

HESI 1 AND 2 REMEDIATION PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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THE FULL VERSION STUDY GUIDE

<https://hesi1and2remediation.examzify.com>



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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 dosing route is acceptable for the practical nurse to administer fentanyl to a client with cancer who is experiencing chronic pain?**
 - A. PCA pump.
 - B. Transdermal patch.
 - C. Transmucosal swab.
 - D. Slow intravenous push.

- 2. Which information should be included in a report when a client is admitted to the unit from the emergency department?**
 - A. Admitting diagnosis
 - B. Current code status
 - C. Treatment done in ED
 - D. All of the above

- 3. Which part of the neuron conducts impulses away from the cell body?**
 - A. Dendrite
 - B. Myelin sheath
 - C. Synapse
 - D. Axon

- 4. Which statement best describes the role of federally initiated health acts in practical nursing practice?**
 - A. Ignorance of the health acts is not permissible.
 - B. Encourages nurses to keep up with current standards.
 - C. Guides and defines legal boundaries of nursing practice.
 - D. Nursing acts are optional.

- 5. If energy content of fat is 9 kcal/g, how many kcal are in 12 g of fat?**
 - A. 90 kcal
 - B. 96 kcal
 - C. 100 kcal
 - D. 108 kcal

- 6. A client is receiving instruction on a patient-controlled analgesia (PCA) pump. Which statement indicates the patient needs more instruction?**
- A. I can share my PCA button with a family member.
 - B. I will push the button only when pain is severe.
 - C. I should push the button only when I am awake.
 - D. Only I should push the PCA button.
- 7. Which electrolyte has a direct effect on a client's blood pressure?**
- A. Sodium
 - B. Potassium
 - C. Calcium
 - D. Magnesium
- 8. If a food item provides 250 kcal and 10 g of fat, how many kilocalories come from fat? (Fat has 9 kcal/g)**
- A. 45 kcal from fat
 - B. 90 kcal from fat
 - C. 225 kcal from fat
 - D. 250 kcal from fat
- 9. Which statement most clearly indicates improved health status after treatment?**
- A. Laboratory results have returned to normal levels
 - B. Weight loss noted
 - C. Vital signs unstable
 - D. Pain levels fluctuate
- 10. In the term hypoglycemia, which part denotes the sugar component?**
- A. glyco-
 - B. hypo-
 - C. -emia
 - D. glyc/o

Answers

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

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Explanations

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1. Which dosing route is acceptable for the practical nurse to administer fentanyl to a client with cancer who is experiencing chronic pain?

- A. PCA pump.**
- B. Transdermal patch.
- C. Transmucosal swab.
- D. Slow intravenous push.

A PCA pump is the dosing route that fits best for a practical nurse to manage fentanyl for chronic cancer pain. It allows the patient to self-administer small, individualized doses within set limits, providing rapid relief when pain flares while helping prevent oversedation or respiratory depression through lockout intervals and dose caps. The nurse's role is to set up the pump and monitor the patient, assessing pain scores, respiratory status, and any side effects, all under the physician's order and the facility's protocol. Why the other options aren't as suitable for ongoing, titratable pain: a fentanyl transdermal patch delivers a continuous, long-acting dose that isn't readily adjusted for breakthrough pain and typically requires patch changes by an RN or clinician, making it less responsive to fluctuating chronic pain. Transmucosal fentanyl can be useful for breakthrough episodes but involves careful, individualized dosing and monitoring that may go beyond routine LPN duties in some settings. A slow intravenous push is a direct, rapid route that demands higher-level oversight and is not ideal for steady, ongoing management of chronic cancer pain.

2. Which information should be included in a report when a client is admitted to the unit from the emergency department?

- A. Admitting diagnosis
- B. Current code status
- C. Treatment done in ED
- D. All of the above**

When a client moves from the emergency department to the inpatient unit, the admission report should give a complete snapshot of why the patient is there, what their current goals of care are, and what has already been done. The admitting diagnosis explains the reason for admission and guides the initial plan of care. The current code status tells the team whether resuscitation or other life-sustaining measures should be pursued, which is crucial for patient safety and honoring the patient's wishes. The treatments performed in the ED—medications given, procedures completed, tests run—affect the next steps, prevent duplications, and inform ongoing management. Putting these pieces together ensures continuity of care, minimizes gaps, and supports safe, informed decision-making for the inpatient team.

3. Which part of the neuron conducts impulses away from the cell body?

- A. Dendrite
- B. Myelin sheath
- C. Synapse
- D. Axon**

The essential idea is that the path that carries electrical signals away from the neuron's body is the axon. Signals are received and integrated mainly by dendrites and the cell body, but once an action potential is formed—usually at the axon hillock—it travels along the axon and moves away from the cell body toward the axon terminals to communicate with other cells at the synapse. The myelin sheath helps speed this transmission, especially in myelinated fibers, by enabling rapid jumping of the impulse between gaps called nodes of Ranvier, but its role is in speed, not the direction. Dendrites are the input branches that bring information in, and the synapse is the junction where the signal leaves the neuron to affect the next cell. Since the axon is the structure that conducts impulses outward from the neuron, it is the correct choice.

4. Which statement best describes the role of federally initiated health acts in practical nursing practice?

- A. Ignorance of the health acts is not permissible.
- B. Encourages nurses to keep up with current standards.
- C. Guides and defines legal boundaries of nursing practice.**
- D. Nursing acts are optional.

Federally initiated health acts establish the legal framework that governs nursing practice. They define what nurses are allowed to do, under what conditions, and what standards must be met, creating the scope of practice, licensure expectations, and duties related to patient safety, privacy, documentation, and reporting. This legal boundary guides how you plan and deliver care, ensuring you act within permitted limits and can be held accountable if standards aren't met. Staying informed about current standards is important, but the primary role of these acts is to set the legal rules you operate under, not merely to encourage ongoing education or to be treated as optional.

5. If energy content of fat is 9 kcal/g, how many kcal are in 12 g of fat?

- A. 90 kcal
- B. 96 kcal
- C. 100 kcal
- D. 108 kcal**

Energy content scales with the amount of fat you have. Fat provides about 9 kilocalories per gram, so for 12 grams you multiply 9 kcal/g by 12 g. 9×12 equals 108, so the total energy is 108 kilocalories.

6. A client is receiving instruction on a patient-controlled analgesia (PCA) pump. Which statement indicates the patient needs more instruction?

- A. I can share my PCA button with a family member.
- B. I will push the button only when pain is severe.
- C. I should push the button only when I am awake.
- D. Only I should push the PCA button.**

PCA safety hinges on keeping control with the patient while preventing misuse by others. The most important rule is that the PCA button is for the patient to press only, because dosing is tailored to the individual's pain and response, and having someone else push the button can lead to overdose or inadequate monitoring of sedation and breathing. The statement that shows a need for more instruction is sharing the PCA button with a family member. Allowing someone else to press for the patient bypasses the patient's own pain assessment and the safety checks built into the device and team monitoring, which can put the patient at risk. Other points can be appropriate with proper guidance: using the PCA to request relief when pain begins (not waiting until pain is severe) helps maintain comfortable pain levels and reduces the risk of breakthrough pain; pressing the button only when awake is sensible because response and monitoring are part of safe use; and the idea that only the patient should push the button aligns with the intended purpose of PCA.

7. Which electrolyte has a direct effect on a client's blood pressure?

- A. Sodium**
- B. Potassium
- C. Calcium
- D. Magnesium

Sodium directly affects blood pressure by controlling extracellular fluid volume. It draws water with it, so when sodium intake is high, the body retains more fluid, increasing circulating blood volume. That extra volume raises the pressure in the arteries. Conversely, lowering sodium reduces fluid volume and lowers blood pressure. Hormones like aldosterone link sodium balance to BP regulation through the kidneys. The other electrolytes can influence blood pressure, but their effects are more about vascular tone and regulatory mechanisms rather than the direct impact on fluid volume that sodium provides.

8. If a food item provides 250 kcal and 10 g of fat, how many kilocalories come from fat? (Fat has 9 kcal/g)

- A. 45 kcal from fat
- B. 90 kcal from fat**
- C. 225 kcal from fat
- D. 250 kcal from fat

Energy from fat is found by multiplying the grams of fat by 9 kcal per gram. Here, 10 g of fat $\times$ 9 kcal/g = 90 kcal from fat. The item has 250 kcal total, so fat contributes 90 of those calories, with the remaining 160 kcal coming from other macronutrients. The other options don't fit because they would require different fat grams or imply all energy comes from fat.

9. Which statement most clearly indicates improved health status after treatment?

- A. Laboratory results have returned to normal levels**
- B. Weight loss noted
- C. Vital signs unstable
- D. Pain levels fluctuate

Objective lab values returning to normal levels indicate improved health status because they reflect the body's organ systems functioning within normal ranges. When treatment works, the underlying issue is being controlled and the physiological processes stabilize, which is shown by laboratory results moving back to reference values. This provides an objective measure of recovery beyond subjective symptoms. Weight loss can occur for many reasons and may indicate malnutrition or ongoing illness, not necessarily improvement. Unstable vital signs point to ongoing instability and risk, not recovery. Pain that fluctuates shows variable symptoms and doesn't alone prove overall health is improving.

10. In the term hypoglycemia, which part denotes the sugar component?

- A. glyco-
- B. hypo-
- C. -emia
- D. glyc/o**

The piece that denotes the sugar component is glyc/o. In hypoglycemia, the word breaks down as hypo- (low) + glyc/o (sugar) + -emia (blood condition). So it literally means a low sugar level in the blood. Glyco- is a related form meaning sugar, but glyc/o is the combining form used when linking directly to the suffix -emia in this term.

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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://hesi1and2remediation.examzify.com>

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

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