

HESI GERONTOLOGY PRACTICE TEST (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. What should be a priority when caring for a geriatric patient post-fall?**
 - A. Immediate return to all normal activities.
 - B. Avoiding any movement to prevent further falls.
 - C. Incremental resumption of activities under supervision.
 - D. Complete rest until fully recovered without guidance.
- 2. What is a common physiological change associated with aging?**
 - A. Increased muscle tone
 - B. Decreased bone density
 - C. Enhanced cognitive function
 - D. Improved cardiovascular health
- 3. What condition is characterized by a gradual decline in the sense of smell?**
 - A. Presbycusis.
 - B. Hyposmia.
 - C. Hyperosmia.
 - D. Presbyopia.
- 4. Which medication is used to alter the gut pain threshold in patients with irritable bowel syndrome?**
 - A. Loperamide (Immodium)
 - B. Dicyclomine (Bentyl)
 - C. Amitriptyline (Elavil)
 - D. Metronidazole (Flagyl)
- 5. What is a common symptom of hypothyroidism in older adults?**
 - A. Rapid weight loss
 - B. Insomnia
 - C. Feeling excessively hot
 - D. Fatigue and lethargy

6. For an 83-year-old patient with heart failure, what is the maximum daily dosage of Valsartan?
- A. 200 mg/day.
 - B. 100 mg/day.
 - C. 160 mg/day.
 - D. 320 mg/day.
7. What body part(s) will an ophthalmologist evaluate?
- A. Brain / nerves
 - B. Eyes
 - C. Bones / Joints / Muscles
 - D. Ears / Throat
8. Which statement about HIV testing is accurate?
- A. Sexually active homosexual men are the only ones at risk for HIV
 - B. Receiving blood products from 1985 to 1995 is a risk factor for HIV
 - C. The screening ELISA test detects antibodies and is 99% sensitive and specific
 - D. There is no need to recheck the ELISA if negative on the first test
9. Which approach is essential for effectively managing heart failure in elderly patients?
- A. Strict bed rest.
 - B. Frequent hospitalizations.
 - C. Regular monitoring of weight and fluid intake.
 - D. Discontinuation of all medications.
10. Which medication relaxes the internal urethral sphincter and is used to treat BPH?
- A. Librium, a benzodiazepine
 - B. Furosemide, a diuretic
 - C. Prazosin, an alpha-adrenergic antagonist
 - D. Amitriptyline, a tricyclic antidepressant

Answers

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

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Explanations

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1. What should be a priority when caring for a geriatric patient post-fall?

- A. Immediate return to all normal activities.
- B. Avoiding any movement to prevent further falls.
- C. Incremental resumption of activities under supervision.**
- D. Complete rest until fully recovered without guidance.

The priority when caring for a geriatric patient post-fall is to facilitate an incremental resumption of activities under supervision. This approach is essential for several reasons. First, it acknowledges that older adults may experience decreased physical strength, coordination, and balance after a fall, which puts them at risk for further falls if they resume regular activities too quickly. Incremental resumption of activities allows healthcare providers to assess the patient's condition and functional abilities progressively. This method ensures that the patient's recovery is tailored to their current physical capabilities and safety needs, while also providing the necessary support and supervision to help them regain confidence and strength. Moreover, engaging in supervised activities can also aid in rehabilitation, as it promotes mobility and encourages the patient to gradually rebuild their physical functioning. It allows for monitoring of any issues that may arise, such as dizziness or pain, ensuring that appropriate interventions can be made if needed. In contrast, immediate return to normal activities may overwhelm the patient and increase the risk of re-injury. Avoiding movement completely can lead to muscle atrophy and further decline in function, while resting without guidance can prevent the patient from engaging in beneficial activities that promote recovery. Therefore, a supervised, gradual approach is the most beneficial for the geriatric population after

2. What is a common physiological change associated with aging?

- A. Increased muscle tone
- B. Decreased bone density**
- C. Enhanced cognitive function
- D. Improved cardiovascular health

Decreased bone density is a well-documented physiological change that commonly occurs with aging. As individuals get older, the process of bone remodeling—where old bone is replaced by new bone—can become less efficient. This can lead to an overall decrease in bone density, making bones more fragile and increasing the risk of fractures and osteoporosis. Age-related hormonal changes, such as decreased estrogen in women after menopause and reduced testosterone levels in men, also contribute to this decline in bone density. Additionally, factors like decreased physical activity, dietary deficiencies, and changes in calcium metabolism further exacerbate the loss of bone mass in older adults. Recognizing this change is essential for gerontological practice, as it emphasizes the importance of preventive measures, such as weight-bearing exercises and adequate calcium and vitamin D intake, to help preserve bone health in older populations.

3. What condition is characterized by a gradual decline in the sense of smell?

- A. Presbycusis.
- B. Hyposmia.**
- C. Hyperosmia.
- D. Presbyopia.

Hyposmia is the condition characterized by a gradual decline in the sense of smell. As individuals age or due to certain medical conditions, the olfactory receptors may lose sensitivity, leading to a diminished ability to detect scents. This can affect taste perception and overall quality of life, as smell is closely related to our ability to enjoy food and detect certain environmental hazards. In contrast, presbycusis refers to age-related hearing loss, which is entirely different from smell. Hyperosmia is an increased sensitivity to smells, which is not related to a decline and presbyopia is the gradual loss of the ability to focus on nearby objects typically associated with aging. Therefore, understanding hyposmia is crucial for recognizing how sensory changes can impact older adults' health and well-being.

4. Which medication is used to alter the gut pain threshold in patients with irritable bowel syndrome?

- A. Loperamide (Immodium)
- B. Dicyclomine (Bentyl)
- C. Amitriptyline (Elavil)**
- D. Metronidazole (Flagyl)

Amitriptyline is often used to alter the gut pain threshold in patients with irritable bowel syndrome (IBS) due to its analgesic properties, particularly at lower doses. This tricyclic antidepressant can help in managing pain associated with IBS by influencing neurotransmitters in the brain and gut, thus helping to improve the pain signaling pathways. In patients with IBS, it has been noted that they may have a heightened sensitivity to pain in the gastrointestinal tract. Amitriptyline works by modulating pain perception and improving overall gastrointestinal function, thereby providing a therapeutic benefit for those experiencing abdominal discomfort as a result of IBS. The other medications listed serve different purposes: Loperamide is primarily an anti-diarrheal agent, Dicyclomine is an antispasmodic that helps reduce bowel spasms, and Metronidazole is an antibiotic that would be used for infections rather than pain management in IBS. Therefore, while they may be helpful in treating certain symptoms associated with IBS, they do not specifically address the alteration of gut pain threshold in the way that Amitriptyline does.

5. What is a common symptom of hypothyroidism in older adults?

- A. Rapid weight loss
- B. Insomnia
- C. Feeling excessively hot
- D. Fatigue and lethargy**

Fatigue and lethargy are common symptoms of hypothyroidism in older adults due to the role of thyroid hormones in regulating metabolism and energy levels. When there is an insufficient production of these hormones, individuals often experience a decrease in overall energy, leading to persistent tiredness and a general lack of motivation. This symptom is particularly critical to recognize in older adults, as they may attribute fatigue to normal aging processes or other underlying health conditions. Identifying fatigue as a symptom can prompt further evaluation for hypothyroidism, allowing for timely intervention and management of the condition. The connection between reduced thyroid hormone levels and metabolic energy can explain why fatigue often stands out as a symptom among this demographic.

6. For an 83-year-old patient with heart failure, what is the maximum daily dosage of Valsartan?

- A. 200 mg/day.
- B. 100 mg/day.
- C. 160 mg/day.
- D. 320 mg/day.**

The maximum daily dosage of Valsartan for a patient, including an 83-year-old with heart failure, is indeed 320 mg/day. This dosage is based on guidelines for the management of heart failure that indicate higher dosages of Valsartan can be beneficial in certain cases, provided that the patient can tolerate them and there are no contraindications. Valsartan is an angiotensin II receptor blocker (ARB) used primarily for treating hypertension and heart failure. Older adults can often be treated effectively with the maximum dosage, but careful attention must be paid to their overall health status, kidney function, and potential for interactions with other medications. In the case of an elderly patient with heart failure, the goal is often to achieve optimal control of symptoms and improve their quality of life. The 320 mg/day dosage may help maximize therapeutic effects, such as decreasing blood pressure and reducing the workload on the heart, while still being within established safety ranges for the medication. Lower dosages, such as 100 mg/day or 160 mg/day, may be used in practice, especially if there are concerns about tolerance or adverse effects. However, the upper limit established for Valsartan in the context of heart failure support is 320 mg/day, making it

7. What body part(s) will an ophthalmologist evaluate?

- A. Brain / nerves
- B. Eyes**
- C. Bones / Joints / Muscles
- D. Ears / Throat

An ophthalmologist specializes in the diagnosis and treatment of eye disorders, focusing specifically on the eyes and all aspects related to vision. This includes examining the eye structures, such as the cornea, lens, retina, and optic nerve, as well as diagnosing conditions like glaucoma, cataracts, and age-related macular degeneration. Their expertise is essential in managing and preventing diseases that affect visual function, making their primary focus the health and function of the eyes. While other medical professionals may assess related areas such as the brain and nerves (neurologists), or bones and joints (orthopedic specialists), the fundamental role of an ophthalmologist exclusively pertains to the eyes, their diseases, and treatment options.

8. Which statement about HIV testing is accurate?

- A. Sexually active homosexual men are the only ones at risk for HIV
- B. Receiving blood products from 1985 to 1995 is a risk factor for HIV
- C. The screening ELISA test detects antibodies and is 99% sensitive and specific**
- D. There is no need to recheck the ELISA if negative on the first test

The statement that the screening ELISA test detects antibodies and is 99% sensitive and specific is accurate because the ELISA (Enzyme-Linked Immunosorbent Assay) test is the standard initial screening method used to identify antibodies to HIV in the blood. Sensitivity refers to the test's ability to correctly identify those with the virus (true positive rate), while specificity refers to its ability to correctly identify those without the virus (true negative rate). A sensitivity and specificity near 100% means that the test is highly effective at detecting HIV antibodies in the majority of individuals who are HIV positive and not giving false positives for those who do not have the virus. This high performance is critical in preventive healthcare, as a reliable initial test allows for effective follow-up testing and early intervention for those who are diagnosed. Thus, the ELISA test is a vital component in screening protocols for HIV and serves as the backbone of HIV testing strategies.

9. Which approach is essential for effectively managing heart failure in elderly patients?

- A. Strict bed rest.
- B. Frequent hospitalizations.
- C. Regular monitoring of weight and fluid intake.**
- D. Discontinuation of all medications.

Regular monitoring of weight and fluid intake is crucial for effectively managing heart failure in elderly patients. This practice allows for the early detection of fluid retention, which can indicate worsening heart failure and help prevent the need for hospitalization. By keeping track of these parameters, healthcare providers and caregivers can make timely adjustments to medications, dietary restrictions, and fluid management strategies to optimize the patient's condition. Maintaining an appropriate balance of fluids is vital in heart failure management, especially in the elderly, who may be more susceptible to rapid changes in their clinical status. Regular monitoring can enable patients and caregivers to identify when changes are needed in treatment, thereby promoting better overall health outcomes and enhancing the quality of life for elderly patients with heart failure. In contrast to this approach, strict bed rest is often not recommended as it can lead to further complications, including muscle deconditioning and increased risk of thromboembolism. Frequent hospitalizations are typically indicative of poorly managed heart failure and can contribute to a decline in the patient's overall well-being. Discontinuation of all medications would not be appropriate, as most patients benefit from a tailored medication regimen to manage their heart failure effectively.

10. Which medication relaxes the internal urethral sphincter and is used to treat BPH?

- A. Librium, a benzodiazepine
- B. Furosemide, a diuretic
- C. Prazosin, an alpha-adrenergic antagonist**
- D. Amitriptyline, a tricyclic antidepressant

Prazosin, an alpha-adrenergic antagonist, is effective in treating benign prostatic hyperplasia (BPH) because it works by relaxing the smooth muscle in the internal urethral sphincter and prostatic urethra. This action allows for improved urinary flow and alleviates symptoms associated with BPH, such as difficulty urinating or increased frequency of urination. By antagonizing alpha-adrenergic receptors, prazosin reduces the tone of the smooth muscle that constricts the urethra, thereby easing the passage of urine. Other medications listed serve different purposes: benzodiazepines like Librium are primarily used for anxiety and have no impact on the urinary tract; furosemide, a diuretic, helps to increase urine production but does not alleviate the obstruction caused by BPH; and amitriptyline, a tricyclic antidepressant, is used mainly for depression and may have anticholinergic effects that can worsen urinary retention in patients with BPH. Thus, prazosin is the most appropriate choice for addressing the specific therapeutic need related to BPH.

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://hesigerontology.examzify.com>

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

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