

# Fundamentals of Nursing CA Practice Test (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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**SAMPLE**

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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**

- 1. What action is not part of the six rights of drug administration when giving morphine?**
  - A. Documenting the reason the medication was given in the patient's electronic medical record**
  - B. Consulting a drug manual to determine whether the amount the prescriber ordered is appropriate**
  - C. Checking the medication administration record to see when the last dose was administered**
  - D. Assessing the patient's pain level 15 to 30 minutes after giving the medication**
  
- 2. What is a common chronic disease affecting the elderly population?**
  - A. Diabetes**
  - B. Hypertension**
  - C. Arthritis**
  - D. Alzheimer's disease**
  
- 3. What does eplerenone specifically bind to?**
  - A. Renin receptors**
  - B. Sodium receptors**
  - C. Aldosterone receptors**
  - D. Angiotensin receptors**
  
- 4. In applying the Science of Unitary Human Being Theory, which action can the nurse take to promote symptom improvement?**
  - A. Limiting the number of visitors.**
  - B. Limit interruptions.**
  - C. Calming the environment.**
  - D. All of the above.**
  
- 5. What vital sign is primarily used to assess cardiac function?**
  - A. Blood pressure**
  - B. Heart rate**
  - C. Respiratory rate**
  - D. Temperature**



- 6. During an assessment of a client with asthma, wheezing would be expected to be described as what type of sound?**
- A. Shrill harsh sound**
  - B. Grating or rubbing sound**
  - C. Fine, medium, coarse crackling sound**
  - D. High pitched squeaky musical sound**
- 7. What is the significance of medication reconciliation?**
- A. To ensure patients receive the correct medications during transitions of care**
  - B. To track medication administration schedules**
  - C. To minimize the cost of prescriptions**
  - D. To prevent drug interactions in the emergency department**
- 8. Which condition is most likely to be exacerbated by the use of captopril and a diuretic?**
- A. Bradycardia**
  - B. Orthostatic hypotension**
  - C. Hyperkalemia**
  - D. Dehydration**
- 9. Why is it necessary to conduct a thorough medication review every six months for elderly patients?**
- A. To prepare patients for potential surgery**
  - B. To assess overall health improvements**
  - C. To adjust for age-related changes in drug metabolism**
  - D. To evaluate insurance coverage**
- 10. If a patient reports stomach discomfort from an oral drug, what should the nurse ask the prescriber?**
- A. Whether the medication can be given by a parenteral route instead**
  - B. Whether the patient can receive a sustained-release preparation of the drug**
  - C. To order an enteric-coated form of the drug**
  - D. Whether a sublingual form of the medication can be given**

## **Answers**

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

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## **Explanations**

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1. What action is not part of the six rights of drug administration when giving morphine?
- A. Documenting the reason the medication was given in the patient's electronic medical record
  - B. Consulting a drug manual to determine whether the amount the prescriber ordered is appropriate
  - C. Checking the medication administration record to see when the last dose was administered
  - D. Assessing the patient's pain level 15 to 30 minutes after giving the medication**

The six rights of medication administration are designed to ensure patient safety and the effective use of medications. These rights include the right patient, right medication, right dose, right route, right time, and right documentation. Among the choices provided, assessing the patient's pain level 15 to 30 minutes after administering morphine, while an important nursing responsibility, falls outside the scope of the six rights. The role of assessing the patient's pain level after medication administration is typically part of ongoing patient evaluation and monitoring to determine the efficacy of the treatment and the patient's response. It is crucial for assessing the therapeutic effect of the medication but is not formally recognized as one of the six rights in drug administration protocols. In contrast, documenting the reason for giving medication, consulting drug manuals for dosage appropriateness, and checking the medication administration record for prior doses are all essential aspects of the medication administration process that align with ensuring safety and compliance with the established rights. These actions help prevent errors and ensure that medications are given appropriately and safely according to the prescriptions provided.

2. What is a common chronic disease affecting the elderly population?
- A. Diabetes
  - B. Hypertension**
  - C. Arthritis
  - D. Alzheimer's disease

Hypertension is indeed a common chronic disease affecting the elderly population. It is characterized by consistently high blood pressure, which can lead to serious health complications if not managed properly. As individuals age, their blood vessels may become stiffer and less elastic, contributing to an increased prevalence of hypertension among older adults. This condition is particularly concerning because it often goes undetected, as many individuals do not exhibit symptoms, yet it significantly raises the risk for much more severe problems such as heart disease and stroke. Diabetes, arthritis, and Alzheimer's disease are also prevalent conditions among the elderly, but hypertension is the most common chronic condition found within this demographic. It emphasizes the importance of regular health screenings and hypertension management practices in elderly care, reflecting a broader understanding of health maintenance in aging populations.

### 3. What does eplerenone specifically bind to?

- A. Renin receptors
- B. Sodium receptors
- C. Aldosterone receptors**
- D. Angiotensin receptors

Eplerenone is a selective aldosterone receptor antagonist (SARA) that specifically binds to aldosterone receptors. By doing so, it blocks the action of aldosterone, a hormone that regulates sodium and potassium levels in the body. Aldosterone binds to its receptors in the kidneys, leading to sodium reabsorption and potassium secretion; therefore, by inhibiting this process, eplerenone is effective in treating conditions such as hypertension and heart failure. In the context of the other answer options, renin receptors are involved in the regulation of blood pressure and fluid balance through the renin-angiotensin-aldosterone system but are not the target of eplerenone. Sodium receptors are not a recognized specific receptor type in this context, and while they relate to the actions of aldosterone, they do not represent the direct binding target of eplerenone. Angiotensin receptors are involved in the effects of angiotensin II, another important hormone in blood pressure regulation, but eplerenone does not bind to these receptors either. The specificity of eplerenone for aldosterone receptors is what results in its pharmacological effects.

### 4. In applying the Science of Unitary Human Being Theory, which action can the nurse take to promote symptom improvement?

- A. Limiting the number of visitors.**
- B. Limit interruptions.
- C. Calming the environment.
- D. All of the above.

In the context of the Science of Unitary Human Being Theory, the focus is on the holistic approach to patient care, recognizing the interconnectedness of the mind, body, and environment. This theory emphasizes that individuals are whole beings whose health can be influenced by their interactions with their surroundings. Choosing to limit the number of visitors helps create a more controlled and peaceful environment for the patient, which can reduce stress and anxiety. This aligns with the theory's premise that external factors impact a person's well-being and can contribute to symptom improvement. Furthermore, diminishing the volume of social interactions allows patients to conserve energy and engage in self-reflection, which is vital for healing. It underscores the importance of creating a supportive environment tailored to the patient's needs, ensuring they can rest and recuperate effectively. While limiting interruptions and calming the environment are also beneficial actions that support patients' recovery, the option selected emphasizes a particular strategy within the framework of the Science of Unitary Human Being Theory that focuses on controlling and enhancing the patient's experience in their environment.

**5. What vital sign is primarily used to assess cardiac function?**

- A. Blood pressure**
- B. Heart rate**
- C. Respiratory rate**
- D. Temperature**

The vital sign that is primarily used to assess cardiac function is heart rate. Monitoring heart rate provides critical information about the heart's activity and overall cardiovascular health. A normal heart rate indicates that the heart is functioning effectively to pump blood throughout the body, delivering oxygen and nutrients to tissues and organs. Abnormal heart rates, which can be too fast (tachycardia) or too slow (bradycardia), may indicate underlying cardiac issues or imbalances in the body that require further evaluation. While blood pressure is also an important indicator of cardiac function, as it reflects the amount of force exerted by circulating blood on the walls of blood vessels, it does not directly reflect the heart's pumping efficiency and rhythm like heart rate does. Respiratory rate and temperature are vital signs that provide information about respiratory and systemic conditions but do not specifically assess cardiac function. Thus, heart rate is the most direct measure of the heart's activity and its ability to maintain proper circulation.

**6. During an assessment of a client with asthma, wheezing would be expected to be described as what type of sound?**

- A. Shrill harsh sound**
- B. Grating or rubbing sound**
- C. Fine, medium, coarse crackling sound**
- D. High pitched squeaky musical sound**

In the context of a client with asthma, the description of wheezing as a high-pitched squeaky musical sound is accurate. Wheezing occurs when there is a narrowing of the airways, which can happen during an asthma attack. The airflow through these constricted air passages creates turbulent airflow, producing the characteristic sound. This high-pitched quality of wheezing is specifically due to the smaller airways becoming obstructed, allowing the sound to resonate in a way that's reminiscent of a musical note. This description is important for health professionals as it helps in identifying and assessing the severity of an asthma exacerbation or response to treatment. The other sounds listed do not accurately reflect the nature of wheezing associated with asthma. For instance, a shrill harsh sound might suggest stridor, which typically indicates upper airway obstruction rather than lower airway issues like asthma. Grating or rubbing sounds may refer to pleural friction rubs, while crackling sounds are generally associated with conditions involving fluid in the alveoli, such as pneumonia or pulmonary edema, rather than the bronchospasm and airway constriction seen in asthma. Therefore, recognizing the distinct sound of wheezing is essential in nursing assessments to appropriately respond to the patient's respiratory status.

## 7. What is the significance of medication reconciliation?

- A. To ensure patients receive the correct medications during transitions of care**
- B. To track medication administration schedules**
- C. To minimize the cost of prescriptions**
- D. To prevent drug interactions in the emergency department**

Medication reconciliation is a critical process designed to ensure that patients receive the correct medications throughout transitions of care, such as when they move from one healthcare setting to another (e.g., hospital to home, or hospital to rehabilitation facility). This process involves a comprehensive review of the patient's medication lists from all providers, and it helps to identify discrepancies, omissions, or duplications in medications. The primary aim of medication reconciliation is to avoid medication errors that can occur during transitions. These errors can lead to adverse drug events, which may negatively affect patient safety and health outcomes. By confirming that the patient's medication orders are accurate and in agreement with their intended therapy, healthcare providers can help to optimize the treatment plan for the patient. While tracking medication administration schedules, minimizing prescription costs, and preventing drug interactions are important aspects of medication management, they do not capture the primary focus of reconciliation, which is specifically aimed at ensuring continuity and accuracy during transitions of care. Thus, the emphasis on maintaining an accurate and comprehensive medication list underscores the importance of patient safety and effective healthcare delivery.

## 8. Which condition is most likely to be exacerbated by the use of captopril and a diuretic?

- A. Bradycardia**
- B. Orthostatic hypotension**
- C. Hyperkalemia**
- D. Dehydration**

The condition that is most likely to be exacerbated by the use of captopril and a diuretic is orthostatic hypotension. Captopril is an ACE inhibitor that can lower blood pressure by causing blood vessels to relax. When combined with a diuretic, which promotes fluid loss and decreases blood volume, there is a compounded effect on blood pressure reduction. This concurrent use can significantly increase the risk of orthostatic hypotension, which is characterized by a drop in blood pressure when a person stands up from a sitting or lying position. It can lead to symptoms such as dizziness, lightheadedness, or even fainting. While the other conditions mentioned may have some relevance in the context of captopril and diuretics, they are not as directly linked to the synergistic effects of these medications on blood pressure regulation. For example, bradycardia is not a typical concern with these medications, and while hyperkalemia can be a concern with captopril, it is more commonly related to potassium-sparing diuretics rather than with thiazide or loop diuretics. Dehydration could occur due to diuretic use but is less directly tied to the combination's impact on blood pressure control.



**9. Why is it necessary to conduct a thorough medication review every six months for elderly patients?**

- A. To prepare patients for potential surgery**
- B. To assess overall health improvements**
- C. To adjust for age-related changes in drug metabolism**
- D. To evaluate insurance coverage**

Conducting a thorough medication review every six months for elderly patients is essential primarily because of the age-related changes in drug metabolism. As individuals age, their bodies undergo various physiological changes that can significantly affect how medications are processed. This includes alterations in liver function, kidney function, and overall body composition, which can influence the pharmacokinetics (how the body absorbs, distributes, metabolizes, and excretes drugs) and pharmacodynamics (how drugs affect the body) of medications. Elderly patients often take multiple medications, and the risk of adverse drug reactions increases with age. A regular medication review allows healthcare providers to evaluate the effectiveness of current medications, identify possible drug interactions, and make necessary adjustments to dosages or medication regimens. This proactive approach helps mitigate risks and enhances the therapeutic outcomes for elderly patients, ultimately supporting their health and well-being. While preparing patients for potential surgery, assessing overall health improvements, or evaluating insurance coverage are important aspects of patient care, they are not the primary reasons for the specific focus on medication reviews in the elderly population. The unique challenges posed by age-related changes in drug metabolism make this review critical for ensuring safe and effective medication management.

**10. If a patient reports stomach discomfort from an oral drug, what should the nurse ask the prescriber?**

- A. Whether the medication can be given by a parenteral route instead**
- B. Whether the patient can receive a sustained-release preparation of the drug**
- C. To order an enteric-coated form of the drug**
- D. Whether a sublingual form of the medication can be given**

In the scenario where a patient experiences stomach discomfort from an oral medication, it is prudent for the nurse to consider an enteric-coated formulation of the drug. Enteric-coated medications are specifically designed to withstand the acidic environment of the stomach and dissolve in the more neutral pH of the intestines. This can help minimize gastric irritation and discomfort that may arise from the active ingredients of the medication when taken orally. Using an enteric-coated form can facilitate better patient tolerance and adherence to the medication regimen by reducing side effects. It is often an appropriate strategy to address gastrointestinal issues associated with oral medications, allowing the patient to continue their necessary treatment with fewer adverse effects. While other options may present alternative routes or formulations, enteric coating directly addresses the issue of stomach discomfort. For example, switching to a parenteral route may not always be feasible or necessary, depending on the medication and patient condition, while sustained-release preparations or sublingual doses may not provide the same localized advantage of protecting the gastrointestinal tract.

## 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](mailto:hello@examzify.com).**

**Or visit your dedicated course page for more study tools and resources:**

**<https://fundamentalsofnursingca.examzify.com>**

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