading to inflammation**
- C. Reversible kidney function impairment due to dehydration**
- D. Structural abnormalities in the kidney's anatomy**

Nephrotoxic injury refers specifically to the damage to the kidneys resulting from exposure to harmful substances, such as certain medications, toxins, or infections that affect kidney function. This type of injury can lead to acute kidney injury (AKI) as the nephrotoxins impair the kidney's ability to filter waste products from the blood effectively. Understanding nephrotoxicity is crucial for healthcare professionals, as it highlights the importance of monitoring kidney function in patients receiving potentially harmful medications, especially those known for their nephrotoxic effects. Early identification and management of nephrotoxicity can help prevent irreversible damage and improve patient outcomes. The other choices do not accurately define nephrotoxic injury. For example, infections that lead to inflammation are categorized as pyelonephritis, while reversible kidney function impairment due to dehydration is not linked to direct damage from substances. Structural abnormalities in kidney anatomy would pertain to congenital or acquired structural issues but do not specifically address the toxic effects of nephrotoxins on kidney tissues.

8. What condition is often checked for when a patient presents with hematuria?

- A. Polycystic Kidney Disease**
- B. Nephritic Syndrome**
- C. Chronic Kidney Disease**
- D. Gestational Hypertension**

Hematuria, the presence of blood in the urine, often prompts healthcare providers to investigate for nephritic syndrome. This condition is characterized by the presence of hematuria along with other key features such as proteinuria, hypertension, and edema. Nephritic syndrome indicates underlying inflammation in the glomeruli, which can result from various causes, including glomerulonephritis. In patients exhibiting hematuria, identifying nephritic syndrome is critical as it can indicate significant renal pathology that may require urgent management. An accurate diagnosis can lead to further investigations such as serological tests, urinalysis, and kidney biopsy if necessary, to determine the underlying etiology and initiate appropriate treatment. While polycystic kidney disease, chronic kidney disease, and gestational hypertension can also be associated with urinary symptoms, they do not present with hematuria as a hallmark feature in the same way nephritic syndrome does. Therefore, the direct link between hematuria and nephritic syndrome establishes it as a common condition that is thoroughly evaluated in patients presenting with hematuria.

9. What is one of the five models of symptom management?

- A. The Symptom Self-Care Response Model**
- B. The Symptom Evaluation Model**
- C. The Symptom Prevention Model**
- D. The Symptom Activation Model**

The Symptom Self-Care Response Model is one of the five models of symptom management, emphasizing the active role that patients can take in managing their symptoms. This model focuses on equipping patients with the knowledge, skills, and strategies necessary to recognize their symptoms and respond effectively. It encourages self-monitoring and individualized symptom management plans, allowing for a tailored approach to care that can lead to improved health outcomes. By fostering a sense of agency in patients, this model helps them to engage more fully in their care, which can enhance their overall well-being and quality of life. In contrast, options that focus on evaluation, prevention, or activation might not directly highlight the self-management aspect, which is central to the chosen model. Those other models may play a role in the broader context of symptom management but the emphasis on self-care uniquely positions the Symptom Self-Care Response Model as particularly relevant in empowering patients in managing their health.

10. Which of the following best describes the role of hyperimmune gamma globulin?

- A. Enhances renal function**
- B. Provides passive immunity against infections**
- C. Aids in protein loss in kidney diseases**
- D. Regulates blood cell production**

The role of hyperimmune gamma globulin is best described as providing passive immunity against infections. This immunoglobulin preparation is derived from the pooled serum of individuals who have been vaccinated or exposed to specific pathogens, leading to the production of high levels of antibodies against those pathogens. When administered, it offers immediate protection by supplying the recipient with ready-made antibodies, which can help fend off infections, particularly in individuals who may have compromised immune systems due to medical conditions, including some kidney diseases. Passive immunity is particularly critical in patients who might be at a higher risk of infections, such as those undergoing dialysis or those with weakened immune responses. While enhancing renal function, aiding in protein loss, and regulating blood cell production are relevant areas in nephrology, they do not accurately reflect the primary function of hyperimmune gamma globulin. Its main purpose revolves around the immediate immune support it provides rather than direct impacts on renal functionality or other systemic regulatory processes.

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://cnn.examzify.com>

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

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