

INTERRAI HEALTH CARE ASSESSMENT 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. Which code indicates 'Normal – Person swallows all types of foods' in Mode of Nutritional Intake?**
 - A. Normal – Person swallows all types of foods
 - B. Modified independent – For example, liquid is sipped, or person takes limited solid food; need for modification may be unknown
 - C. Requires diet modification to swallow solid food
 - D. Requires modification to swallow liquids

- 2. Which code indicates one fall in the last 30 days?**
 - A. One fall in last 30 days
 - B. No fall in last 30 days, but fell 31-90 days ago
 - C. No fall in last 90 days
 - D. Two or more falls in last 30 days

- 3. How is pain typically captured in InterRAI assessments?**
 - A. As present/absent only.
 - B. Using a numeric pain scale 0-10.
 - C. As present/absent with severity, frequency, location, duration, and impact on function and mood; include pain management strategies.
 - D. Pain is not captured.

- 4. How does InterRAI capture communication, hearing, and vision status?**
 - A. Items on communication ability, presence of hearing/vision impairment, and need for assistive devices or supports.
 - B. Only diagnosis codes.
 - C. Only hearing ability.
 - D. Definition of communication delays in infants.

- 5. In what way can InterRAI data be used for population health management?**
 - A. By aggregating data to identify trends, resource gaps, and population-level outcomes to inform policy and program development
 - B. By tracking only individual patient satisfaction scores
 - C. By generating random data for simulations
 - D. By replacing clinical assessments with survey data

- 6. Bowel continence in the assessment is defined as what?**
- A. Control of bladder
 - B. Control of bowel movements
 - C. Presence of ostomy device
 - D. Pad use
- 7. Discharge assessment serves what primary purpose?**
- A. Use when a permanent program discharge is anticipated and a full interRAI HC Assessment is completed
 - B. Evaluate new motor function
 - C. Plan for hospital admission
 - D. Rewrite the care plan after six months
- 8. Which item corresponds to unsteady gait?**
- A. Clang association
 - B. Unsteady gait
 - C. Chest pain
 - D. Dizziness
- 9. Which setting is NOT listed as a common InterRAI use case?**
- A. Home care
 - B. Emergency department
 - C. Long-term care facilities
 - D. Mental health
- 10. Which code indicates pain exhibited daily in last 3 days?**
- A. No pain
 - B. Exhibited daily in last 3 days
 - C. Exhibited on 1-2 of last 3 days
 - D. Present but not exhibited in last 3 days

Answers

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

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Explanations

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1. Which code indicates 'Normal – Person swallows all types of foods' in Mode of Nutritional Intake?

- A. Normal – Person swallows all types of foods**
- B. Modified independent – For example, liquid is sipped, or person takes limited solid food; need for modification may be unknown
- C. Requires diet modification to swallow solid food
- D. Requires modification to swallow liquids

Swallowing ability and the need for texture or liquid modifications drive this code. When someone can swallow all types of foods and liquids without any adjustments or special handling, the appropriate code is the one that explicitly states "Normal – Person swallows all types of foods." This reflects no swallowing impairment and no necessity for modifications or restrictions. The other options describe situations where swallowing requires changes or limitations—such as independent eating only with certain modifications, or needing diet alterations to handle solids or liquids. Those indicate some degree of swallowing difficulty or safety precautions, not the unrestricted swallowing described by normal.

2. Which code indicates one fall in the last 30 days?

- A. One fall in last 30 days**
- B. No fall in last 30 days, but fell 31-90 days ago
- C. No fall in last 90 days
- D. Two or more falls in last 30 days

We're focused on capturing falls within the most recent 30 days. The code that matches exactly one fall in that 30-day window is the phrase "One fall in last 30 days." It precisely communicates a single fall occurred within the last 30 days, which is exactly what the question asks for. The other options don't fit because: - "No fall in last 30 days, but fell 31-90 days ago" indicates a fall occurred, but outside the last 30 days, so it doesn't show a fall in the last 30 days. - "No fall in last 90 days" implies there were zero falls in the entire last 90 days, which contradicts the occurrence of a fall in the last 30 days. - "Two or more falls in last 30 days" shows more than one fall in the last 30 days, not exactly one.

3. How is pain typically captured in InterRAI assessments?

- A. As present/absent only.
- B. Using a numeric pain scale 0-10.
- C. As present/absent with severity, frequency, location, duration, and impact on function and mood; include pain management strategies.**
- D. Pain is not captured.

Pain in InterRAI assessments is captured as a presence or absence, but with a full set of details that describe its nature and impact. This means recording how severe the pain is, how often it occurs, where it's felt, how long it lasts, and how it affects daily function and mood. It also includes noting any pain management strategies being used or planned. This comprehensive approach gives a richer picture than a simple yes/no or a numeric score alone, because it shows how pain influences daily activities and well-being and informs appropriate care actions.

4. How does InterRAI capture communication, hearing, and vision status?

- A. Items on communication ability, presence of hearing/vision impairment, and need for assistive devices or supports.
- B. Only diagnosis codes.
- C. Only hearing ability.
- D. Definition of communication delays in infants.

InterRAI gathers how a person communicates and senses by using items that cover three linked areas: how well they can communicate (speech, language, understanding), whether there is a hearing or vision impairment, and whether they use or need assistive devices or supports (like hearing aids, glasses, or communication aids). This combination creates a functional picture of the individual's communication abilities and sensory needs, which is essential for planning care and supports. This approach is broader than just listing a diagnosis, and it goes beyond focusing on a single sense. It reflects real-world needs—someone might have no formal diagnosis but still require aids or strategies to communicate effectively, or vice versa. It's also applicable across ages and settings, not limited to a specific group like infants, making it the most comprehensive way InterRAI captures these statuses. In short, documenting communication ability, sensory impairments, and the use of assistive devices provides a complete view of how a person interacts with others and their environment, guiding tailored care planning and communication strategies.

5. In what way can InterRAI data be used for population health management?

- A. By aggregating data to identify trends, resource gaps, and population-level outcomes to inform policy and program development
- B. By tracking only individual patient satisfaction scores
- C. By generating random data for simulations
- D. By replacing clinical assessments with survey data

This question tests how aggregated InterRAI data can drive population health management. When you combine data from many individuals, you create a big-picture view of a population's health, functioning, and service use. This allows you to identify trends over time, spot gaps in resources or care, and compare outcomes across settings or subgroups. Those insights help policymakers and program planners allocate resources more effectively, design targeted interventions, and monitor the impact of programs at a population level. The strength lies in the standardized, comprehensive information InterRAI collects, which makes comparisons and benchmarking meaningful. Tracking only individual patient satisfaction focuses on a single metric and misses broader trends and outcomes. Generating random data isn't real data and can't inform real-world decisions. Replacing clinical assessments with survey data would lose the depth and clinical validity InterRAI provides.

6. Bowel continence in the assessment is defined as what?

- A. Control of bladder
- B. Control of bowel movements
- C. Presence of ostomy device
- D. Pad use

The concept being tested is bowel continence—the ability to control bowel movements. Bowel continence means a person can sense the need to defecate, hold the stool until an appropriate time and place, and pass stool in a controlled way rather than leaking involuntarily. This hinges on the function of the anal sphincter and rectal sensation, as well as stool consistency and the person's ability to use a toilet. Therefore, the best answer is control of bowel movements. The other options don't fit: controlling the bladder refers to urinary continence, not bowel; having an ostomy device means stool is diverted away from the anal route, which is not about continence; pad use is an indicator of incontinence but not the definition of continence itself.

7. Discharge assessment serves what primary purpose?

- A. Use when a permanent program discharge is anticipated and a full interRAI HC Assessment is completed**
- B. Evaluate new motor function
- C. Plan for hospital admission
- D. Rewrite the care plan after six months

Discharge assessment is used to document a client's status and needs at the moment a permanent discharge from the program is anticipated, ensuring a full interRAI HC Assessment has been completed to guide the next steps. This purpose centers on transition planning—capturing current functioning, care requirements, and risks so that the handover to the next setting or service is informed and seamless, and so funding or eligibility considerations tied to discharge can be accurately addressed. It's not about measuring motor function in isolation, planning a hospital admission, or simply rewriting the care plan after a fixed period; those tasks are handled by other assessments and processes.

8. Which item corresponds to unsteady gait?

- A. Clang association
- B. Unsteady gait**
- C. Chest pain
- D. Dizziness

The main idea here is recognizing a physical sign that describes how a person walks. Unsteady gait directly describes a problem with walking—being unsteady, uncoordinated, or needing support—which points to balance or motor coordination issues such as ataxia, cerebellar dysfunction, or sensory/musculoskeletal problems. This makes it the best fit for identifying a gait disturbance. Clang association is a speech-language issue, not about how someone walks. Chest pain is a symptom related to the heart or chest structures, not gait. Dizziness refers to a sensation of spinning or lightheadedness, which can accompany gait problems but is not the observable gait pattern itself. So the item that specifically corresponds to unsteady gait is the one that describes the walking instability.

9. Which setting is NOT listed as a common InterRAI use case?

- A. Home care
- B. Emergency department**
- C. Long-term care facilities
- D. Mental health

InterRAI use cases center on settings where standardized assessments drive ongoing care planning and outcomes across transitions. These tools are most commonly applied in environments where residents receive continuous, coordinated care, such as at home with care services, in long-term care facilities, and within mental health settings. The emergency department, on the other hand, is focused on rapid triage, stabilization, and short-term decision-making rather than longitudinal care planning. While some hospitals may use InterRAI instruments in inpatient or research contexts, it isn't typically listed as a standard, common use case. That's why the emergency department is the setting that isn't considered a common InterRAI use case.

10. Which code indicates pain exhibited daily in last 3 days?

- A. No pain
- B. Exhibited daily in last 3 days**
- C. Exhibited on 1-2 of last 3 days
- D. Present but not exhibited in last 3 days

Pain frequency in the last three days is coded by how often the person shows pain over that brief window. When pain is present every day across those three days, the code should reflect daily exhibition in the last three days. That exact wording matches the situation of continuous daily pain during the period. The other options describe different patterns: no pain at all; pain only on one or two days within the period; or pain that exists but isn't observed in the last three days. Those don't describe pain present daily across the entire three-day span, so they're not the correct code.

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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://interraihcassmt.examzify.com>

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

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