

Kentucky SRNA Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

Copyright © 2025 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 from reliable sources accurate, complete, and timely information about this product.

SAMPLE

Questions

SAMPLE

- 1. When performing deep breathing exercises, where should the patient position their hands?**
 - A. On their knees**
 - B. On their hips**
 - C. On a pillow over their abdomen**
 - D. At their sides**
- 2. What is urinary incontinence?**
 - A. The voluntary loss of urine**
 - B. The irreversible cessation of urinary function**
 - C. The involuntary loss or leakage of urine**
 - D. A condition impacting only elderly patients**
- 3. Which of the following describes the pulse?**
 - A. A continuous sound of the heartbeat**
 - B. A wave of blood passing through an artery**
 - C. A varying frequency of heartbeats**
 - D. A feeling of a heart murmur**
- 4. Which term describes an unintentional act that causes harm to a person or their property due to a lack of reasonable care?**
 - A. Negligence**
 - B. Malpractice**
 - C. Accident**
 - D. Assault**
- 5. What type of patients typically benefit from the care provided in a skilled nursing facility?**
 - A. Patients requiring long-term care without rehabilitation**
 - B. Patients with dietary needs only**
 - C. Patients needing rehabilitation or complex health care**
 - D. Patients with minor health concerns**

- 6. What defines a developmental disability (DD)?**
- A. A disability arising during adulthood**
 - B. A disability occurring before 22 years of age**
 - C. An acquired disability from injury**
 - D. A transient condition affecting learning**
- 7. What is the main focus of an ombudsman in a healthcare context?**
- A. Providing direct medical care**
 - B. Advocating for patient rights and needs**
 - C. Conducting medical research**
 - D. Handling hospital administrative tasks**
- 8. What does gerontology study?**
- A. The aging process and its effects**
 - B. Child development**
 - C. Nutrition throughout the lifespan**
 - D. Surgical techniques**
- 9. What is a common indicator of a clean-contaminated wound?**
- A. Presence of foreign material**
 - B. No debris present**
 - C. Infection from outside source**
 - D. Contamination from gastrointestinal tract**
- 10. What is the role of a restorative aide?**
- A. To provide medication administration oversight**
 - B. To assist residents with daily living activities only**
 - C. To have special training in restorative nursing and rehabilitation**
 - D. To handle administrative tasks in a nursing facility**

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. When performing deep breathing exercises, where should the patient position their hands?

- A. On their knees**
- B. On their hips**
- C. On a pillow over their abdomen**
- D. At their sides**

Positioning the hands on a pillow over the abdomen during deep breathing exercises serves a significant purpose. This setup allows the patient to focus on the rise and fall of the abdomen as they breathe deeply. By placing their hands on the abdomen, they can better engage their diaphragm, which is crucial for effective deep breathing. This physical feedback helps the patient become more aware of their breathing patterns and encourages the full expansion of the lungs. Using a pillow can provide comfort and support, making the exercise more effective and enjoyable. It promotes relaxation, which is essential when attempting to practice deep breathing techniques. The visual and tactile sensations created by the movement of the abdomen under the hands can reinforce proper technique, assisting in the overall experience and effectiveness of the exercise.

2. What is urinary incontinence?

- A. The voluntary loss of urine**
- B. The irreversible cessation of urinary function**
- C. The involuntary loss or leakage of urine**
- D. A condition impacting only elderly patients**

Urinary incontinence is defined as the involuntary loss or leakage of urine, making it a significant health issue that can affect individuals of various ages, not just older adults. This condition can stem from a variety of causes, including muscle dysfunction, neurological conditions, or the physical structure of the urinary tract. Understanding this definition is crucial for recognizing and addressing the nature of urinary incontinence in clinical practice, as it influences the approach to treatment and management strategies. Other choices do not accurately capture the essence of urinary incontinence. The first choice incorrectly implies that the condition involves voluntary actions, while the second choice incorrectly characterizes incontinence as an irreversible cessation of function, which is not representative of the condition. Finally, the last option incorrectly suggests that urinary incontinence only affects the elderly, ignoring its prevalence in younger populations as well.

3. Which of the following describes the pulse?

- A. A continuous sound of the heartbeat
- B. A wave of blood passing through an artery**
- C. A varying frequency of heartbeats
- D. A feeling of a heart murmur

The pulse is best described as a wave of blood passing through an artery. This wave occurs as the heart contracts and pumps blood into the arteries, creating a pressure wave that can be felt at various points in the body, such as the wrist or neck. The pulse is a direct reflection of the heart's activity and circulatory system function, providing important information about heart rate, rhythm, and overall cardiovascular health. This clear, physical manifestation of the heart's action distinguishes the pulse from other concepts related to heart sounds or rhythms. The continuous sound of the heartbeat pertains more to auditory representations of the heartbeat rather than the physical sensation of the pulse. Varying frequency of heartbeats refers to changes in the rate of heart contractions but does not specifically address the palpable wave of blood. Lastly, a heart murmur is an abnormal sound produced by turbulent blood flow, not a description of the pulse itself. Thus, identifying the pulse as a wave of blood passing through an artery accurately captures its essence in the context of cardiovascular physiology.

4. Which term describes an unintentional act that causes harm to a person or their property due to a lack of reasonable care?

- A. Negligence**
- B. Malpractice
- C. Accident
- D. Assault

The term that best describes an unintentional act causing harm to a person or their property due to a lack of reasonable care is negligence. Negligence refers specifically to a failure to exercise the level of care that a reasonably prudent person would in a similar situation, leading to unintended harm or injury to another party. In the context of healthcare and legal standards, negligence can arise from various scenarios, such as failing to provide the necessary standard of care, leading to patient harm. It emphasizes the concept of duty and breach, where a duty is owed to another, and a breach of that duty results in damages. Other terms in the choices refer to different legal concepts. Malpractice typically involves professional negligence, where a professional fails to perform their duties competently, resulting in harm to a patient. An accident implies an unexpected event that may or may not involve negligence but does not specifically encapsulate the concept of a lack of reasonable care. Assault refers to an intentional act that causes apprehension of harmful or offensive contact, which is not related to negligence. Thus, negligence is the most appropriate term for the described act of unintentional harm due to a failure of care.

5. What type of patients typically benefit from the care provided in a skilled nursing facility?
- A. Patients requiring long-term care without rehabilitation
 - B. Patients with dietary needs only
 - C. Patients needing rehabilitation or complex health care**
 - D. Patients with minor health concerns

Skilled nursing facilities (SNFs) are designed to provide a high level of medical care and rehabilitation services to patients. The correct choice reflects the primary purpose of these facilities: to assist individuals who require ongoing medical supervision and rehabilitation after hospitalization or for complex health issues. Patients typically benefiting from care in skilled nursing facilities are those recovering from surgeries, strokes, or serious illnesses, requiring physical, occupational, or speech therapy. These services are often essential for regaining independence and functional skills that may have been lost due to their medical condition. The skilled nursing staff, including registered nurses and therapists, support these patients in their recovery with specialized care tailored to their unique health challenges. The other options represent scenarios that do not fully utilize the resources and expertise available in skilled nursing facilities. For instance, long-term care without rehabilitation may be more suited to a standard nursing home or assisted living facility, primarily focused on daily living assistance rather than medical rehabilitation. Patients with dietary needs only do not require the intensive medical oversight that skilled nursing facilities provide and could be managed in more basic care settings. Lastly, those with minor health concerns would typically be managed in outpatient settings or through primary care, as they do not necessitate the specialized care offered in skilled nursing environments.

6. What defines a developmental disability (DD)?
- A. A disability arising during adulthood
 - B. A disability occurring before 22 years of age**
 - C. An acquired disability from injury
 - D. A transient condition affecting learning

A developmental disability (DD) is specifically defined as a group of conditions that are characterized by impairments in physical, learning, language, or behavioral areas, and these conditions typically arise during the developmental period, which is defined as before the age of 22. This timeframe is critical because developmental disabilities often manifest in early childhood and can have lasting effects throughout an individual's life. The defining aspect is that these disabilities must be present from a young age, as they impact the development of cognitive and physical functioning. This includes conditions such as intellectual disabilities, autism spectrum disorders, and other delays in development that are not solely caused by external factors after reaching adulthood. In contrast, disabilities that arise during adulthood, acquired disabilities from injury, or transient conditions affecting learning do not fall under the definition of developmental disabilities, as they do not originate in the developmental period nor affect the overall trajectory of development from the outset.

7. What is the main focus of an ombudsman in a healthcare context?

- A. Providing direct medical care**
- B. Advocating for patient rights and needs**
- C. Conducting medical research**
- D. Handling hospital administrative tasks**

In a healthcare context, the main focus of an ombudsman is to advocate for patient rights and needs. An ombudsman serves as a liaison between patients and healthcare providers, ensuring that patients have a voice in their care and that their concerns are addressed appropriately. This role often involves listening to patient complaints, providing information about patients' rights, helping to resolve issues with care, and ensuring compliance with regulations that protect patient interests. The role is multifaceted and encompasses promoting transparency and accountability within the healthcare system. By focusing on advocacy, ombudsmen can help improve the quality of care and the overall patient experience. They also play an important role in educating patients about their rights and the healthcare processes, which empowers individuals to speak up about their needs and preferences in their care. In contrast, positions that involve direct medical care, conducting medical research, or handling administrative tasks do not align with the primary purpose of an ombudsman. These activities are typically conducted by healthcare providers, researchers, or administrative staff, respectively, which highlights the unique position of an ombudsman focused on patient advocacy.

8. What does gerontology study?

- A. The aging process and its effects**
- B. Child development**
- C. Nutrition throughout the lifespan**
- D. Surgical techniques**

Gerontology is the multidisciplinary study of the aging process and its effects on individuals as they grow older. This field encompasses various aspects of aging, including physiological, psychological, and social changes that occur throughout the lifespan. Gerontologists seek to understand the complexities of growing older, the challenges faced by elderly individuals, and the ways in which society can support them. By focusing on the aging process, researchers and practitioners in gerontology aim to improve quality of life for older adults, promote healthy aging, and develop policies and programs to meet the needs of aging populations. While other fields may also touch on aspects of aging, such as child development or nutrition at various life stages, gerontology is specifically dedicated to understanding the implications of aging itself. This focus sets it apart from disciplines that look at different life stages or medical techniques.

9. What is a common indicator of a clean-contaminated wound?

- A. Presence of foreign material**
- B. No debris present**
- C. Infection from outside source**
- D. Contamination from gastrointestinal tract**

A common indicator of a clean-contaminated wound is indeed contamination from the gastrointestinal tract. Clean-contaminated wounds occur when surgical wounds that are made in the gastrointestinal, respiratory, or urogenital tracts are entered under controlled conditions, and their contents may introduce bacteria, thereby contaminating the wound. When surgical procedures involve the gastrointestinal tract, there is a recognized risk of introducing flora that can lead to infection. This type of wound is not considered fully clean due to the potential presence of these organisms, but it is also not as severe as a contaminated wound, which would involve a significant amount of infectious material or the presence of dead tissue. In contrast, the presence of foreign material would typically indicate a contaminated wound rather than a clean-contaminated one. Similarly, having no debris present would suggest that the wound is cleaner, while infection from an outside source is more indicative of a contaminated or infected wound rather than a clean-contaminated classification. Therefore, contamination from the gastrointestinal tract directly aligns with the characteristics of a clean-contaminated wound.

10. What is the role of a restorative aide?

- A. To provide medication administration oversight**
- B. To assist residents with daily living activities only**
- C. To have special training in restorative nursing and rehabilitation**
- D. To handle administrative tasks in a nursing facility**

The role of a restorative aide is centered around special training in restorative nursing and rehabilitation. This position is designed to support and enhance the functional abilities of residents who may have experienced a decline in their physical or cognitive capacities. A restorative aide is equipped with specific skills to implement therapeutic interventions aimed at improving a resident's overall independence in activities of daily living. While assisting residents with daily living activities is part of the job, the distinctive element of a restorative aide's role lies in their specialized knowledge and training. This enables them to not only assist but also to actively participate in the rehabilitation process, collaborating with other healthcare professionals to create and execute personalized care plans. This helps in promoting recovery and enhancing a resident's quality of life, which is a core focus of restorative care. Other choices suggest roles that either do not align with the specific focus of restorative nursing (such as medication administration oversight or handling administrative tasks) or oversimplify the responsibilities to merely assisting with daily living activities, missing the integral aspect of rehabilitation and restorative principles.