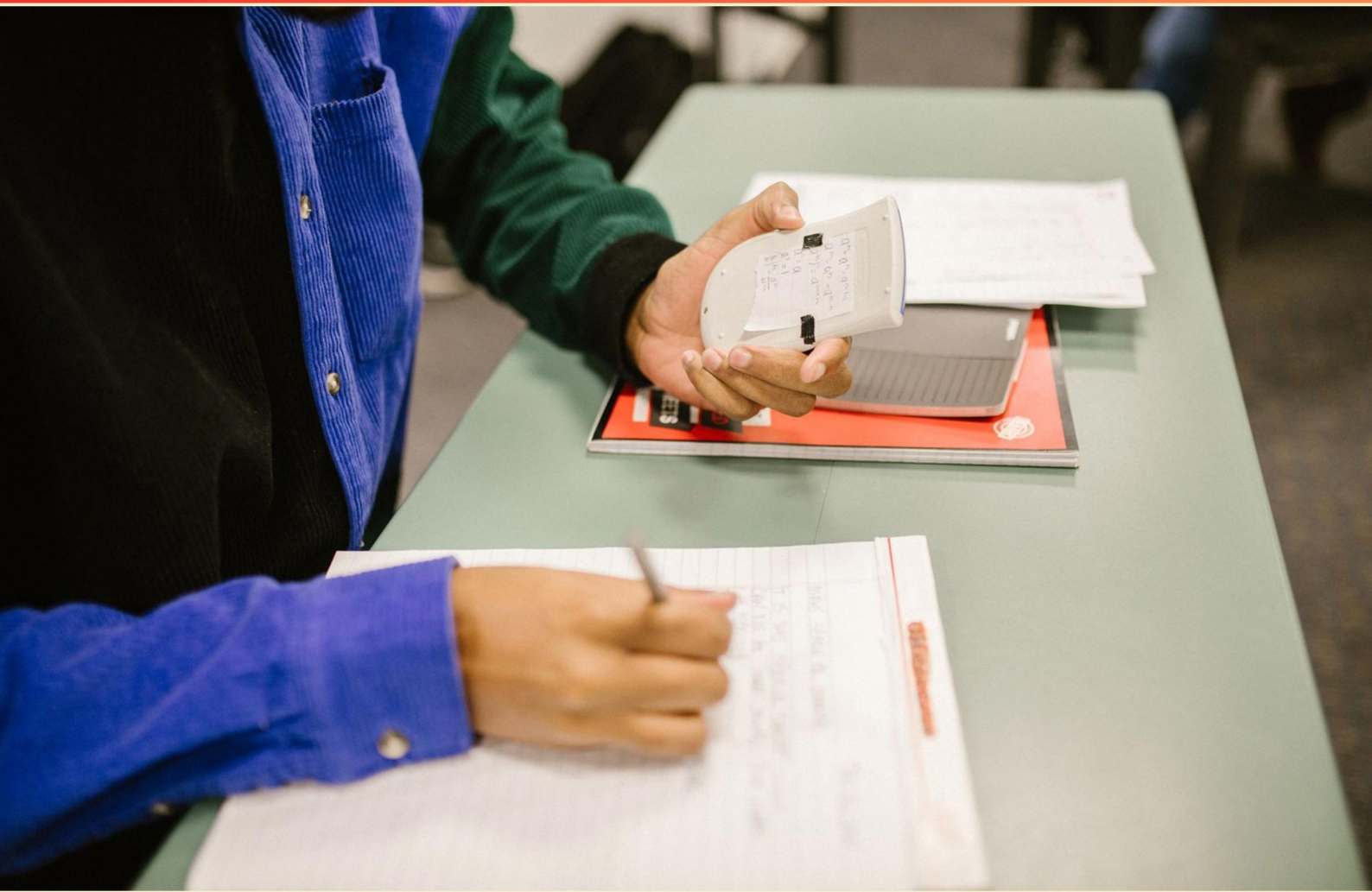


KAPLAN FOUNDATION B PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR
THE FULL VERSION STUDY GUIDE

<https://kaplanfoundationb.examzify.com>



Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.

ALL RIGHTS RESERVED.

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain accurate, complete, and timely information about this product from reliable sources.

SAMPLE

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

SAMPLE

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

SAMPLE

- 1. Which statement about professional communication is true?**
 - A. Therapeutic communication techniques include open-ended questions and active listening.
 - B. Nontherapeutic communication includes always validating feelings.
 - C. Confidentiality is not necessary with adult patients.
 - D. Personal relationships with patients are encouraged.
- 2. When stopping an enema, which condition indicates you should stop?**
 - A. The patient has pain, bleeding, or resistance is met.
 - B. The patient reports relief after the enema.
 - C. The patient experiences mild cramping.
 - D. The patient is thirsty.
- 3. Concerning unconscious oral care, what positioning and technique are recommended?**
 - A. Position patient on the back and avoid suction
 - B. Keep patient flat and avoid suction
 - C. Position patient on the side and use suction as needed
 - D. Turn patient to the side and apply suction continuously
- 4. Which statement correctly distinguishes theoretical probability from experimental probability?**
 - A. Theoretical probability is based on observed outcomes; experimental probability is based on possible outcomes
 - B. Theoretical probability is based on possible outcomes; experimental probability is based on observed outcomes
 - C. Theoretical probability uses historical data; experimental uses guesses
 - D. Theoretical probability uses samples; experimental uses population
- 5. A car travels 300 miles in 4 hours. What is its average speed?**
 - A. 60 mph
 - B. 70 mph
 - C. 75 mph
 - D. 80 mph

- 6. In reading strategies, what is skimming best used for?**
- A. Getting the general sense of a passage and locating where information is mentioned
 - B. Understanding every detail in depth
 - C. Memorizing exact numbers
 - D. Skimming is not useful in science passages
- 7. In a standard abdominal assessment, which step is performed first?**
- A. Inspect
 - B. Auscultate
 - C. Percuss
 - D. Palpate
- 8. Which description best captures the core characteristics of good healthcare documentation?**
- A. Biased opinions
 - B. Inaccurate dates
 - C. Timely, accurate, objective, complete, and factual
 - D. Vague and incomplete statements
- 9. What does 'supporting detail' refer to in a reading passage?**
- A. Evidence, examples, or explanations that reinforce the main idea.
 - B. The appendix of the book.
 - C. The author's biography.
 - D. The main hypothesis.
- 10. Which combination describes signs of phlebitis?**
- A. Redness, warmth, tenderness, and a palpable cord along the vein.
 - B. Swelling of joints.
 - C. Fever only.
 - D. Bruising at site.

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. Which statement about professional communication is true?

- A. Therapeutic communication techniques include open-ended questions and active listening.**
- B. Nontherapeutic communication includes always validating feelings.
- C. Confidentiality is not necessary with adult patients.
- D. Personal relationships with patients are encouraged.

Therapeutic communication relies on inviting the patient to share thoughts and concerns and showing you are truly listening. Open-ended questions let patients express themselves in detail, rather than replying with yes-or-no answers. Active listening involves giving full attention, reflecting back what the patient says, and summarizing to confirm understanding, which helps build trust and uncover important information. These elements support patient-centered care and effective information gathering. The other statements misrepresent professional communication: validating feelings is a therapeutic technique, not something that makes communication nontherapeutic; confidentiality is required with adult patients; and professional relationships with patients should be kept strictly professional to maintain appropriate boundaries.

2. When stopping an enema, which condition indicates you should stop?

- A. The patient has pain, bleeding, or resistance is met.**
- B. The patient reports relief after the enema.
- C. The patient experiences mild cramping.
- D. The patient is thirsty.

Stopping an enema safely hinges on recognizing signals that something isn't right. If the patient experiences pain, there is bleeding, or you encounter resistance during the procedure, you stop immediately. These signs point to possible tissue injury, a perforation risk, or an obstruction, and continuing could cause serious harm. Mild cramping can occur as the colon fills and is generally tolerable, so it isn't by itself a reason to stop. Being thirsty isn't a relevant safety signal for halting the enema. If red flags appear, pause the procedure, assess the situation, check the equipment and patient position, and seek guidance as needed to ensure safety before deciding how to proceed.

3. Concerning unconscious oral care, what positioning and technique are recommended?

- A. Position patient on the back and avoid suction
- B. Keep patient flat and avoid suction
- C. Position patient on the side and use suction as needed**
- D. Turn patient to the side and apply suction continuously

Unconscious patients can't protect their airway, so oral care must promote drainage away from the airway and be able to clear secretions. Positioning the patient on their side allows saliva and secretions to drain rather than pool in the throat, reducing aspiration risk. Use suction as needed to remove secretions and debris during the care process; this helps keep the mouth clean without causing trauma from continuous suction. Leaving the patient flat and avoiding suction increases the chance that secretions will collect and enter the airway, which is why that approach is not recommended.

4. Which statement correctly distinguishes theoretical probability from experimental probability?

- A. Theoretical probability is based on observed outcomes; experimental probability is based on possible outcomes
- B. Theoretical probability is based on possible outcomes; experimental probability is based on observed outcomes**
- C. Theoretical probability uses historical data; experimental uses guesses
- D. Theoretical probability uses samples; experimental uses population

The main idea is how the probability is determined. Theoretical probability uses the setup of the experiment to figure out how likely each outcome is, based on counting the possible outcomes in the model. It's a calculation about what could happen in an ideal sense, not what has actually happened when you test it. For a fair six-sided die, the theoretical probability of rolling a 4 is $1/6$ because there is one favorable outcome out of six equally likely outcomes. This comes from the imagined sample space of all possible results. Experimental probability, on the other hand, comes from actual trials. You roll the die many times, record how often a 4 occurs, and compute the ratio of successes to total trials. If you roll 60 times and get a 4 six times, the experimental probability is $6/60 = 1/10$. This can differ from the theoretical $1/6$, but with more trials it tends to get closer to it (the Law of Large Numbers). So the statement that theoretical probability is based on possible outcomes and experimental probability is based on observed outcomes captures this essential distinction.

5. A car travels 300 miles in 4 hours. What is its average speed?

- A. 60 mph
- B. 70 mph
- C. 75 mph**
- D. 80 mph

Average speed is total distance divided by total time. The car travels 300 miles in 4 hours, so $300 \div 4 = 75$ miles per hour. This is the speed that matches the given distance and time. If it had been 60 mph, you'd get 240 miles in 4 hours; 70 mph would yield 280 miles; 80 mph would give 320 miles. Only 75 mph aligns with 300 miles in 4 hours.

6. In reading strategies, what is skimming best used for?

- A. Getting the general sense of a passage and locating where information is mentioned**
- B. Understanding every detail in depth
- C. Memorizing exact numbers
- D. Skimming is not useful in science passages

Skimming is a fast preview strategy that emphasizes breadth over detail. The main goal is to grasp the general sense of a passage and quickly locate where information is discussed. By not reading every word, you can map the structure, identify the main ideas, and jump to the sections that matter for your task. This makes it the best way to get a quick overview and to find where specific topics or data are mentioned, without getting bogged down in details. It's not about understanding every point in depth or memorizing exact numbers, which require close, careful reading. In science passages, skimming helps you spot where the hypothesis, methods, results, and conclusions appear so you know where to focus your attention for closer study if needed.

7. In a standard abdominal assessment, which step is performed first?

- A. Inspect**
- B. Auscultate
- C. Percuss
- D. Palpate

The step being tested is the order of the abdominal exam, and you begin with inspection. Visually examining the abdomen first lets you assess contour, symmetry, distension, skin changes, scars, hernias, and visible pulsations without disturbing the underlying physiology. This initial look helps identify urgent or obvious issues and sets a baseline for what you'll observe or measure with touch. Why this order matters: touching the abdomen before you inspect can alter findings. Palpation or percussion may provoke guarding, tenderness, or changes in bowel sounds, which would confound later observations. After inspecting, you would listen for bowel noises and vascular sounds (auscultation), then percuss, and finally palpate to assess tenderness and masses.

8. Which description best captures the core characteristics of good healthcare documentation?

- A. Biased opinions
- B. Inaccurate dates
- C. Timely, accurate, objective, complete, and factual**
- D. Vague and incomplete statements

The main idea here is that good healthcare documentation must be practical, reliable, and complete for patient care. When records are kept promptly, they reflect what's happening in real time so the care team can make informed decisions and respond quickly to changes. Accuracy matters because correct dates, dosages, tests, and results prevent mistakes that could harm a patient or lead to wrong treatments. Objectivity keeps the record free from personal opinions or guesses, showing exactly what was observed and done. Completeness ensures no critical detail is left out, so anyone reviewing the chart understands the full clinical picture and plans. Factual content means statements can be verified by data or direct observations rather than assumptions. If a record is biased, dates are wrong, or statements are vague and incomplete, it becomes harder to trust the documentation, creates safety risks, and can cause miscommunication across the care team. This description—timely, accurate, objective, complete, and factual—best captures the qualities that make healthcare documentation trustworthy and useful.

9. What does 'supporting detail' refer to in a reading passage?

- A. Evidence, examples, or explanations that reinforce the main idea.**
- B. The appendix of the book.
- C. The author's biography.
- D. The main hypothesis.

Supporting details are the evidence, examples, or explanations that reinforce the main idea. In a passage, the author lays out a central point and then adds concrete specifics—statistics, anecdotes, quotes, definitions, steps, descriptions, or reasons—that make that point clearer and more convincing. These details show how the main idea works in real situations or why it matters, helping you understand or accept the argument. The other options describe things that aren't about supporting the main idea: an appendix is extra material at the end of a book, the author's biography is background about who wrote it, and a main hypothesis is a proposed explanation often found in scientific research rather than a general feature of how a passage develops its point. So the correct understanding is that supporting details are the concrete elements that back up the central point.

10. Which combination describes signs of phlebitis?

- A. Redness, warmth, tenderness, and a palpable cord along the vein.**
- B. Swelling of joints.
- C. Fever only.
- D. Bruising at site.

Phlebitis is inflammation of a vein, usually a superficial one, and its classic local signs reflect that inflammatory process along the vein. The most diagnostic combination includes redness (erythema) and warmth over the affected area, tenderness when the area is touched, and a cord-like, palpable vein indicating induration and potential thrombophlebitis. Together, these findings point to inflammation of the vein itself and a venous abnormality along its course. Other choices don't fit because swelling of joints suggests arthritis, fever alone is too nonspecific and not localized to a vein, and bruising at the site indicates trauma or a hematoma rather than vein inflammation.

SAMPLE

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://kaplanfoundationb.examzify.com>

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

SAMPLE