

CERTIFIED SPECIALIST IN GERIATRIC NUTRITION PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR
THE FULL VERSION STUDY GUIDE

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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. Which nutrition-related factor can contribute to pressure ulcers?**
 - A. Protein deficiency
 - B. Vitamin D sufficiency
 - C. Adequate Hydration
 - D. Regular Exercise
- 2. Which of the following is a consequence of malnutrition?**
 - A. Accelerated healing
 - B. Delayed recovery from illness/pressure injuries/wounds
 - C. Decreased hospital admissions
 - D. Reduced treatment costs
- 3. What is the minimum percentage of energy that should come from IV fat emulsion in PN?**
 - A. 5%
 - B. 10%
 - C. 15%
 - D. 20%
- 4. What best describes the relationship between Quality Measure Reports and the QIM report?**
 - A. Quality Measure Reports identify indicators from the QIM that signal potential problems.
 - B. QIM summarize data from Quality Measure Reports.
 - C. Quality Measure Reports and QIM are unrelated.
 - D. Quality Measure Reports correct issues found by QIM.
- 5. Caffeine should be avoided when taking which kinds of medications?**
 - A. Antibiotics, beta-blockers, GERD meds, bronchodilators
 - B. Anticoagulants only
 - C. Antidepressants only
 - D. Antihypertensives only

- 6. In weight assessment for MDS, when should the resident be weighed again?**
- A. If last weight was more than 30 days ago or not available
 - B. If last weight was recorded within 7 days
 - C. If resident requests
 - D. If weight is within normal range
- 7. Under the ACA, what outcome is observed for older adults in terms hospital readmissions?**
- A. Reduced readmissions
 - B. Increased readmissions
 - C. No change
 - D. Longer hospital stays
- 8. Which of the following foods can be stored indefinitely in disaster emergency menu planning?**
- A. Wheat
 - B. Fresh milk
 - C. Fresh apples
 - D. Frozen chicken
- 9. Which of the following is a risk factor for pressure ulcers related to level of consciousness?**
- A. Altered level of consciousness
 - B. Dehydration
 - C. Adequate Protein Intake
 - D. Regular Ambulation
- 10. Which statement best describes the elements required in the comprehensive care plan for the RD according to OBRA CFR?**
- A. Problem; resident strengths; realistic/measurable goals and times of completion with designated party responsible; interventions with party responsible; implementation; evaluation/re-evaluation; discharge plan
 - B. Problem and interventions only
 - C. Discharge plan and evaluation only
 - D. Resident strengths and goals only

Answers

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

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Explanations

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1. Which nutrition-related factor can contribute to pressure ulcers?

- A. Protein deficiency**
- B. Vitamin D sufficiency
- C. Adequate Hydration
- D. Regular Exercise

Protein intake provides the building blocks for tissue repair and skin integrity. When protein is deficient, the body's ability to synthesize collagen, create new tissue, and support immune function is impaired, delaying wound healing and weakening the skin's resilience under pressure. This makes older adults especially susceptible to developing pressure ulcers and to slower healing once ulcers form. While hydration, mobility, and overall energy status influence ulcer risk, the nutrition-related factor most directly tied to both the development and healing of pressure ulcers is insufficient protein. Ensuring adequate high-quality protein intake supports wound repair processes and helps maintain skin integrity, reducing ulcer risk and promoting recovery.

2. Which of the following is a consequence of malnutrition?

- A. Accelerated healing
- B. Delayed recovery from illness/pressure injuries/wounds**
- C. Decreased hospital admissions
- D. Reduced treatment costs

Malnutrition undermines the body's ability to repair tissue and fight infection, so recovery from illness, pressure injuries, and wounds is slowed. When intake of protein and energy is insufficient, as well as essential micronutrients, collagen synthesis and tissue regeneration falter, muscle mass declines, and immune defenses weaken. This combination leads to delayed wound healing, higher risk of infection, and longer recovery periods, which is why delayed recovery is the expected consequence. Accelerated healing would require adequate nutrition, not malnutrition, and malnutrition typically worsens outcomes rather than reducing hospital stays or treatment costs.

3. What is the minimum percentage of energy that should come from IV fat emulsion in PN?

- A. 5%
- B. 10%**
- C. 15%
- D. 20%

Providing fat calories in parenteral nutrition is essential not only for energy but to supply essential fatty acids required by the body's cells and inflammatory systems. If the fat portion falls below a certain level, essential fatty acid deficiency can develop, with symptoms such as dry/scaling skin, poor wound healing, hair changes, and liver-related issues. To prevent this, guidelines specify that at least about 10% of total energy should come from IV fat emulsion. While many clinicians also target higher fat energy (often around 20–30%) to meet overall fatty acid needs and to reduce the carbohydrate load, 10% is the minimum necessary to avoid deficiency.

4. What best describes the relationship between Quality Measure Reports and the QIM report?

- A. Quality Measure Reports identify indicators from the QIM that signal potential problems.**
- B. QIM summarize data from Quality Measure Reports.
- C. Quality Measure Reports and QIM are unrelated.
- D. Quality Measure Reports correct issues found by QIM.

Quality measure reports rely on indicators defined in the QIM report to monitor performance. The QIM specifies which quality indicators to track and how to interpret them, and the quality measure reports apply those indicators to current data to reveal signals that point to potential problems. In short, the QIM provides the metrics, and the quality measure reports surface the data-driven signals that indicate where improvement may be needed. The other options don't fit because the QIM isn't simply summarized by the reports, they aren't unrelated, and the reports don't themselves fix issues—they identify signals that prompt action.

5. Caffeine should be avoided when taking which kinds of medications?

- A. Antibiotics, beta-blockers, GERD meds, bronchodilators**
- B. Anticoagulants only
- C. Antidepressants only
- D. Antihypertensives only

The main idea is that caffeine can interact with certain medicines by either slowing its own breakdown, increasing its effects, or counteracting a drug's action. Caffeine is mainly broken down by the liver enzyme CYP1A2, and when other drugs affect that enzyme or share a similar stimulant pathway, problems can arise. With antibiotics, particularly some fluoroquinolones and macrolides, the metabolism of caffeine can be inhibited. That means caffeine stays in the body longer and can cause stronger stimulant effects—things like jitteriness, anxiety, rapid heartbeat, or sleep disturbances become more likely. Beta-blockers lower heart rate and blood pressure; caffeine can push the heart rate up and may lessen the therapeutic effect of these medicines, leading to less control of blood pressure or heart rate. Bronchodilators include methylxanthines like theophylline, and caffeine shares a similar action. Using them together can produce additive stimulation—more tremor, restlessness, insomnia, tachycardia, or even more serious cardiovascular effects—so avoiding caffeine helps keep the bronchodilator therapy effective and safer. For GERD, caffeine can worsen reflux symptoms by relaxing the lower esophageal sphincter and increasing acid exposure, which can undermine symptom control even when GERD medications are being used. So, caffeine should be avoided or limited with these kinds of medications because of the real risk of heightened side effects or reduced therapeutic benefit.

6. In weight assessment for MDS, when should the resident be weighed again?

- A. If last weight was more than 30 days ago or not available**
- B. If last weight was recorded within 7 days
- C. If resident requests
- D. If weight is within normal range

Regular, timely weight data are essential in MDS to monitor for weight loss and malnutrition risk. The guideline is to obtain a resident's weight at least every 30 days or whenever there is no recent weight on file. If the last weight was recorded more than 30 days ago or there is no weight in the record, a new measurement should be taken. This ensures the nutrition assessment reflects current status and supports detecting meaningful changes promptly. Weighing within a week or only on resident request isn't the standard trigger, and a normal weight doesn't remove the need for ongoing monitoring, since weight can change with illness, medications, or fluid shifts.

7. Under the ACA, what outcome is observed for older adults in terms hospital readmissions?

- A. Reduced readmissions**
- B. Increased readmissions
- C. No change
- D. Longer hospital stays

The policy change tied hospital payments to 30-day readmission rates for Medicare patients, especially older adults, through the Hospital Readmissions Reduction Program. This created a strong incentive for hospitals to improve discharge planning, ensure timely follow-up, optimize medications at transition, and coordinate post-acute care. As a result, readmission rates among older adults were reduced, particularly for the conditions targeted by the program. While the degree of reduction varied by condition and setting, the overall trend shows fewer readmissions due to the ACA's incentives.

8. Which of the following foods can be stored indefinitely in disaster emergency menu planning?

- A. Wheat**
- B. Fresh milk
- C. Fresh apples
- D. Frozen chicken

Storing foods for emergencies hinges on choosing items that stay safe and usable with minimal spoilage. Dried wheat is the best example because, when kept dry, sealed, and protected from pests and heat, its low moisture environment makes microbial growth unlikely and preserves it for extremely long periods. Fresh milk requires constant refrigeration or processing and spoils quickly; fresh apples, though durable, still have a finite shelf life as they respire and degrade over time; frozen chicken can be kept for months but not indefinitely, as quality and safety decline with prolonged storage and freezer conditions. So, the grain option is the one that can be stored the longest in disaster planning.

9. Which of the following is a risk factor for pressure ulcers related to level of consciousness?

A. Altered level of consciousness

B. Dehydration

C. Adequate Protein Intake

D. Regular Ambulation

An altered level of consciousness is a key risk factor because awareness and the ability to respond to pressure are essential in preventing ulcers. When someone is sedated, disoriented, or unconscious, they often cannot sense when a position is causing pressure and cannot effectively reposition themselves. This leads to prolonged pressure on areas over bony prominences, reducing blood flow to the tissue and causing tissue ischemia and eventual ulcer formation. Other choices relate to different pathways: dehydration can affect skin health and perfusion but isn't about consciousness; adequate protein supports tissue repair and integrity but doesn't reflect a loss of awareness; regular ambulation reduces risk by promoting movement. The factor tied to level of consciousness is the altered state of awareness itself.

10. Which statement best describes the elements required in the comprehensive care plan for the RD according to OBRA CFR?

A. Problem; resident strengths; realistic/measurable goals and times of completion with designated party responsible; interventions with party responsible; implementation; evaluation/re-evaluation; discharge plan

B. Problem and interventions only

C. Discharge plan and evaluation only

D. Resident strengths and goals only

The main idea is that OBRA CFR requires a comprehensive, individualized care plan that covers more than just listing problems. The plan should start from the assessment and include the resident's problems as well as their strengths to guide care and support motivation. It must establish realistic, measurable goals with clear completion times and designate who is responsible for each goal. For every goal, there should be specific interventions and the party responsible for carrying them out. The plan then needs to be implemented and continuously evaluated or re-evaluated to track progress and make revisions as needed. Finally, a discharge plan is included to ensure a smooth transition after leaving the facility. This combination keeps care targeted, accountable, and coordinated across all staff and stages of care. Options that cover only problems and interventions lack goals, timelines, evaluation, or discharge planning, while others that focus only on discharge or only on strengths and goals omit essential elements of action, accountability, and ongoing assessment.

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://geriatricnutritionspecialist.examzify.com>

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

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