

Introduction to Physician Assistant (PA) Profession 1 Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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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. What is the typical supervisory relationship for PAs in clinical practice?**
 - A. PAs practice under physician supervision and collaborate with the healthcare team**
 - B. PAs work entirely independently with no supervision**
 - C. PAs require surgeon-only supervision**
 - D. PAs cannot supervise midlevel staff**

- 2. PSPA stands for which organization?**
 - A. Pennsylvania Society of Public Assistants**
 - B. Pennsylvania Society of Physician Assistants**
 - C. Pennsylvania Staff Physician Assistants**
 - D. Pennsylvania Society for Physician Assistants**

- 3. How many questions are on the PANRE exam?**
 - A. 150**
 - B. 240**
 - C. 300**
 - D. 360**

- 4. Who can develop resilience?**
 - A. Only some people**
 - B. Anyone and everyone**
 - C. Only professionals in mental health**
 - D. Only those with high grit**

- 5. Which statement is false regarding credentialing and privileging?**
 - A. Credentialing verifies qualifications.**
 - B. Privileging grants the PA specific clinical responsibilities.**
 - C. Credentialing is typically completed at graduation.**
 - D. Privileging defines the scope of clinical privileges within a facility.**

- 6. Which description best matches a very restrictive PA license with direct supervision and limited prescribing?**
- A. Full Independent Practice License**
 - B. Temporary License With Direct Supervision**
 - C. Provisional License for Telemedicine Only**
 - D. Biennial Renewal License**
- 7. Which term describes the tendency to negatively evaluate the worth of one's work?**
- A. Emotional Exhaustion**
 - B. Low Sense Of Accomplishment**
 - C. Depersonalization**
 - D. Wellness**
- 8. What was OTP originally known as?**
- A. Full Practice Authority & Responsibility (FPAR)**
 - B. Optimal Team Practice**
 - C. Modern PA Practice Act**
 - D. Autonomy of Practice**
- 9. End of Rotation (EOR) exams are administered by which organization?**
- A. NCCPA**
 - B. ARC-PA**
 - C. AAPA**
 - D. PAEA**
- 10. Which of the following is NOT a determinant of the PA scope of practice for the profession?**
- A. Reimbursement policies**
 - B. PA education, experience, and preference**
 - C. Physician delegation**
 - D. Facility credentialing & privileging**

Answers

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

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Explanations

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1. What is the typical supervisory relationship for PAs in clinical practice?

- A. PAs practice under physician supervision and collaborate with the healthcare team**
- B. PAs work entirely independently with no supervision**
- C. PAs require surgeon-only supervision**
- D. PAs cannot supervise midlevel staff**

Physician assistants operate within a physician-led, team-based model, working under physician supervision while collaborating closely with the rest of the healthcare team. This structure allows PAs to perform a wide range of medical duties—taking histories and conducting physical exams, diagnosing and treating illnesses, ordering and interpreting tests, prescribing medications where allowed, and assisting in procedures—within the oversight and guidance of a physician. The exact level of autonomy can vary by state and setting, but the care framework remains physician-supervised and team-oriented. Independence with no supervision isn't typical because patient safety and care quality rely on physician oversight and collaboration. The idea of surgeon-only supervision doesn't fit the general practice, since PAs work across many specialties beyond surgery. The notion that PAs cannot supervise midlevel staff isn't accurate in all contexts; while their primary role is physician-supervised, they may supervise certain support staff under the physician-led team, depending on the setting.

2. PSPA stands for which organization?

- A. Pennsylvania Society of Public Assistants**
- B. Pennsylvania Society of Physician Assistants**
- C. Pennsylvania Staff Physician Assistants**
- D. Pennsylvania Society for Physician Assistants**

PSPA stands for the Pennsylvania Society of Physician Assistants. The acronym matches the exact words in the organization's standard name: Pennsylvania, Society, Physician, Assistants. This is the state professional group for PAs and the Pennsylvania affiliate of the American Academy of Physician Assistants. The other options use different terms that aren't part of the recognized title, such as "Public" or "Staff," or swap "of" for "for," which isn't the official naming.

3. How many questions are on the PANRE exam?

- A. 150**
- B. 240**
- C. 300**
- D. 360**

The PANRE is designed to assess a practicing PA's ability to apply medical knowledge across common clinical situations in real-world care. The exam uses 240 questions, a standard format chosen to balance broad content coverage with a reasonable testing duration for busy clinicians. Having 240 items allows the test to sample a wide range of topics and decision-making skills without making the exam excessively long. This format distinction helps explain why the PANRE number is 240 rather than other counts.

4. Who can develop resilience?

- A. Only some people
- B. Anyone and everyone**
- C. Only professionals in mental health
- D. Only those with high grit

Resilience is something people can grow through experience and deliberate practice. It isn't a fixed trait limited to a select group. With effort and support, most individuals can strengthen how they cope with stress, rebound from setbacks, and adapt to new challenges. Practical ways to build resilience include nurturing social connections, sharpening problem-solving skills, reframing difficulties as learning opportunities, and taking care of sleep, exercise, and stress management. Because resilience can be developed by people from all backgrounds, anyone and everyone is capable of building it. It isn't limited to mental health professionals or to those with high grit, though grit can help; resilience is about adaptive coping and bouncing back, not just persevering toward a goal.

5. Which statement is false regarding credentialing and privileging?

- A. Credentialing verifies qualifications.
- B. Privileging grants the PA specific clinical responsibilities.
- C. Credentialing is typically completed at graduation.**
- D. Privileging defines the scope of clinical privileges within a facility.

Understanding how credentialing and privileging work in healthcare helps explain why that statement is false. Credentialing is the verification process that confirms a clinician's qualifications—education, training, licensure, board certification, and any required certifications—along with background checks. This verification is typically performed after graduation, once the individual has obtained licensure and is applying to practice at a specific organization. It is not completed automatically at graduation and is periodically reaffirmed through recredentialing. Privileging is the facility-level process that grants the clinician authority to perform certain clinical responsibilities, based on demonstrated competence, training, and experience. It sets the scope of what the clinician can do within that facility. Therefore, credentialing is not completed at graduation; it occurs after graduation and licensure and is part of ongoing verification, while privileging determines the exact clinical privileges within a particular practice setting.

6. Which description best matches a very restrictive PA license with direct supervision and limited prescribing?

- A. Full Independent Practice License**
- B. Temporary License With Direct Supervision**
- C. Provisional License for Telemedicine Only**
- D. Biennial Renewal License**

The key idea is how supervision and prescribing authority define how restricted a PA's practice is. A very restrictive license means the PA must work under direct physician oversight and has limited ability to prescribe. Direct supervision requires a physician to be physically present or readily available to oversee every step of the PA's work, and the prescribing rights are narrowed to a small scope. The description that fits this is a temporary license with direct supervision, because it signals both a limited, time-bound status and a high level of oversight with restricted prescribing. In contrast, a full independent practice license would allow autonomous practice and broader prescribing; a provisional license for telemedicine only places limits on the setting but not necessarily the same explicit direct supervision and prescribing restrictions; a biennial renewal license is about how often the license is renewed, not the level of supervision or prescribing authority.

7. Which term describes the tendency to negatively evaluate the worth of one's work?

- A. Emotional Exhaustion**
- B. Low Sense Of Accomplishment**
- C. Depersonalization**
- D. Wellness**

This item focuses on burnout's dimension that measures how you judge the value and impact of your own work. When someone tends to negatively evaluate the worth of what they do, they experience a reduced sense of personal accomplishment—sometimes described as a low sense of accomplishment. It means feeling ineffective, as if your efforts don't lead to meaningful outcomes or progress, even if you're putting in effort. This differs from emotional exhaustion, which is about feeling emotionally drained, and from depersonalization, which is a detached or cynical attitude toward the people you serve. So the term that best fits the idea of judging your own work as undervalued or unproductive is reduced personal accomplishment.

8. What was OTP originally known as?

- A. Full Practice Authority & Responsibility (FPAR)**
- B. Optimal Team Practice**
- C. Modern PA Practice Act**
- D. Autonomy of Practice**

Optimal Team Practice is the current framework that emphasizes teamwork and interprofessional collaboration in PA practice. Historically, this initiative was called Full Practice Authority & Responsibility, capturing the push for PAs to have full authority to practice to the top of their training while assuming responsibility for patient care within the supervising or collaborative framework required by state law. Over time, the terminology shifted to highlight the team-based nature of modern practice, hence Optimal Team Practice. The other options don't reflect the historical naming of the initiative.

9. End of Rotation (EOR) exams are administered by which organization?

- A. NCCPA**
- B. ARC-PA**
- C. AAPA**
- D. PAEA**

End of Rotation exams are administered by the Physician Assistant Education Association. These standardized tests are used across PA programs to assess a student's knowledge and clinical reasoning after completing each rotation, providing a consistent measure of progress. The other organizations play different roles: NCCPA handles the national certifying exam for licensure after graduation, ARC-PA accredits PA programs, and AAPA is the professional association for PAs.

10. Which of the following is NOT a determinant of the PA scope of practice for the profession?

- A. Reimbursement policies**
- B. PA education, experience, and preference**
- C. Physician delegation**
- D. Facility credentialing & privileging**

Facility credentialing and privileging governs what a PA can do in a specific workplace, but it doesn't define what the PA profession as a whole is allowed to do. The scope of practice for PAs is shaped more by state practice acts and supervision rules, how services are reimbursed by payers, and the PA's own education, experience, and the supervising physician's delegation. Credentialing is important for what you're permitted to perform in a given facility, yet it varies by institution and setting and thus is not a determinant of the profession's overall scope.

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://introtopaprofession1.examzify.com>

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

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