

INTRODUCTION TO ADULT HEALTH HESI PRACTICE EXAM (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. If gastric residual volume collected before a bolus feeding is greater than 200 mL on two consecutive checks, the nurse should:**
 - A. Increase the bolus volume
 - B. Discontinue the administration of the bolus feeding
 - C. Continue with a smaller bolus
 - D. Check placement and consult
- 2. Which scenario most likely indicates prerenal AKI?**
 - A. Severe dehydration causing reduced renal perfusion
 - B. Nephrotoxic drug-induced tubular injury
 - C. Acute glomerulonephritis
 - D. Urinary tract obstruction causing post-renal AKI
- 3. What is the primary goal of oxygen therapy?**
 - A. Decrease oxygen consumption
 - B. Increase hematocrit
 - C. Normalize blood pressure
 - D. Improve tissue oxygenation by increasing arterial oxygen content
- 4. To obtain the most complete assessment data for a client with chronic pain, which information should the nurse obtain?**
 - A. What activities during a routine day are impacted by your pain
 - B. What medications are you taking for pain
 - C. How long have you had pain
 - D. Rate your pain on a scale of 1 to 10
- 5. When preparing to irrigate a client's indwelling urinary catheter using an open technique, which step is performed first?**
 - A. Hang the irrigating solution bag on the IV pole
 - B. Use sterile gloves and prepare a sterile field
 - C. Draw up the irrigating solution into the syringe
 - D. Insert the catheter with the syringe attached

- 6. Which statement describes the ECG changes typical of hypokalemia?**
- A. Hyperkalemia
 - B. Flattened T waves and U waves
 - C. Peaked T waves
 - D. ST-segment elevation
- 7. When preparing to administer an intravenous medication through a central venous catheter, what is the correct step?**
- A. Administer through the lumen directly
 - B. Draw back blood to confirm placement
 - C. Flush the lumen with the saline solution and administer the medication through the lumen
 - D. Flush with sterile water before med
- 8. Prior to administering a newly prescribed medication to a client, which nursing action is indicated?**
- A. Assessment
 - B. Analysis
 - C. Planning
 - D. Evaluation
- 9. When addressing spiritual distress, which communication technique is most effective in validating feelings?**
- A. Provide rigid reassurance that everything will be fine
 - B. Use reflective listening techniques to validate feelings
 - C. Ignore the concerns
 - D. Immediately refer to clergy without discussion
- 10. What are the most common signs of deep vein thrombosis?**
- A. Unilateral leg swelling, leg pain, warmth, and redness
 - B. Bilateral leg swelling and shortness of breath
 - C. Abdominal pain and vomiting
 - D. Neck stiffness and photophobia

Answers

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

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Explanations

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1. If gastric residual volume collected before a bolus feeding is greater than 200 mL on two consecutive checks, the nurse should:

- A. Increase the bolus volume
- B. Discontinue the administration of the bolus feeding**
- C. Continue with a smaller bolus
- D. Check placement and consult

High gastric residual volume before a bolus feed indicates the stomach isn't emptying properly and the patient isn't tolerating the feeding. When two consecutive checks show more than 200 mL, continuing the bolus feed increases the risk of regurgitation and aspiration with the next delivery. The safest course is to discontinue the bolus feeding and reassess the patient, looking for causes of delayed gastric emptying (such as medications, dehydration, ileus, or electrolyte disturbances) and confirming tube placement if needed. After stopping, the care plan can be adjusted—often switching to a slower or continuous feeding approach or resuming bolus feeds only after stabilization and physician guidance. Increasing the bolus volume or continuing with a smaller bolus would not address the intolerance and could worsen the situation. Checking placement and consulting are prudent steps, but the immediate, safest action when two consecutive high residuals occur is to stop the bolus feeding.

2. Which scenario most likely indicates prerenal AKI?

- A. Severe dehydration causing reduced renal perfusion**
- B. Nephrotoxic drug-induced tubular injury
- C. Acute glomerulonephritis
- D. Urinary tract obstruction causing post-renal AKI

Prerenal AKI happens when the kidneys themselves are fine, but they aren't getting enough blood flow. Severe dehydration drops the circulating volume and renal perfusion, so the glomeruli don't filter effectively and the GFR falls. This scenario fits a perfusion problem rather than direct kidney injury, which is why it's the best match for prerenal AKI. In this situation the body often preserves kidney function by boosting reabsorption of sodium and water, leading to a low urine sodium concentration and a high BUN-to-creatinine ratio, and the kidney function can improve quickly once fluids are restored. The other scenarios involve intrinsic kidney injury or obstruction. Nephrotoxic drugs injure tubular cells inside the kidney, acute glomerulonephritis damages the glomeruli, and a urinary tract obstruction causes a post-renal AKI through back-pressure effects. These are not primarily about reduced perfusion, so they don't represent prerenal AKI.

3. What is the primary goal of oxygen therapy?

- A. Decrease oxygen consumption
- B. Increase hematocrit
- C. Normalize blood pressure
- D. Improve tissue oxygenation by increasing arterial oxygen content**

The main idea is to boost oxygen delivery to tissues by raising the amount of oxygen carried in arterial blood. Supplemental oxygen increases the partial pressure of oxygen in the lungs, which raises arterial oxygen content by increasing both the oxygen dissolved in plasma and the saturation of hemoglobin. With more oxygen carried per liter of blood, tissues receive more oxygen for metabolism, helping prevent hypoxic injury. Oxygen delivery depends on arterial oxygen content and cardiac output, so improving CaO_2 directly supports tissue oxygenation. Other options don't fit because decreasing oxygen consumption targets demand rather than supply, increasing hematocrit changes red cell mass rather than oxygen saturation through inhaled oxygen, and normalizing blood pressure is a cardiovascular goal separate from the primary aim of enhancing oxygen delivery.

4. To obtain the most complete assessment data for a client with chronic pain, which information should the nurse obtain?

- A. What activities during a routine day are impacted by your pain**
- B. What medications are you taking for pain
- C. How long have you had pain
- D. Rate your pain on a scale of 1 to 10

Understanding how pain limits daily functioning is essential in chronic pain assessment. The best choice asks what activities during a typical day are affected by the pain, because it directly reveals how pain interferes with everyday tasks, responsibilities, work, sleep, and social participation. This functional insight drives care planning—setting realistic goals, choosing pacing strategies, recommending therapies or assistive devices, and targeting interventions to improve quality of life. Medications, duration of pain, and a numeric pain rating are important data points, but they don't by themselves show how pain translates into real-world limitations. Two people with the same pain rating can have very different impacts on daily activities. So while those are pieces of the overall assessment, the question points to the most comprehensive information by focusing on daily activity impact.

5. When preparing to irrigate a client's indwelling urinary catheter using an open technique, which step is performed first?

- A. Hang the irrigating solution bag on the IV pole
- B. Use sterile gloves and prepare a sterile field
- C. Draw up the irrigating solution into the syringe**
- D. Insert the catheter with the syringe attached

Starting with drawing up the irrigating solution into the syringe sets up the irrigation process by making the irrigant ready to go. Having the solution prepared first helps you move smoothly into the remaining steps without delaying the procedure or leaving the syringe exposed longer than needed. Once the solution is ready, you proceed with sterile preparation (sterile gloves and sterile field) and then connect the syringe to the catheter to deliver the irrigation. This sequence helps maintain asepsis and ensures the irrigation can be performed efficiently.

6. Which statement describes the ECG changes typical of hypokalemia?

- A. Hyperkalemia
- B. Flattened T waves and U waves**
- C. Peaked T waves
- D. ST-segment elevation

Low potassium slows ventricular repolarization, changing how the ECG looks. When potassium is low, the T wave becomes flatter and a U wave often appears after the T wave. The U wave is an extra deflection that reflects delayed repolarization of parts of the ventricles. You may also see ST-segment depression and a longer QT interval as potassium falls. By contrast, tall, peaked T waves point to high potassium, and ST-segment elevation is usually related to acute myocardial injury, not hypokalemia. So, flattened T waves with a prominent U wave best describe the ECG changes in hypokalemia.

7. When preparing to administer an intravenous medication through a central venous catheter, what is the correct step?

- A. Administer through the lumen directly
- B. Draw back blood to confirm placement
- C. Flush the lumen with the saline solution and administer the medication through the lumen**
- D. Flush with sterile water before med

The key idea is making sure the catheter lumen is open and ready for drug delivery. Flushing with normal saline clears any debris or small clots and confirms the lumen is patent, providing a safe, unobstructed conduit for the medication. After this flush, you administer the drug through the same lumen. Using sterile water is not appropriate because it's hypotonic and can cause hemolysis or electrolyte imbalances. Drawing back blood to confirm placement is a step used to verify catheter position when the line is first placed, not a routine pre-dose check for every medication administration.

8. Prior to administering a newly prescribed medication to a client, which nursing action is indicated?

- A. Assessment
- B. Analysis**
- C. Planning
- D. Evaluation

Before giving a newly prescribed medication, the essential step is to assess the patient. This means gathering and reviewing information to ensure safety and appropriateness: check for allergies, current medications for potential interactions, vital signs and relevant laboratory results, organ function (such as kidney or liver), pregnancy status if relevant, and the patient's understanding and history with the medication. This assessment helps determine whether the medication can be given as ordered, whether a dose adjustment is needed, or if you should hold the dose and notify the prescriber. After assessing, you would proceed with planning, then implementation, and finally evaluation of the patient's response. The other actions—analyzing data to form diagnoses, planning nursing actions, and evaluating outcomes—are steps that come after the initial assessment.

9. When addressing spiritual distress, which communication technique is most effective in validating feelings?

- A. Provide rigid reassurance that everything will be fine
- B. Use reflective listening techniques to validate feelings**
- C. Ignore the concerns
- D. Immediately refer to clergy without discussion

Validating feelings in spiritual distress is best achieved through reflective listening, which shows empathy by mirroring both what the patient says and how they feel. By paraphrasing the content and naming the emotions you hear, you validate the person's experience and invite them to share more about their beliefs, doubts, or concerns. This approach builds trust and reduces defensiveness, making it easier to explore coping resources or seek appropriate support. Rigid reassurance can shut down honest expression and miss underlying worries. Ignoring concerns communicates indifference, and jumping straight to clergy referral without discussion bypasses the patient's readiness and preferences. Reflective listening centers the patient's experience and sets the stage for meaningful spiritual support.

10. What are the most common signs of deep vein thrombosis?

A. Unilateral leg swelling, leg pain, warmth, and redness

B. Bilateral leg swelling and shortness of breath

C. Abdominal pain and vomiting

D. Neck stiffness and photophobia

Deep vein thrombosis most often presents with unilateral leg swelling accompanied by leg pain, warmth, and redness. This pattern comes from a clot obstructing venous return in one leg, causing local edema and inflammation that make the leg feel warmer, appear red, and be tender to touch. The unilateral nature helps distinguish DVT from conditions that affect both legs or the chest. Other options point to different problems: bilateral swelling with shortness of breath can suggest heart failure or a pulmonary embolism; abdominal pain with vomiting indicates a gastrointestinal issue; neck stiffness with photophobia suggests meningitis.

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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://introtoadulthealthhesi.examzify.com>

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

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