

GALEN COLLEGE OF NURSING PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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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 behavior indicates potential suicidality?**
 - A. Giving away personal belongings
 - B. Attending a family gathering
 - C. Completing discharge planning
 - D. Maintaining a regular exercise routine

- 2. Which action is most appropriate when a staff member appears intoxicated or unsafe to care for patients?**
 - A. Relieve the staff member of assigned clients
 - B. Interview the staff member after shift
 - C. Confront the staff member about substance use immediately
 - D. Ignore and document only

- 3. Which statement would require follow up at a staff conference on neurologic treatments?**
 - A. Clients with MS often receive immunoglobulin G (IVIG).
 - B. Immunomodulatory therapy is not used for MS
 - C. Baclofen is used for spasticity management
 - D. Vaccinations are contraindicated in MS

- 4. Nonmaleficence is best described as which concept?**
 - A. Doing good
 - B. Respecting autonomy
 - C. Doing no harm
 - D. Ensuring fairness in resource allocation

- 5. During staff preparation for neurological diagnostic testing, which statement would require follow-up?**
 - A. The EEG will require the client to be NPO for 12 hours before the test.
 - B. The patient should avoid caffeine for 24 hours prior.
 - C. No sleep deprivation is necessary prior to EEG.
 - D. The EEG requires no special preparation.

- 6. A client admitted with major depression has a risk for self-harm. What is a priority nursing action?**
- A. Allow unrestricted access to personal items
 - B. Encourage self-disclosure during group therapy
 - C. Have the client's possessions searched for sharps
 - D. Begin discharge planning immediately
- 7. At what age should parents introduce pureed chicken to an infant?**
- A. 7 months
 - B. 4 months
 - C. 9 months
 - D. 12 months
- 8. For a client diagnosed with fibromyalgia, which nursing diagnosis should be included in the plan of care?**
- A. Acute confusion
 - B. Sleep pattern disturbance
 - C. Impaired physical mobility
 - D. Risk for infection
- 9. Which toy is appropriate for a child on protective precautions due to thrombocytopenia?**
- A. A board game
 - B. A soccer ball
 - C. A plush stuffed animal
 - D. A video game
- 10. Informed consent is typically described as involving which statement?**
- A. The physician obtains consent; the nurse may witness the signature and confirm understanding
 - B. The nurse can obtain consent without physician involvement
 - C. Informed consent is not required for emergencies
 - D. Informed consent is optional for elective procedures

Answers

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

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Explanations

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1. Which behavior indicates potential suicidality?

- A. Giving away personal belongings**
- B. Attending a family gathering
- C. Completing discharge planning
- D. Maintaining a regular exercise routine

Warning signs of suicidality often appear as drastic changes in behavior, including actions that resemble final preparations. Giving away personal belongings can signal that a person is making arrangements in anticipation of ending their life, or trying to simplify things for others after their death. This kind of behavior is a concrete step toward isolation or death and should prompt a careful safety assessment. The other options reflect positive engagement or coping rather than indicators of intent to harm oneself: attending a family gathering shows social connection, completing discharge planning indicates preparation for safe transition, and maintaining a regular exercise routine demonstrates ongoing healthy coping. If you notice the giving-away behavior, explore thoughts of self-harm, assess risk, and ensure appropriate safety measures are in place.

2. Which action is most appropriate when a staff member appears intoxicated or unsafe to care for patients?

- A. Relieve the staff member of assigned clients
- B. Interview the staff member after shift**
- C. Confront the staff member about substance use immediately
- D. Ignore and document only

When a staff member appears intoxicated or unsafe to care for patients, the priority is to protect those being cared for while following proper procedures. The best approach is to have a private, nonconfrontational conversation with the staff member after the shift. This timing allows you to calmly describe what was observed, gather information, and assess whether impairment is present without creating a chaotic scene or risking patient safety in front of others. It also signals to the staff member that concerns are being taken seriously and will be handled through the proper channels. During the after-shift discussion, you can document what you observed, seek the staff member's input, and determine the next steps in coordination with a supervisor or designated authority. This approach supports accountability and ensures that any needed referrals or corrective actions (such as reassigning patients for the remainder of the shift and arranging formal review or support) are handled through the proper chain of command. Confronting immediately in the moment or ignoring the issue without escalation are less appropriate because they either risk escalating the situation or fail to address patient safety and policy requirements.

3. Which statement would require follow up at a staff conference on neurologic treatments?

- A. Clients with MS often receive immunoglobulin G (IVIG).**
- B. Immunomodulatory therapy is not used for MS
- C. Baclofen is used for spasticity management
- D. Vaccinations are contraindicated in MS

Understanding how multiple sclerosis is typically treated helps you spot statements that would need follow-up. In MS, the standard approach is disease-modifying therapies that modulate the immune system to reduce relapses and slow progression. Immunomodulatory therapies are indeed used for MS, and baclofen is a common medication for managing spasticity, so those points align with established practice. Vaccinations are generally not contraindicated in MS; they are usually encouraged, with considerations only for specific immunosuppressive states. The statement that would require follow-up at a staff conference is that clients with MS often receive immunoglobulin G (IVIG). IVIG is not a standard or routine disease-modifying therapy for MS, though it may be used in certain immune-related conditions. This is the item that would prompt a review of current guidelines to confirm what therapies are evidence-based for MS and to correct any misconceptions.

4. Nonmaleficence is best described as which concept?

- A. Doing good
- B. Respecting autonomy
- C. Doing no harm**
- D. Ensuring fairness in resource allocation

Nonmaleficence is the obligation to do no harm. In healthcare, this means choosing actions that minimize risk and avoiding interventions that could cause unnecessary injury or suffering, even when there might be a potential benefit. It centers on preventing harm as a fundamental duty of care. For example, if a treatment has a high chance of serious side effects with only unclear benefit, a clinician would weigh whether the harm is avoidable and consider alternatives. This principle contrasts with respecting autonomy (honoring patient choices), doing good (beneficence, actively promoting benefit), and fairness in resource allocation (justice). While decisions often involve balancing harms and benefits, nonmaleficence specifically anchors the obligation to avoid harming patients.

5. During staff preparation for neurological diagnostic testing, which statement would require follow-up?

- A. The EEG will require the client to be NPO for 12 hours before the test.**
- B. The patient should avoid caffeine for 24 hours prior.
- C. No sleep deprivation is necessary prior to EEG.
- D. The EEG requires no special preparation.

The main idea here is understanding what pre-test instructions are appropriate for an EEG. An EEG is a noninvasive test that measures brain electrical activity and typically does not require the patient to fast. A statement that the client must be NPO for 12 hours before the test is not standard practice for EEG and could lead to unnecessary delays or dehydration, so it would need follow-up to verify the correct preparation guidelines with the testing facility. In contrast, recommending avoiding caffeine before the test and noting that sleep deprivation is not routinely required fit common EEG prep practices (some studies may use sleep deprivation, but it isn't a universal requirement). Also, saying no special preparation is needed would ignore practical steps like ensuring clean hair and scalp contact for electrodes and avoiding products that interfere with recording.

6. A client admitted with major depression has a risk for self-harm. What is a priority nursing action?

- A. Allow unrestricted access to personal items
- B. Encourage self-disclosure during group therapy
- C. Have the client's possessions searched for sharps**
- D. Begin discharge planning immediately

The main concept is safety first: when a client with major depression is at risk for self-harm, the priority is to minimize opportunities for self-injury by removing access to means. Checking and removing sharps or other potential implements from the client's possessions directly reduces the immediate danger and supports a safer environment. This hands-on safety measure is done while the team assesses risk, sets up appropriate precautions (like close observation or a safer room), and plans further care. Actions that don't address the immediate risk aren't as effective now. Letting unrestricted access to personal items could enable self-harm. Encouraging self-disclosure in group therapy is beneficial for ongoing treatment but doesn't prevent an imminent act. Starting discharge planning while the risk remains is inappropriate. Prioritizing safety establishes a foundation for all subsequent interventions.

7. At what age should parents introduce pureed chicken to an infant?

- A. 7 months**
- B. 4 months
- C. 9 months
- D. 12 months

Introducing iron-rich solid foods as part of early complementary feeding is appropriate once an infant is ready for textures, typically around six to eight months. Pureed chicken provides iron and protein, which helps meet the baby's increasing iron needs as stores begin to wane. By about seven months, many infants have the head and trunk control, can sit with support, and can swallow smooth purées, making this a suitable time to start meat. Look for readiness cues such as staying seated with minimal support, showing interest in food, and the ability to move food to the back of the mouth rather than pushing it out with the tongue. Starting at four months is generally too early because solids aren't yet developmentally appropriate, and the gut and swallowing coordination aren't ready. Waiting until nine or twelve months is acceptable, but introducing meat around seven months helps diversify iron-rich options sooner. When you do start, keep the puree plain (no added salt or seasonings) and introduce one new food at a time, watching for any signs of intolerance or allergy.

8. For a client diagnosed with fibromyalgia, which nursing diagnosis should be included in the plan of care?

- A. Acute confusion
- B. Sleep pattern disturbance**
- C. Impaired physical mobility
- D. Risk for infection

Sleep disturbance is a common issue in fibromyalgia because persistent widespread pain and heightened arousal can disrupt both the ability to fall asleep and the quality of sleep. Restorative sleep helps reduce pain perception and improves daytime energy and cognitive function, so identifying sleep pattern disturbance in the plan targets a central contributor to the patient's symptoms. Interventions would focus on sleep hygiene and relaxation techniques, such as maintaining a consistent bedtime, creating a quiet and dark sleep environment, avoiding caffeine late in the day, and scheduling pain management to minimize nocturnal awakenings. While mobility issues can occur due to pain, they are not the primary problem to address first in this context, and infection risk is not inherently related to fibromyalgia. Prioritizing sleep pattern disturbance aligns with how fibromyalgia typically manifests and responds to care.

9. Which toy is appropriate for a child on protective precautions due to thrombocytopenia?

- A. A board game
- B. A soccer ball
- C. A plush stuffed animal
- D. A video game**

Protecting a child with thrombocytopenia means choosing activities that minimize the risk of injury and bleeding. A video game lets the child stay seated and engage without any physical contact or exertion, eliminating chances of bumps, bruises, or falls that could lead to bleeding. While a board game or a plush stuffed animal are also safe options, they involve handling objects or small pieces that could pose a risk or require more physical interaction, increasing (even slightly) the potential for injury. A soccer ball, with running and potential collisions, clearly increases bleeding risk. So a video game provides the safest, lowest-risk way to stay entertained while hematologic precautions are in place.

10. Informed consent is typically described as involving which statement?

- A. The physician obtains consent; the nurse may witness the signature and confirm understanding
- B. The nurse can obtain consent without physician involvement
- C. Informed consent is not required for emergencies**
- D. Informed consent is optional for elective procedures

In emergencies, consent can be implied when the patient is unable to provide it and delaying treatment could cause serious harm. This reflects an exception to the usual requirement for explicit informed consent: care may proceed to preserve life or prevent irreparable damage when there's no time to obtain formal consent. That nuance is why this statement best describes informed consent in the context of emergencies. In normal situations, a physician typically provides the information and obtains consent, with a nurse sometimes witnessing or confirming understanding, but a nurse wouldn't usually obtain consent alone. Consent is not optional for elective procedures.

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://galencollegeofnursing.examzify.com>

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

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