

Med Surge Test 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 immediate action should a nurse take for a patient with a suspected anaphylactic reaction?**
 - A. Administer antihistamines**
 - B. Call for emergency assistance**
 - C. Administer epinephrine**
 - D. Begin CPR**

- 2. Which is a characteristic of natural killer cells?**
 - A. They require antibodies to function**
 - B. They are part of the adaptive immune system**
 - C. They directly attack infected or tumor cells**
 - D. They primarily produce immunoglobulins**

- 3. What is a critical early intervention for a patient with a suspected myocardial infarction?**
 - A. Performing a thorough health history**
 - B. Administering nitroglycerin as ordered**
 - C. Encouraging physical activity**
 - D. Providing reassurance and comfort measures**

- 4. What is the highest priority intervention for a patient in anaphylactic shock?**
 - A. Elevating the head of the bed**
 - B. Administering corticosteroids**
 - C. Administering vasopressors**
 - D. Performing endotracheal intubation**

- 5. Which assessment finding may indicate heart failure exacerbation?**
 - A. Peripheral edema and dyspnea on exertion**
 - B. Coolness of extremities with increased urination**
 - C. Elevated temperature and headache**
 - D. Increased appetite and energy levels**

6. What order should a nurse follow up on for a patient with C. Diff?

- A. Probiotics**
- B. Imodium**
- C. Encouraging fluid intake**
- D. PO Flagyl**

7. What type of white blood cell is known for phagocytosing during early inflammatory responses?

- A. Eosinophils**
- B. Neutrophils**
- C. Basophils**
- D. T lymphocytes**

8. Which type of leukocyte is primarily involved in allergic reactions?

- A. Neutrophils**
- B. Basophils**
- C. Eosinophils**
- D. Monocytes**

9. Which symptom is commonly associated with inflammation?

- A. Weight gain**
- B. Increased appetite**
- C. Redness**
- D. Fatigue**

10. What is a possible cause of blood in the sputum and urine in a patient with type 2 hypersensitivity reaction?

- A. A. Grave's disease**
- B. B. Allergic rhinitis**
- C. C. Goodpasture syndrome**
- D. D. Systemic lupus erythematosus (SLE)**

Answers

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

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Explanations

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1. What immediate action should a nurse take for a patient with a suspected anaphylactic reaction?

- A. Administer antihistamines**
- B. Call for emergency assistance**
- C. Administer epinephrine**
- D. Begin CPR**

In cases of suspected anaphylactic reactions, the most critical and immediate action is to administer epinephrine. Anaphylaxis is a severe and often life-threatening allergic reaction that can lead to airway constriction, circulatory collapse, and respiratory distress. Administering epinephrine promptly counteracts these life-threatening symptoms by causing vasoconstriction, increasing heart rate, and relaxing bronchial smooth muscles, thereby opening the airways and improving breathing. While calling for emergency assistance is essential as part of the overall emergency response, the administration of epinephrine takes precedence because it acts quickly within minutes to stabilize the patient. Antihistamines can help with allergic symptoms, but they do not act rapidly enough to address the acute life-threatening issues associated with anaphylaxis. Lastly, beginning CPR would only be appropriate if the patient were unresponsive or not breathing; however, the immediate action should first focus on reversing the anaphylactic reaction itself through the use of epinephrine.

2. Which is a characteristic of natural killer cells?

- A. They require antibodies to function**
- B. They are part of the adaptive immune system**
- C. They directly attack infected or tumor cells**
- D. They primarily produce immunoglobulins**

Natural killer (NK) cells are a crucial component of the innate immune system, known for their ability to directly attack and destroy infected cells and tumor cells without the need for prior sensitization or antibodies. This characteristic distinguishes them from other immune cells that require specific recognition through antibodies or other mechanisms, which is more common in the adaptive immune system. NK cells recognize stressed cells in the absence of antibodies and enhance the immune response. They are particularly effective against viral infections and certain types of cancer by releasing cytotoxic granules that can induce apoptosis in target cells. This direct action is fundamental to their role in the immune response, helping to eliminate cells that are abnormal or compromised. In contrast, the other options refer to functions or characteristics not associated with NK cells: they do not require antibodies (which is why the first choice is incorrect), they are not categorized under the adaptive immune system (making the second choice inaccurate), and although they play a role in immune responses, they do not primarily produce immunoglobulins, which are associated with B cells in the adaptive immune system.

3. What is a critical early intervention for a patient with a suspected myocardial infarction?

- A. Performing a thorough health history**
- B. Administering nitroglycerin as ordered**
- C. Encouraging physical activity**
- D. Providing reassurance and comfort measures**

Administering nitroglycerin as ordered is a vital early intervention for a patient with a suspected myocardial infarction. Nitroglycerin works by dilating the coronary arteries, improving blood flow to the heart muscle, and relieving angina by reducing the workload on the heart. During a myocardial infarction, when the heart is deprived of adequate oxygen due to blocked blood flow, rapid intervention with nitroglycerin can alleviate pain, decrease oxygen demand, and potentially limit damage to the myocardium. Although collecting a thorough health history, encouraging physical activity, and providing reassurance are important components of patient care, these actions do not provide immediate therapeutic effects necessary to address the acute nature of a myocardial infarction. In particular, physical activity can exacerbate the condition by increasing the heart's demand for oxygen at a time when it is already compromised. Reassurance and comfort measures, while essential for psychological support, do not directly impact the underlying physiological crisis that is occurring. Thus, the administration of nitroglycerin stands out as the most critical immediate intervention in this scenario.

4. What is the highest priority intervention for a patient in anaphylactic shock?

- A. Elevating the head of the bed**
- B. Administering corticosteroids**
- C. Administering vasopressors**
- D. Performing endotracheal intubation**

In the context of anaphylactic shock, the highest priority intervention is to ensure airway patency and address any potential respiratory distress. Administering endotracheal intubation is critical when a patient exhibits severe airway obstruction or difficulty breathing due to angioedema or bronchospasm, which can occur during an anaphylactic reaction. During anaphylaxis, the body experiences a rapid and severe allergic response, leading to the release of histamines and other mediators that can cause swelling, airway constriction, and potentially compromise ventilation. If the patient's airway becomes significantly obstructed, intubation allows for mechanical ventilation and can be life-saving. While elevating the head of the bed may aid in breathing to some extent and administering corticosteroids and vasopressors are indeed important components of the treatment plan, they do not address the immediate life-threatening risk of airway obstruction. In acute scenarios like anaphylaxis, prioritizing the establishment and maintenance of an open airway is essential for survival.

5. Which assessment finding may indicate heart failure exacerbation?

- A. Peripheral edema and dyspnea on exertion**
- B. Coolness of extremities with increased urination**
- C. Elevated temperature and headache**
- D. Increased appetite and energy levels**

The presence of peripheral edema and dyspnea on exertion is significant in assessing heart failure exacerbation. Heart failure often leads to fluid retention due to the heart's decreased ability to pump effectively, resulting in swelling in the lower extremities or other parts of the body. This edema occurs because the kidneys retain sodium and water in response to perceived low blood volume, which is often a compensatory mechanism of the body. Dyspnea on exertion indicates that the body is struggling to deliver adequate oxygen during increased physical activity, which can happen when fluid accumulates in the lungs, also known as pulmonary congestion. This combination of signs is commonly seen in conditions with worsening heart function, particularly in patients with chronic heart failure, making it a critical assessment finding for exacerbation. In contrast, other options include findings that may not specifically relate to heart failure exacerbation. Coolness of extremities with increased urination could indicate issues such as shock or peripheral vascular disease. Elevated temperature and headache might suggest an infection or inflammatory process, while increased appetite and energy levels generally do not align with the typical presentation of heart failure exacerbation, where symptoms would more likely point to fluid overload and decreased functional capacity.

6. What order should a nurse follow up on for a patient with C. Diff?

- A. Probiotics**
- B. Imodium**
- C. Encouraging fluid intake**
- D. PO Flagyl**

In the management of a patient with Clostridium difficile infection (C. Diff), the priority would be to administer the proper treatment indicated for the infection. In this case, the correct choice is the prescription for oral Flagyl (metronidazole). This medication is an antibiotic specifically used to treat C. Diff infections. By administering Flagyl, the nurse is directly addressing the cause of the infection, which is essential for the patient's recovery. In contrast, probiotics are often considered as adjunct therapy to help restore gut flora but do not directly combat the infection itself. While encouraging fluid intake is important to prevent dehydration, especially if the patient is experiencing diarrhea, it is not a primary treatment for the infection. Imodium (loperamide) is an anti-diarrheal medication and is contraindicated in C. Diff infections because it can worsen the condition by slowing down the elimination of the bacteria from the intestines. Thus, the best practice in this scenario is to prioritize the administration of Flagyl to effectively treat the infection.

7. What type of white blood cell is known for phagocytosing during early inflammatory responses?

- A. Eosinophils**
- B. Neutrophils**
- C. Basophils**
- D. T lymphocytes**

Neutrophils are the type of white blood cells that play a crucial role in phagocytosis during early inflammatory responses. They are the first responders to sites of infection or injury, quickly moving from the bloodstream to tissues. Once they arrive, neutrophils can engulf and digest pathogens, such as bacteria and fungi, as well as cellular debris. This rapid response and ability to eliminate invading microbes are vital for controlling infections in the initial stages and promoting healing. Other types of white blood cells, while important in different contexts of the immune response, do not primarily engage in phagocytosis during the early stages of inflammation. Eosinophils are typically involved in combating parasitic infections and have a role in allergic reactions; basophils release histamine and other mediators that contribute to inflammation but do not perform phagocytosis. T lymphocytes are key players in adaptive immunity, specifically targeting infected or cancerous cells, but they do not engage in the immediate phagocytic activity characteristic of neutrophils.

8. Which type of leukocyte is primarily involved in allergic reactions?

- A. Neutrophils**
- B. Basophils**
- C. Eosinophils**
- D. Monocytes**

Eosinophils are primarily involved in allergic reactions due to their role in mediating the body's response to allergens. When an allergen is encountered, eosinophils are recruited to the site of inflammation and release substances that can help combat parasites but are also implicated in the pathophysiology of allergic reactions. They respond to certain cytokines and mediators associated with allergies, contributing to the inflammatory response that can lead to symptoms such as itching, swelling, and respiratory issues. In allergic conditions, eosinophils can become activated and release inflammatory substances, which can exacerbate the symptoms of allergies and asthma. Their increased presence can also be indicative of allergic disorders, such as hay fever or asthma, where they contribute to the inflammation and tissue damage associated with an overactive immune response. Neutrophils and monocytes play different roles in the immune response, mainly associated with fighting infections and phagocytosis, while basophils participate in inflammatory reactions as well, often releasing histamine during an allergic response, but they are not the primary leukocytes involved as are eosinophils in these particular reactions.

9. Which symptom is commonly associated with inflammation?

- A. Weight gain**
- B. Increased appetite**
- C. Redness**
- D. Fatigue**

Redness is a classic sign of inflammation and is caused by an increase in blood flow to the affected area. This vascular response is part of the body's immune defense mechanism, where blood vessels dilate to allow more immune cells and nutrients to reach the site of injury or infection. This increased blood flow brings with it increased warmth and a reddish appearance as the area becomes engorged with blood, which is a key feature of the inflammatory process. In contrast, symptoms like weight gain or increased appetite are not directly linked to inflammation itself and are more often associated with other conditions or metabolic changes. Fatigue can occur during inflammation, but it is a more generalized response and not a specific characteristic of inflammation like redness is. Recognizing redness as a sign helps healthcare providers assess the severity and nature of an inflammatory response.

10. What is a possible cause of blood in the sputum and urine in a patient with type 2 hypersensitivity reaction?

- A. A. Grave's disease**
- B. Allergic rhinitis**
- C. Goodpasture syndrome**
- D. Systemic lupus erythematosus (SLE)**

A type 2 hypersensitivity reaction involves the immune system producing antibodies against specific antigens, leading to tissue damage and inflammation. Goodpasture syndrome is a prime example of this type of hypersensitivity reaction. It is characterized by the production of antibodies against the basement membrane of the lungs and kidneys, which results in pulmonary hemorrhage and glomerulonephritis. In this condition, patients often present with blood in the sputum due to lung involvement, where the alveolar-capillary membrane is damaged, causing leakage of red blood cells into the airways. Additionally, the renal involvement can lead to hematuria, or blood in the urine, as the glomeruli are affected. Other conditions listed do not typically present with both hemoptysis (blood in the sputum) and hematuria (blood in the urine) as direct manifestations of type 2 hypersensitivity. For instance, Grave's disease is primarily related to hyperthyroidism due to autoantibodies stimulating the thyroid gland. Allergic rhinitis, while an immune-mediated condition, is more related to type 1 hypersensitivity reactions involving IgE. Systemic lupus erythematosus (SLE) involves multiple mechanisms that can include type 3 hypersensitivity

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://medsurge1.examzify.com>

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

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