

IVY TECH CNA PROGRAM EXAM 3 PRACTICE (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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THE FULL VERSION STUDY GUIDE

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Table of Contents

Copyright	1
Table of Contents	2
Introduction	3
How to Use This Guide	4
Questions	5
Answers	8
Explanations	10
Next Steps	15

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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 steps help feed a resident with dysphagia to reduce aspiration risk?

- A. Position resident upright 45-90 degrees, offer small bites, allow to chew and swallow before continuing, use chin-tuck if advised, monitor for coughing, document intake.
- B. Feed rapidly without breaks.
- C. Feed while resident is lying flat.
- D. Skip supervision.

2. What should you include when documenting changes in a resident's skin or wounds?

- A. Date, time, location and stage, and nurse notification.
- B. Only the time
- C. Only the location
- D. Not necessary

3. Cognitive Impairment

- A. Inability to think, concentrate, reason, or remember clearly
- B. Ability to learn quickly
- C. Normal cognitive function
- D. Short-term memory loss only

4. Which practice describes proper handling of a resident's personal items to respect privacy and safety?

- A. Keep items organized, within reach, labeled, and respect privacy; knock before entering.
- B. Hide items to prevent loss.
- C. Move items out of the room for safekeeping without consent.
- D. Allow others to handle items.

5. Output greater than intake leads to which condition?

- A. Overhydration
- B. Edema
- C. Weight gain
- D. Dehydration

- 6. How should you apply a gait belt before a transfer?**
- A. Around the chest.
 - B. Around the waist over clothing, buckle securely, ensure it's snug but not restricting, center it, and leave enough space to fit a finger between belt and resident.
 - C. Tight around neck.
 - D. On the resident's arm.
- 7. Sundowning typically presents as...**
- A. Evening hours with improvement in daytime
 - B. Morning hours with deterioration at night
 - C. Afternoon hours
 - D. Night hours with improvement in daytime
- 8. Which steps should you take if a resident faints while standing?**
- A. Stand and wait for it to pass.
 - B. Move them to chair and leave.
 - C. Immediately start CPR.
 - D. Help them to floor or a seated position, call for assistance, check breathing and pulse, and stay with them.
- 9. What is the purpose of providing adequate time during meals for residents with limited hand function?**
- A. To reduce stress
 - B. To ensure safety
 - C. To allow adequate chewing and swallowing and prevent choking
 - D. To prolong meals
- 10. What steps help prevent falls when assisting a resident to transfer to a bed or chair?**
- A. Use a gait belt, lock wheels, clear the path, and have support ready; ensure proper technique
 - B. Stand back and watch
 - C. Move quickly without assistance
 - D. Let the resident do all transfers

Answers

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

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Explanations

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1. Which steps help feed a resident with dysphagia to reduce aspiration risk?

- A. Position resident upright 45-90 degrees, offer small bites, allow to chew and swallow before continuing, use chin-tuck if advised, monitor for coughing, document intake.
- B. Feed rapidly without breaks.
- C. Feed while resident is lying flat.
- D. Skip supervision.

The key idea is reducing aspiration risk during feeding for someone with dysphagia by combining safe positioning, careful pacing, airway protection, and careful monitoring. Positioning upright at about a 45- to 90-degree angle uses gravity to help the swallow go down toward the stomach rather than toward the airway, which lowers the chance of food or liquid entering the lungs. Offering small bites paired with allowing time to chew and completely swallow before giving more helps the swallowing mechanism work step by step and prevents residue from pooling in the throat. The chin-tuck maneuver, if advised by a clinician, adds a protective effect by narrowing the airway entrance during swallowing, helping prevent material from slipping into the airway. Monitoring for coughing or other signs of distress during feeding acts as a crucial safety check—if trouble is noticed, you pause feeding and assess. Finally, documenting intake records how much was eaten, which supports ongoing assessment and care planning. Feeding rapidly while the resident is lying flat or skipping supervision increases the risk of aspiration and is unsafe, which is why those practices are not appropriate.

2. What should you include when documenting changes in a resident's skin or wounds?

- A. Date, time, location and stage, and nurse notification.
- B. Only the time
- C. Only the location
- D. Not necessary

When documenting changes in a resident's skin or wounds, the key idea is to provide a clear, time-stamped snapshot that others can use to track progress and adjust care. Include the date and time of the observation so there's a precise timeline of what happened and when. Note the location of the wound so it's clear which area on the body is being described, especially if there are multiple wounds. Record the stage of the wound to convey its severity and what kind of treatment might be needed. And importantly, notify the nurse so the care plan can be reviewed and updated if necessary. Putting all that together ensures the documentation is complete and useable: you can see how the wound is evolving over time, know exactly where it is, understand how serious it is, and prompt the licensed staff to respond. Documenting only one element—like just the time or just the location—doesn't give a full picture and can miss changes that require action. Not documenting at all would risk missed deterioration and gaps in care.

3. Cognitive Impairment

A. Inability to think, concentrate, reason, or remember clearly

B. Ability to learn quickly

C. Normal cognitive function

D. Short-term memory loss only

Cognitive impairment means a decline in mental processes that affects how a person thinks, concentrates, remembers, and solves problems. The statement that best fits this is the inability to think, concentrate, reason, or remember clearly, because it shows problems across several cognitive domains rather than just a single skill. In nursing assistant practice, recognizing this breadth matters: it can impact how a patient understands and follows care plans, communicates, and stays safe. The other options describe either normal functioning, an ability that would not indicate impairment, or a too-narrow view of impairment (memory loss only), which doesn't capture the broader impact on thinking and processing.

4. Which practice describes proper handling of a resident's personal items to respect privacy and safety?

A. Keep items organized, within reach, labeled, and respect privacy; knock before entering.

B. Hide items to prevent loss.

C. Move items out of the room for safekeeping without consent.

D. Allow others to handle items.

Respecting privacy and safety means handling a resident's personal items in a way that keeps them secure, organized, and accessible, while preserving the resident's dignity. Keeping items organized, within reach, and labeled helps prevent loss and mix-ups, so belongings stay with the right person and can be found quickly. Labeling also supports autonomy by making it clear which items belong to whom. Keeping items within the resident's reach supports independence and safety, allowing use of familiar belongings without unnecessary handling by others. Knocking before entering protects privacy and prevents exposing private items without consent. Hiding items, moving them out of the room without consent, or letting others handle them undermine privacy and the resident's sense of control, and can create safety risks or lead to loss or damage.

5. Output greater than intake leads to which condition?

A. Overhydration

B. Edema

C. Weight gain

D. Dehydration

Fluid balance hinges on how much you take in versus how much you lose. When output exceeds intake, the body loses more water than it gains, leading to dehydration. The body's total fluid decreases and the blood becomes more concentrated, causing thirst, dry mouth, dry skin, reduced urine, and, if severe, dizziness or rapid heart rate. Other terms describe different situations: overhydration comes from too much intake or too little loss, edema is fluid buildup in tissues, and weight gain can happen with fluid retention but isn't the direct result of more output than intake. So, output greater than intake leads to dehydration.

6. How should you apply a gait belt before a transfer?

- A. Around the chest.
- B. Around the waist over clothing, buckle securely, ensure it's snug but not restricting, center it, and leave enough space to fit a finger between belt and resident.**
- C. Tight around neck.
- D. On the resident's arm.

The main idea here is how to use a gait belt to support a safe transfer. The best approach is to place the gait belt around the resident's waist at midline, over clothing, and buckle it securely. It should be snug but not restricting, and you should center it so it sits evenly. There should be enough space to fit one finger between the belt and the resident. This setup gives you a solid, midline grip that helps you control the resident's center of gravity during the transfer, reducing the risk of falls and back strain for you. Wearing the belt over clothing protects the skin and makes the grip stable, and keeping it centered prevents twisting or slipping as you assist. A belt around the chest, around the neck, or on the arm would create unsafe grip, restrict breathing or circulation, or fail to provide the proper support for a transfer.

7. Sundowning typically presents as...

- A. Evening hours with improvement in daytime**
- B. Morning hours with deterioration at night
- C. Afternoon hours
- D. Night hours with improvement in daytime

Sundowning is when a person with dementia becomes more confused, agitated, or disoriented as daylight fades, typically in the late afternoon to evening, and then feels better during the daytime. This pattern fits best because the symptoms rise as evening sets in and lessen with daytime activity and light. Factors like fatigue, decreased lighting, and disrupted routines can contribute to this late-day surge in symptoms. The other patterns describe morning deterioration, afternoon-only changes, or night-time issues with daytime improvement, which do not match the characteristic late-day escalation of sundowning.

8. Which steps should you take if a resident faints while standing?

- A. Stand and wait for it to pass.
- B. Move them to chair and leave.
- C. Immediately start CPR.
- D. Help them to floor or a seated position, call for assistance, check breathing and pulse, and stay with them.**

When someone faints, the first priority is safety and preserving blood flow to the brain. Lower them to the floor or help them sit in a safe chair to reduce the risk of injury from a fall and to help restore circulation. Then call for assistance so more help and monitoring are available. Check whether they're breathing and have a pulse. Stay with them to monitor their condition and provide reassurance. If they're breathing and have a pulse, keep them in a safe position and watch until help arrives. If there is no breathing or no pulse, begin CPR immediately. Do not leave them standing or try to "ride it out." After they recover, assess for possible causes and arrange medical follow-up if symptoms recur.

9. What is the purpose of providing adequate time during meals for residents with limited hand function?

- A. To reduce stress
- B. To ensure safety
- C. To allow adequate chewing and swallowing and prevent choking**
- D. To prolong meals

Providing adequate time during meals for residents with limited hand function centers on ensuring safe swallowing through proper chewing. When hand function is limited, feeding often requires more careful manipulation of food, slower pacing, and the opportunity to take smaller bites. If meals are rushed, food may not be chewed enough or swallowed smoothly, increasing the risk of choking or aspiration. Giving extra time lets the resident chew thoroughly, form a cohesive bolus, and swallow safely, while also allowing the caregiver to monitor for any signs of difficulty and offer help as needed. While reducing stress and overall safety are important considerations, the primary purpose of extra time is to prevent choking by enabling adequate chewing and swallowing. Prolonging meals isn't the goal, as a comfortable, steady pace supports safety without unnecessary delay.

10. What steps help prevent falls when assisting a resident to transfer to a bed or chair?

- A. Use a gait belt, lock wheels, clear the path, and have support ready; ensure proper technique
- B. Stand back and watch
- C. Move quickly without assistance**
- D. Let the resident do all transfers

Preventing falls during a transfer comes from preparation, a secure hold, and proper body mechanics. Start by setting up the environment: lock the wheels on the bed and on the chair, clear the path, and have a gait belt and any needed assistive devices ready. Place the gait belt around the resident's waist so you can control the movement without pulling on the arms, and maintain contact so you can steady them as they shift weight. Stand close with a stable base—feet hip-width apart, knees bent—and keep your back in a neutral position as you guide the resident through the transfer. Move smoothly and level to the surface, guiding their hips and upper body rather than pulling on the shoulders or twisting the spine. If more support is necessary, use the appropriate transfer device and get help from another team member rather than attempting the move solo. After the transfer, ensure the resident's feet are supported on the surface, the brakes are locked, and everything is within reach for safety. Avoiding actions like standing back and watching, moving quickly without assistance, or letting the resident do all the transfer responsibilities helps reduce fall risk and protect the resident.

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://ivytechnaprogram3.examzify.com>

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

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