

HISTORY AND PHYSICAL (H&P) EXAM 1 PRACTICE (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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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 skin cancer is typically slow-growing and rarely metastasizes?**
 - A. Basal cell carcinoma
 - B. Melanoma
 - C. Squamous cell carcinoma
 - D. Merkel cell carcinoma
- 2. Which of the following describes the three dimensions of humility in clinical practice?**
 - A. Self awareness, respectful communication, and collaborative partnerships
 - B. Empathy, advocacy, and leadership
 - C. Honesty, accountability, and reliability
 - D. Insight, humility, and teamwork
- 3. What constitutes one standard drink?**
 - A. 8 oz beer, 6 oz wine, 1 oz hard liquor
 - B. 12 oz beer, 5 oz wine, 1.5 oz hard liquor
 - C. 16 oz beer, 4 oz wine, 2 oz hard liquor
 - D. 10 oz beer, 5 oz wine, 1 oz hard liquor
- 4. The superficial cervical lymph node is located superficial to which muscle?**
 - A. Sternocleidomastoid muscle
 - B. Trapezius muscle
 - C. Platysma
 - D. Masseter muscle
- 5. Transitions in an interview refer to what?**
 - A. Repeating questions to ensure accuracy
 - B. Changing directions in an interview or bridge between sections of evaluation
 - C. Providing medical advice
 - D. Ending the interview early
- 6. A pustule is defined as:**
 - A. A plateau-like lesion >10 mm
 - B. Superficial, elevated lesion containing pus
 - C. Circumscribed, elevated lesion containing serous fluid <5 mm
 - D. Vesicle >5mm

7. A papule is defined as a solid palpable lesion of what maximum size?

- A. Less than 6 mm
- B. Less than 8 mm
- C. Less than 5 mm
- D. Less than 10 mm

8. Match the lesion type to its best example.

- A. Plaque — Acne
- B. Nodule — Nevi, basal cell carcinoma
- C. Pustule — Burn/blister
- D. Vesicle — Psoriasis

9. In an oral presentation, which step involves state a plan of action?

- A. State a plan of action
- B. State what the patient told you
- C. State details of physical exam
- D. Give a differential diagnosis

10. Which structure forms the border at the base of the nail and protects the nail bed?

- A. Lunula
- B. Cuticle
- C. Proximal nail fold
- D. Lateral nail fold

Answers

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

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Explanations

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1. Which skin cancer is typically slow-growing and rarely metastasizes?

- A. Basal cell carcinoma**
- B. Melanoma
- C. Squamous cell carcinoma
- D. Merkel cell carcinoma

Basal cell carcinoma tends to grow slowly and rarely metastasizes. It arises from the basal cells of the epidermis and, even though it can invade locally and cause tissue destruction if left untreated, it almost never spreads to lymph nodes or distant organs. This slow growth and low metastatic potential contrast with melanoma, which can grow quickly and spread early, squamous cell carcinoma which can metastasize in some cases, and Merkel cell carcinoma which is notably aggressive with a higher tendency to spread. Clinically, basal cell carcinoma often presents as a pearly, translucent papule with telangiectasias or an ulcerated lesion in sun-exposed areas, especially in older adults. Understanding this distinction helps prioritize urgency and management: the slow, local nature of basal cell carcinoma means excellent prognosis with appropriate local treatment.

2. Which of the following describes the three dimensions of humility in clinical practice?

- A. Self awareness, respectful communication, and collaborative partnerships
- B. Empathy, advocacy, and leadership
- C. Honesty, accountability, and reliability**
- D. Insight, humility, and teamwork

Humility in clinical practice shows up through three clear behaviors: honesty about what you know and don't know, accountability for your actions, and reliability in delivering on commitments. Honesty means openly acknowledging uncertainties or gaps in knowledge and not pretending you have all the answers. This invites collaboration, further learning, and better patient care because decisions are based on real limits and evidence rather than overconfidence. Accountability is the willingness to own your actions, address mistakes, and take corrective steps. It prioritizes patient safety and trust by acknowledging errors, reporting them when appropriate, and learning from them to prevent recurrence. Reliability is the steady, dependable follow-through that patients and colleagues rely on—keeping promises, communicating clearly, and ensuring tasks like test results, follow-up plans, and care transitions are completed on time. While other options may touch on compassionate care or teamwork, this three-part frame specifically captures how humility manifests in practice: being honest about limits, taking responsibility for outcomes, and consistently delivering trustworthy care.

3. What constitutes one standard drink?

- A. 8 oz beer, 6 oz wine, 1 oz hard liquor
- B. 12 oz beer, 5 oz wine, 1.5 oz hard liquor**
- C. 16 oz beer, 4 oz wine, 2 oz hard liquor
- D. 10 oz beer, 5 oz wine, 1 oz hard liquor

One standard drink contains about 14 grams of pure ethanol, which is roughly 0.6 fluid ounces. In everyday terms, that's about a 12-ounce beer (roughly 5% ABV), a 5-ounce glass of wine (about 12% ABV), or a 1.5-ounce shot of distilled spirits (80-proof, about 40% ABV). The option listed as 12 oz beer, 5 oz wine, and 1.5 oz hard liquor matches these practical equivalents, so each beverage type contributes about the same amount of alcohol. The other choices mix volumes that would yield more or less ethanol than one standard drink, so they don't represent a standard drink across the categories.

4. The superficial cervical lymph node is located superficial to which muscle?

A. Sternocleidomastoid muscle

B. Trapezius muscle

C. Platysma

D. Masseter muscle

The superficial cervical lymph nodes are in the superficial fascia along the external jugular vein, which crosses the neck over the sternocleidomastoid. Because the external jugular vein lies on top of the SCM, these nodes sit superficially to the sternocleidomastoid muscle. The other muscles listed are not the typical boundary for this lymph node group.

5. Transitions in an interview refer to what?

A. Repeating questions to ensure accuracy

B. Changing directions in an interview or bridge between sections of evaluation

C. Providing medical advice

D. Ending the interview early

Transitions are the deliberate moves that connect parts of the interview, signaling that you're shifting to a new topic or entering the next phase of the evaluation. They act as bridges between sections, helping you move smoothly from general history to focused questions or from the review of systems to past medical history, while keeping the encounter organized and the patient comfortable. Good transitions set expectations for what's coming next, maintain rapport, and ensure you cover all relevant domains without sounding abrupt. Repeating questions to ensure accuracy isn't a transition, and nor is giving medical advice or ending the interview early.

6. A pustule is defined as:

A. A plateau-like lesion >10 mm

B. Superficial, elevated lesion containing pus

C. Circumscribed, elevated lesion containing serous fluid <5 mm

D. Vesicle >5mm

Pustule is defined by its content: a superficial, elevated lesion that contains pus. The purulent material is the key feature, reflecting neutrophilic inflammation in the epidermis or hair follicle. Because it's pus-filled, this lesion is distinct from a vesicle or bullae, which hold clear or serous fluid, and from a plaque, which is a flat-topped, thickened elevation usually larger in size. In practice, pustules are typically small for judging purposes, often just a few millimeters to a centimeter, whereas vesicles remain fluid-filled up to about 5 mm and bullae are larger.

7. A papule is defined as a solid palpable lesion of what maximum size?

- A. Less than 6 mm
- B. Less than 8 mm
- C. Less than 5 mm**
- D. Less than 10 mm

Papules are small, solid, raised skin lesions that are palpable but do not contain fluid. The size criterion used to distinguish a papule from larger lesions is a maximum diameter of about 5 millimeters; anything larger typically falls into a different category such as a nodular or plaque-like lesion. This is why the most fitting description is a lesion less than 5 mm in diameter. Vesicles and pustules are fluid-filled, and macules are flat and nonpalpable, so those terms describe different types of lesions.

8. Match the lesion type to its best example.

- A. Plaque — Acne
- B. Nodule — Nevi, basal cell carcinoma**
- C. Pustule — Burn/blister
- D. Vesicle — Psoriasis

A nodule is a solid, raised lesion that extends into the dermis or deeper and is usually larger than a papule. Nevi (moles) and basal cell carcinoma commonly present as discrete, palpable nodules, making them the clearest example of this lesion type. A plaque is a broad, flat-topped elevation; acne lesions are typically papules and pustules rather than a single plaque, so they don't serve as the best example of a plaque. A pustule is a small, pus-filled elevation; burns or blisters involve fluid-filled spaces (vesicles or bullae) rather than pus-filled lesions, so pustules aren't the best fit there. A vesicle is a small fluid-filled blister; psoriasis tends to form thick, scaly plaques rather than vesicles, so vesicles aren't the typical description for psoriasis. Thus, nodules best map to nevi and basal cell carcinoma.

9. In an oral presentation, which step involves state a plan of action?

- A. State a plan of action**
- B. State what the patient told you
- C. State details of physical exam
- D. Give a differential diagnosis

Articulating the management plan is the step where you lay out what will be done for the patient. This part conveys concrete actions: medications to start or stop, orders for tests or imaging, procedures, referrals, follow-up, and patient education. It converts the clinical assessment into a specific course of action and ensures everyone understands the next steps in care. This distinguishes it from sections that recount the patient's statements or the physical findings, or from listing the differential diagnosis, which don't specify the actual actions to take. For example, if pneumonia is suspected, the plan would include starting antibiotics, ordering a chest X-ray and labs, arranging follow-up, and providing patient instructions.

10. Which structure forms the border at the base of the nail and protects the nail bed?

A. Lunula

B. Cuticle

C. Proximal nail fold

D. Lateral nail fold

The border at the base of the nail is formed by the proximal nail fold. This skin fold encircles the base of the nail plate and partly covers the nail matrix, helping to shield the nail bed from trauma and infection as new nail cells are produced. The lunula is simply the visible part of the nail matrix and does not define the base border. The cuticle (eponychium) sits at the base as a protective seal over the nail plate, but it isn't the border itself. The lateral nail folds run along the sides, not at the base.

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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://historyandphysical1.examzify.com>

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

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