

INTRODUCTION TO HEALTHCARE & RESIDENTS' RIGHTS 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. The public list of CNAs with proven neglect or abuse is called what?**
 - A. APS
 - B. Advanced Directive
 - C. Social Worker
 - D. Abuse Registry
- 2. In a long-term care setting, which term refers to residents' entitlements such as privacy and respectful treatment?**
 - A. Patient Rights
 - B. Employee Rights
 - C. Resident Rights
 - D. Visitor Rights
- 3. Ensuring that others feel worthy, honored or respected as individuals; ethically treating your resident/patient/client.**
 - A. Hospice
 - B. Dignity
 - C. Home Health
 - D. Hospital
- 4. Which term refers to the plan developed to help achieve care goals and lists tasks and services for the care team?**
 - A. Care Plan
 - B. Policy
 - C. Procedure
 - D. Outpatient Care
- 5. Health care provided in a person's home; recipient called a client.**
 - A. Acute Care
 - B. Hospital
 - C. Home Health
 - D. Long Term Care

- 6. In outpatient or home health care settings, what term describes the individual receiving clinical services?**
- A. Patient
 - B. Resident
 - C. Client
 - D. Customer
- 7. Which concept refers to rules created by government that guide behavior to maintain order and safety?**
- A. Living Will
 - B. Mandated Reporter
 - C. OBRA
 - D. Laws
- 8. Which role is primarily responsible for supervising daily nursing care and administering medications under physician direction?**
- A. Occupational Therapist (OT)
 - B. Registered Nurse (RN)
 - C. Physical Therapist (PT)
 - D. Dietitian
- 9. Which approach best describes the regulatory framework that typically governs long-term care facility operations?**
- A. Private, market-driven approach with no formal surveys.
 - B. CMS and state health departments regulate facilities through surveys, licensure, and enforcement under OBRA and related rules.
 - C. Regulation is determined solely by facility leadership.
 - D. Only OBRA governs all aspects without CMS involvement.
- 10. An injury to a patient caused by professional misconduct through negligence, carelessness, or lack of skill is best described as which term?**
- A. Negligence
 - B. Involuntary Seclusion
 - C. Malpractice
 - D. Laws

Answers

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

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Explanations

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1. The public list of CNAs with proven neglect or abuse is called what?

- A. APS
- B. Advanced Directive
- C. Social Worker
- D. Abuse Registry**

The main idea here is recognizing the public list that identifies CNAs who have been found to neglect or abuse residents. This is called the Abuse Registry. It is kept by state regulatory bodies and is used to alert employers and facilities about CNAs who have substantiated misconduct, helping protect residents from those who have harmed or endangered them. The other options don't fit: Adult Protective Services investigates abuse and provides protection, but it isn't a public listing of CNAs; an Advanced Directive concerns medical care preferences from a patient; a Social Worker is a care professional, not a registry. Some states refer to this as the Nurse Aide Abuse Registry or similar, but the key idea is that it's a public record of substantiated caregiver abuse or neglect.

2. In a long-term care setting, which term refers to residents' entitlements such as privacy and respectful treatment?

- A. Patient Rights
- B. Employee Rights
- C. Resident Rights**
- D. Visitor Rights

In a long-term care setting, the term that describes residents' entitlements like privacy and respectful treatment is Resident Rights. This label emphasizes that the person living in the facility, not just receiving care, has specific protections and freedoms tied to their dignity and autonomy. It distinguishes these entitlements from patient rights in hospitals, employee rights for staff, or visitor rights for people visiting the facility. In practice, resident rights cover things like privacy during care and visits, the right to be treated with respect, and the right to participate in decisions about one's care. Understanding this helps staff uphold a resident's dignity daily and address concerns through appropriate grievance processes.

3. Ensuring that others feel worthy, honored or respected as individuals; ethically treating your resident/patient/client.

- A. Hospice
- B. Dignity**
- C. Home Health
- D. Hospital

The main idea here is dignity in patient care. Dignity means recognizing and affirming the inherent worth of every resident, patient, or client, and treating them as valued individuals—honoring their preferences, privacy, autonomy, and comfort in every interaction. This ethical standard guides how caregivers interact, talk with, and respond to those they serve, ensuring they feel worthy, honored, and respected. Hospice, Home Health, and Hospital describe settings or modes of care (where or how care is provided) rather than the ethical principle of how to treat someone. They are about care delivery and environment, not about upholding the intrinsic respect and worth of the person in every moment of care.

4. Which term refers to the plan developed to help achieve care goals and lists tasks and services for the care team?

- A. Care Plan**
- B. Policy
- C. Procedure
- D. Outpatient Care

A care plan is the plan developed to help achieve care goals and lists tasks and services for the care team. It starts with the assessment, then sets specific goals and the interventions or therapies needed to reach them. It assigns who is responsible for each task, outlines timelines and follow-up, and tracks progress so the team can coordinate care across disciplines. Because it guides what everyone does for this patient, it's continually updated as the patient's situation changes, ensuring care stays focused and organized. Policies are organizational rules guiding behavior, not individualized patient tasks. Procedures describe exact steps for performing a task, not the overall care goals for a patient. Outpatient care refers to care provided without admission, in clinics or similar settings.

5. Health care provided in a person's home; recipient called a client.

- A. Acute Care
- B. Hospital
- C. Home Health**
- D. Long Term Care

Care given in a person's home is Home Health. The essential idea is that skilled nursing, therapy, and related services are provided at the patient's home rather than in a hospital or facility, with treatment planned and supervised by a clinician. Using the term client aligns with the home-based, person-centered approach of Home Health, where services are designed around the individual in their own living space. This differs from acute care, which is hospital-based and focused on urgent, short-term treatment; a hospital setting, by definition, is an inpatient facility; and long-term care involves ongoing assistance in an institutional setting like a nursing facility, not typically delivered in the home.

6. In outpatient or home health care settings, what term describes the individual receiving clinical services?

- A. Patient
- B. Resident
- C. Client**
- D. Customer

In outpatient or home health care, the person receiving clinical services is described as a client. This term signals a collaborative relationship where the individual actively participates with the care team in planning, goals, and decisions about their care, reflecting a focus on ongoing support and health goals in a home or clinic setting. Using client emphasizes autonomy and partnership, which fits the preventive, rehabilitative, and personal-centered nature of care outside a hospital. In contrast, patient is more commonly used in hospitals or acute care contexts where the emphasis is on disease and treatment during a specific episode; resident describes someone living in a long-term care facility; and customer implies a purely transactional relationship, which isn't appropriate for the therapeutic, professional relationship in healthcare.

7. Which concept refers to rules created by government that guide behavior to maintain order and safety?

- A. Living Will
- B. Mandated Reporter
- C. OBRA
- D. Laws**

Laws are the rules created by government to guide how people should behave and to keep society orderly and safe. In healthcare settings, laws establish patient rights, safety standards, privacy protections, and reporting obligations, and they are enforceable by authorities with consequences for violations. The other options describe specific legal tools or roles—living wills are advance directives about medical care, a mandated reporter is someone required to report abuse, and OBRA is a particular federal act governing nursing home standards—but they are not the general idea of government-created rules that structure behavior. The broad concept that fits all of these ideas is laws.

8. Which role is primarily responsible for supervising daily nursing care and administering medications under physician direction?

- A. Occupational Therapist (OT)
- B. Registered Nurse (RN)**
- C. Physical Therapist (PT)
- D. Dietitian

The question tests who oversees and carries out everyday nursing care and medication administration under doctor's orders. The registered nurse is the one whose role centers on coordinating and supervising daily nursing care, evaluating how patients respond to treatments, and administering medications according to physician orders. RNs also delegate tasks to other nursing staff while maintaining patient safety and quality of care. The other professionals have different focus areas: Occupational therapists help with daily living activities and rehabilitation, physical therapists work on movement and function, and dietitians manage nutrition. They don't typically supervise everyday nursing care or administer medications.

9. Which approach best describes the regulatory framework that typically governs long-term care facility operations?

- A. Private, market-driven approach with no formal surveys.
- B. CMS and state health departments regulate facilities through surveys, licensure, and enforcement under OBRA and related rules.**
- C. Regulation is determined solely by facility leadership.
- D. Only OBRA governs all aspects without CMS involvement.

Regulation of long-term care facilities in the United States is a joint federal and state process. The federal agency (CMS) sets participation requirements for Medicare and Medicaid, while state health departments license facilities and conduct regular surveys to ensure compliance with those standards. The Omnibus Budget Reconciliation Act (OBRA) and related rules specify resident rights, staffing, quality of care, and assessment procedures. Facilities must meet these standards to operate and to participate in Medicare/Medicaid, and state survey agencies enforce them, using deficiencies, sanctions, and corrective action plans as needed. This combined framework—CMS oversight plus state licensure and enforcement under OBRA—is why this description best matches how long-term care regulation works. Descriptions that rely solely on private market forces, on facility leadership, or on OBRA alone without CMS/state involvement don't capture the full regulatory structure.

10. An injury to a patient caused by professional misconduct through negligence, carelessness, or lack of skill is best described as which term?

- A. Negligence
- B. Involuntary Seclusion
- C. Malpractice**
- D. Laws

Malpractice is medical professional negligence—when a clinician's actions fall below the accepted standard of care due to carelessness or lack of skill and harm the patient. This term specifically describes injuries that result from a professional's misconduct and breach of duty to provide competent care. It's distinct from general negligence, which can refer to careless acts by anyone, and from involuntary seclusion (unlawful confinement) or laws (rules), which do not describe harm caused by professional care.

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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://introtohcredidentsrights.examzify.com>

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

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