

HOSA Clinical Nursing Assessment Practice Test (Sample)

Study Guide



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SAMPLE

Questions

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- 1. At what age do neonates typically stop reaching for objects using a raking motion?**
 - A. 5-6 months**
 - B. 7-8 months**
 - C. 9-10 months**
 - D. 11-12 months**
- 2. Bacterial conjunctivitis is typically characterized by its occurrence in which manner?**
 - A. Unilateral**
 - B. Bilateral**
 - C. Multilateral**
 - D. Systemic**
- 3. What are common symptoms of bacterial conjunctivitis in older children?**
 - A. Hives and rashes**
 - B. Edema of the eyelid and photophobia**
 - C. Dry eyes and blurry vision**
 - D. Headaches and sinus pain**
- 4. What is the best indicator of whether an individual will need nursing home placement?**
 - A. Age of the individual**
 - B. Dependence in activities of daily living**
 - C. Social support available**
 - D. Medical history**
- 5. What is the relationship between energy expenditure and activities performed during rest?**
 - A. Energy expenditure is minimal during rest**
 - B. Energy expenditure is highest during rest**
 - C. Energy expenditure is irrelevant during rest**
 - D. Energy expenditure peaks during rest**

- 6. What distinct appearance characterizes allergic conjunctivitis?**
- A. Dry and flaky**
 - B. Cobblestone**
 - C. Frosted**
 - D. Spotted**
- 7. If you give only part of a premeasured dose of a controlled substance, what type of nurse must witness the disposal of the unused portion?**
- A. First**
 - B. Second**
 - C. Third**
 - D. Registered**
- 8. What practice helps ensure the safe management of narcotics in a healthcare setting?**
- A. Documenting on paper**
 - B. Counting regularly**
 - C. Storing outside of patient reach**
 - D. Minimizing access to staff**
- 9. Which of the following is NOT a side effect commonly experienced by patients?**
- A. Drowsiness**
 - B. Anorexia**
 - C. Improved mood**
 - D. Constipation**
- 10. What is one factor that can alter the rate and extent of drug distribution in the body?**
- A. Drug color**
 - B. Patient's age**
 - C. Circulation**
 - D. Administration techniques**

Answers

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

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Explanations

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1. At what age do neonates typically stop reaching for objects using a raking motion?

A. 5-6 months

B. 7-8 months

C. 9-10 months

D. 11-12 months

Neonates typically stop reaching for objects using a raking motion around the ages of 7 to 8 months. At this stage of development, infants are gaining greater control over their fine motor skills, allowing them to move from a more generalized raking action to a more refined pincer grasp, where they can pick up smaller objects using their thumb and forefinger. This progression is crucial for their ability to interact with the environment and is a significant milestone in their motor development. By 5 to 6 months, infants are still developing their overall motor coordination and are primarily using a raking motion to grasp objects, but as they approach the 7- to 8-month mark, their skills rapidly evolve. After this period, typically around 9 to 12 months, they further refine their motor skills, enhancing their ability to manipulate and explore various items more purposefully.

2. Bacterial conjunctivitis is typically characterized by its occurrence in which manner?

A. Unilateral

B. Bilateral

C. Multilateral

D. Systemic

Bacterial conjunctivitis is often characterized by its unilateral occurrence, especially in its early stages. This means that it typically affects one eye initially, leading to symptoms such as redness, swelling, and discharge in that eye. While it is possible for the infection to spread to the other eye later on, the initial presentation is usually localized to just one eye. Understanding the common presentation of bacterial conjunctivitis is crucial for recognizing the infection early and administering appropriate treatment. In contrast, bilateral cases or systemic involvement are less characteristic of uncomplicated bacterial conjunctivitis. It's important to note that while the condition may eventually affect both eyes, the unilateral onset is a hallmark of the disease, making it significant in clinical assessments.

3. What are common symptoms of bacterial conjunctivitis in older children?

A. Hives and rashes

B. Edema of the eyelid and photophobia

C. Dry eyes and blurry vision

D. Headaches and sinus pain

Bacterial conjunctivitis, often referred to as pink eye, commonly presents with symptoms that include edema of the eyelid and photophobia. Edema, or swelling of the eyelids, occurs due to inflammation caused by the bacterial infection, which affects the conjunctiva—a thin membrane covering the inner eyelids and the whites of the eyes. Photophobia, or sensitivity to light, is another typical symptom, as the inflamed conjunctiva can make bright light uncomfortable for the individual. This combination of symptoms is particularly indicative of conjunctivitis, as they directly relate to the irritation and inflammation associated with the infection. Understanding these symptoms is crucial for timely diagnosis and treatment in older children, who may present differently than younger children.

4. What is the best indicator of whether an individual will need nursing home placement?

A. Age of the individual

B. Dependence in activities of daily living

C. Social support available

D. Medical history

The best indicator of whether an individual will need nursing home placement is dependence in activities of daily living (ADLs). ADLs are routine tasks essential for day-to-day living, which include eating, bathing, dressing, toileting, and mobility. If a person has difficulty performing these activities independently, they may require assistance that can typically be provided in a nursing facility. While age, social support, and medical history can influence the need for nursing home care, they do not provide the direct insight into the individual's functional abilities that ADL dependence does. For example, an elderly person might have significant social support and good medical health but may still be unable to perform basic self-care tasks, indicating a higher need for institutional care. Additionally, someone with a chronic condition may have adequate social support and even be young, yet still require assistance with daily functions, underscoring the primary importance of ADL dependence in assessing the need for nursing home placement.

5. What is the relationship between energy expenditure and activities performed during rest?

- A. Energy expenditure is minimal during rest**
- B. Energy expenditure is highest during rest**
- C. Energy expenditure is irrelevant during rest**
- D. Energy expenditure peaks during rest**

Energy expenditure refers to the amount of energy the body uses to perform various activities, including basal metabolic processes, physical activities, and thermogenesis (the production of heat). During rest, the body's energy expenditure is at its lowest, reflecting the minimum energy required for essential physiological functions such as breathing, circulation, and cellular metabolism. At rest, the body is not engaged in physical activities that require significant energy; instead, it is primarily focused on maintaining homeostasis. This minimal level of energy expenditure is typically referred to as the Basal Metabolic Rate (BMR), which accounts for the majority of the energy used by the body in a resting state. Consequently, this answer accurately captures the relationship between energy expenditure and activities performed during rest, where minimal energy is utilized. Understanding this concept is important for recognizing how different levels of physical activity influence overall energy expenditure and metabolism.

6. What distinct appearance characterizes allergic conjunctivitis?

- A. Dry and flaky**
- B. Cobblestone**
- C. Frosted**
- D. Spotted**

Allergic conjunctivitis is characterized by a distinct cobblestone appearance on the conjunctiva. This appearance is due to the presence of large, swollen papillae that develop as a result of the allergic response. When allergens come into contact with the conjunctival tissue, they trigger mast cells to release histamines and other inflammatory mediators, leading to characteristics such as itching, redness, and swelling. The swollen papillae take on a cobblestone-like texture, which is a hallmark sign that can help differentiate allergic conjunctivitis from other types of conjunctivitis, such as bacterial or viral, which do not typically present with this distinct appearance. The other options do not accurately describe the appearance associated with allergic conjunctivitis; instead, they may refer to different skin or mucosal conditions. For example, a dry and flaky appearance might be associated with either a non-allergic form of conjunctivitis or a dermatological condition affecting the skin around the eyes. Frosted can describe a visual effect rather than a physical appearance and spotted may pertain to various forms of lesions or conditions unrelated to allergic conjunctivitis. Understanding these distinctions is crucial for correct diagnosis and management.

7. If you give only part of a premeasured dose of a controlled substance, what type of nurse must witness the disposal of the unused portion?

- A. First**
- B. Second**
- C. Third**
- D. Registered**

In the context of controlled substances, the disposal of any unused portion of a premeasured dose must be witnessed by another qualified nurse to ensure accountability, security, and compliance with legal standards regarding the handling of these substances. A second nurse is required to observe the disposal process, confirming that proper procedures are being followed. This practice helps prevent diversion, misuse, and ensures that accurate records are maintained, reflecting the handling of the medication. The involvement of a second nurse is particularly significant because it adds a layer of verification and trust in the handling of substances that are strictly regulated due to their potential for abuse. This protocol is established to safeguard patient safety and maintain ethical practices within healthcare settings.

8. What practice helps ensure the safe management of narcotics in a healthcare setting?

- A. Documenting on paper**
- B. Counting regularly**
- C. Storing outside of patient reach**
- D. Minimizing access to staff**

Counting narcotics regularly is a vital practice that ensures their safe management in a healthcare setting. This practice involves systematically verifying the quantity of narcotic medications on hand at regular intervals. By conducting consistent counts, healthcare professionals can promptly identify discrepancies that may indicate misuse, theft, or clerical errors. Regular counting creates a system of checks and balances that enhances accountability among staff members who handle these medications, thereby promoting a culture of safety and compliance with regulatory standards. This practice is crucial for safeguarding controlled substances and ensuring they are used appropriately for patient care. While documenting on paper is important for record-keeping, it does not actively prevent loss or misuse. Storing narcotics outside of patient reach is part of secure storage protocols, but it does not address the need for ongoing inventory management. Minimizing access to staff may limit the number of individuals who can access these medications but does not inherently solve the monitoring requirement. Regular counting complements these other practices by ensuring that any issues can be detected and addressed swiftly.

9. Which of the following is NOT a side effect commonly experienced by patients?

- A. Drowsiness**
- B. Anorexia**
- C. Improved mood**
- D. Constipation**

The correct answer is related to the effects experienced by patients in relation to medications or medical treatments. In the context of pharmacology, drugs often produce side effects that can lead to symptoms such as drowsiness, anorexia, and constipation. These are recognized as potential adverse effects of many medications. Drowsiness is a common side effect, particularly with medications that act on the central nervous system, such as sedatives or certain pain medications. Anorexia, or loss of appetite, is also frequently seen with certain medications, especially some antidepressants, chemotherapy agents, and those affecting gastrointestinal function. Constipation emerges as a side effect with various medications, including opioids and some antidepressants, which can alter gut motility. In contrast, improved mood is generally not classified as a side effect in this context. It is more an intended outcome of specific therapeutic interventions, especially for drugs designed to alleviate depression or anxiety. Therefore, while negative side effects can significantly impact a patient's well-being, improved mood is typically viewed as a positive therapeutic effect rather than a side effect, making it the correct choice for this question.

10. What is one factor that can alter the rate and extent of drug distribution in the body?

- A. Drug color**
- B. Patient's age**
- C. Circulation**
- D. Administration techniques**

The rate and extent of drug distribution in the body is significantly influenced by circulation. When a drug is administered, it enters the bloodstream and is transported to various tissues and organs. Adequate circulation is essential because it facilitates the delivery of the drug to its site of action. Factors such as blood flow to different organs, the health and function of the circulatory system, and the volume of distribution all play crucial roles in how effectively a drug reaches its intended target. In a situation where circulation is compromised—such as in cases of shock, severe illness, or other clinical conditions—the distribution of the drug can be adversely affected. This can result in decreased therapeutic effects or increased adverse effects depending on the nature of the drug and the level of circulation impairment. Other factors such as drug color, patient's age, and administration techniques do play roles in drug therapy; however, they do not directly influence the physiological processes linked to drug distribution in the same way that circulation does. For instance, while age can affect metabolic rates and overall drug clearance, it does not directly alter how a drug spreads through the body once it is in circulation.