

KENTUCKY CERTIFIED NURSE AIDE (CNA) PRACTICE TEST (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. Which barrier arises when conversations are limited to yes/no questions?**
 - A. Slang and clichés
 - B. Foreign language
 - C. Yes/no questions only
 - D. Nonverbal communication

- 2. Bed rails are used as fall prevention when indicated by policy and assessment. True or false?**
 - A. Bed rails should never be used.
 - B. Bed rails are always required for every resident.
 - C. Bed rails are decorative.
 - D. Bed rails are used as fall prevention when indicated by policy and assessment.

- 3. Which task is a nursing assistant not allowed to perform?**
 - A. Insert or remove tubes
 - B. Bathe residents
 - C. Assist with activities of daily living
 - D. Take vital signs

- 4. What is the minimum number of in-service education hours a nursing assistant must earn each year?**
 - A. 24
 - B. 6
 - C. 12
 - D. 40

- 5. Which form of abuse involves emotional harm through threats or intimidation, such as humiliating or isolating a person?**
 - A. Verbal abuse
 - B. Domestic violence
 - C. Physical abuse
 - D. Psychological abuse

- 6. Which strategy helps prevent falls in a long-term care setting?**
- A. Keep pathways clear.
 - B. Ensure pathways are well lit with decorative carpeting.
 - C. Have residents walk without shoes.
 - D. Discontinue use of call lights.
- 7. What are key body mechanics tips for lifting or transferring a resident to minimize caregiver injury?**
- A. Bend at hips and knees, keep back straight, hold the resident close, avoid twisting, use leg muscles, ask for help, take multiple small steps.
 - B. Bend at waist; twist; lift with back
 - C. Keep back arched; use arms only
 - D. Stand far and push
- 8. Where should the drainage bag be kept to reduce infection risk?**
- A. Above bladder level
 - B. At bladder level
 - C. Below bladder level
 - D. Secure to the bed frame
- 9. What is the first standard action before beginning a full bed bath?**
- A. Knock before entering the room.
 - B. Raise bed rails.
 - C. Fill bath basin 2/3 full of warm water.
 - D. Lower bed rail and position resident supine.
- 10. During hand hygiene, what is the minimum recommended duration for scrubbing all surfaces?**
- A. 5 seconds
 - B. 10 seconds
 - C. 20 seconds
 - D. 60 seconds

Answers

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

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Explanations

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1. Which barrier arises when conversations are limited to yes/no questions?

- A. Slang and clichés
- B. Foreign language
- C. Yes/no questions only**
- D. Nonverbal communication

Limiting conversations to yes or no questions creates a barrier by restricting how much a person can share and explain. When you rely only on binary answers, you miss details, context, and feelings that matter for understanding needs, symptoms, and preferences. Open-ended questions invite residents to describe their pain, concerns, routines, and goals in their own words, which helps you assess safely and build trust. As a result, important information can be overlooked, misunderstandings can occur, and the interaction becomes less collaborative. Other issues like slang or foreign language barriers or the presence of nonverbal cues can complicate communication, but the specific barrier described here comes from asking only yes/no questions, which blocks fuller, more meaningful dialogue.

2. Bed rails are used as fall prevention when indicated by policy and assessment. True or false?

- A. Bed rails should never be used.
- B. Bed rails are always required for every resident.
- C. Bed rails are decorative.
- D. Bed rails are used as fall prevention when indicated by policy and assessment.**

Bed rails are used for fall prevention only when a risk assessment supports their use and the facility's policy allows it. When a resident is at risk for falling due to confusion, mobility issues, or recent medication changes, rails can help keep them from rolling out of bed. The decision should come from the care plan after weighing benefits against risks, and rails must be implemented safely—lowered to an appropriate height, with the appropriate number of rails, and with ongoing monitoring for entrapment or skin irritation. It's also important to keep the call bell within reach and to reassess the need regularly, adjusting the approach if the resident's condition or safety needs change. They are not decorative, not automatically required for every resident, and not something used without assessment and policy.

3. Which task is a nursing assistant not allowed to perform?

- A. Insert or remove tubes**
- B. Bathe residents
- C. Assist with activities of daily living
- D. Take vital signs

Understanding what CNAs can do helps keep resident safety first. Inserting or removing tubes is not a task a nursing assistant is allowed to perform. Handling tubes involves invasive procedures and device management that require a licensed nurse to assess, supervise, and carry out. This protects residents from potential injuries, infections, or complications that can arise from manipulating tubes. By contrast, bathing residents, helping with activities of daily living, and taking vital signs are activities CNAs typically perform as part of daily care and monitoring, as long as they follow facility policies and work under supervision. They observe and report any changes to the nurse, who then provides further care or orders.

4. What is the minimum number of in-service education hours a nursing assistant must earn each year?

- A. 24
- B. 6
- C. 12**
- D. 40

Regular in-service education keeps CNAs up to date with safe resident care and current practices. In Kentucky, a nursing assistant must earn a minimum of twelve in-service hours each year to keep the certification active. This yearly requirement helps ensure ongoing knowledge on topics like infection control, safe transfer techniques, resident rights, and recognizing changes in residents' conditions. Over a two-year renewal cycle, that amounts to at least twenty-four hours. Hours can come from the facility's in-service programs, approved outside courses, or online options, and they must be documented according to state rules.

5. Which form of abuse involves emotional harm through threats or intimidation, such as humiliating or isolating a person?

- A. Verbal abuse
- B. Domestic violence
- C. Physical abuse
- D. Psychological abuse**

Psychological abuse is about harming someone's emotional well-being through threats, intimidation, and manipulation. When a caregiver or someone else humiliates, isolates, or controls a person, it erodes the person's self-esteem and sense of safety, even though no physical injury occurs. This form of abuse focuses on mental and emotional harm—patterns of behavior that frighten, demean, or isolate the resident over time. Verbal abuse involves harmful words, but the essential element here is the ongoing emotional manipulation and threats that affect how the person feels and thinks. Physical abuse targets the body, and domestic violence is a broader term for abuse within intimate relationships that can include psychological abuse, but the described behavior is best identified as psychological abuse because the harm is emotional rather than physical.

6. Which strategy helps prevent falls in a long-term care setting?

- A. Keep pathways clear.**
- B. Ensure pathways are well lit with decorative carpeting.
- C. Have residents walk without shoes.
- D. Discontinue use of call lights.

Keeping walking paths clear and free of obstacles is essential to preventing falls in a long-term care setting. When hallways and resident areas are cluttered with furniture, equipment, cords, or spills, the risk of tripping or slipping increases significantly. Clear, unobstructed pathways allow residents to move safely and let staff assist as needed without navigating around hazards. While good lighting helps visibility, decorative carpeting can create uneven surfaces or loose edges that become trip hazards, so it's not the best safety approach for paths. Walking without shoes removes protective footwear and raises the chance of stepping on something hazardous or losing footing, which is why appropriate footwear is recommended. Discontinuing call lights would prevent residents from getting help promptly when they feel unsteady, increasing fall risk. So, the best strategy is to keep pathways clear to minimize obstacles and support safe mobility.

7. What are key body mechanics tips for lifting or transferring a resident to minimize caregiver injury?

- A. Bend at hips and knees, keep back straight, hold the resident close, avoid twisting, use leg muscles, ask for help, take multiple small steps.**
- B. Bend at waist; twist; lift with back
- C. Keep back arched; use arms only
- D. Stand far and push

Safe body mechanics for lifting or transferring a resident focus on using the legs, not the back, and keeping the load close to your center of gravity. Start by bending at the hips and knees into a squat position, not at the waist, and keep your back straight in a neutral posture. Hold the resident close to your body to reduce the load's leverage and strain on your spine. Avoid twisting your torso during the move; instead, keep your feet hip- to shoulder-width apart and point them in the direction you're moving. Use your leg muscles to lift, and if the resident is heavy or unstable, ask for help or use assistive devices like a gait belt, transfer sheet, or mechanical lift. Move with small steps to maintain balance and control. Twisting, bending only at the waist, lifting with the back or arms, and pushing from a distance all increase the risk of injury and provide less control, which is why they're not appropriate.

8. Where should the drainage bag be kept to reduce infection risk?

- A. Above bladder level
- B. At bladder level
- C. Below bladder level**
- D. Secure to the bed frame

Keeping the drainage bag below the level of the bladder prevents backflow of urine into the bladder. When the bag is lower than the bladder, gravity helps urine drain away and reduces the chance that urine will reflux back into the bladder, which lowers infection risk. If the bag sits at or above bladder level, urine can flow back toward the bladder and increase the risk of a urinary tract infection. Securing the bag to the bed frame helps keep it stable, but the essential factor in reducing infection is its position below the bladder level.

9. What is the first standard action before beginning a full bed bath?

- A. Knock before entering the room.**
- B. Raise bed rails.
- C. Fill bath basin 2/3 full of warm water.
- D. Lower bed rail and position resident supine.

Knocking before entering is the first standard action because it shows respect for the resident's privacy and autonomy. It gives them a chance to respond, acknowledge who is entering, and indicate whether they're ready for care. This simple courtesy helps prevent surprise exposure and protects dignity, which is foundational before starting any care activity. After the door is answered and consent is given, you would proceed with privacy measures and then the bath, such as identifying the resident and explaining what you'll do, performing hand hygiene, and gathering supplies. The other steps—adjusting bed rails or filling the basin—are important parts of the process but come after you've obtained permission and prepared the environment.

10. During hand hygiene, what is the minimum recommended duration for scrubbing all surfaces?

- A. 5 seconds
- B. 10 seconds
- C. 20 seconds**
- D. 60 seconds

Effective hand hygiene relies on enough time for soap to lift oils and for deliberate rubbing to remove microbes from all surfaces. Scrubbing for about 20 seconds provides the necessary contact time to clean palms, backs of hands, between fingers, and under nails, using friction to dislodge dirt and germs. Shorter durations, like five or ten seconds, risk missing areas and leaving microbes behind. Spending a full minute isn't required for routine handwashing and can be unnecessarily lengthy. A practical way to gauge time is to sing a short tune twice while you scrub.

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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://kycna.examzify.com>

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

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