

MINNESOTA STATE CERTIFIED NURSING ASSISTANT (CNA) PRACTICE EXAM (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. What should be confirmed before ambulating a patient?**
 - A. Patient's ability to follow commands
 - B. Patient's willingness to be ambulated
 - C. Patient's vital signs are stable
 - D. All of the above

- 2. In which position should a patient's feet be when sitting on the side of the bed?**
 - A. Hanging off the edge
 - B. Flat on the floor
 - C. Crossed
 - D. Elevated on a stool

- 3. What is the goal of rehabilitation for a resident?**
 - A. To diagnose medical conditions
 - B. To restrict movement for safety
 - C. To assist them in reaching their highest level of ability physically, mentally, and socially
 - D. To prepare them to be independent at all times

- 4. Why might patients who are encouraged to be independent have a better outcome?**
 - A. They feel less stress
 - B. They learn new skills
 - C. They perceive themselves as active participants
 - D. They avoid physical therapy

- 5. What is rehabilitation in the context of nursing care?**
 - A. A process to help patients regain their physical abilities and independence after illness or injury
 - B. A method for preventing illness in patients
 - C. A technique for managing patient records
 - D. A strategy for increasing staff efficiency in caring for patients

- 6. Body alignment relates to which of the following?**
- A. Correct positioning of the patient's body
 - B. Measuring the patient's height
 - C. Assessing the patient's weight
 - D. Determining the patient's body mass index
- 7. What is a primary safety concern when transferring, lifting, or ambulating a patient?**
- A. Ensuring the patient is in a stable position
 - B. Being cautious of any tubing the patient may have
 - C. Using proper body mechanics
 - D. Gathering all necessary equipment beforehand
- 8. What is the role of a CNA in monitoring vital signs?**
- A. To accurately measure and report changes to the nursing staff
 - B. To independently diagnose health issues
 - C. To administer medications as needed
 - D. To develop treatment plans for patients
- 9. What is considered normal feces or bowel movement?**
- A. Liquid and frequent
 - B. Formed, brown, passing every 1 to 3 days
 - C. Hard and infrequent
 - D. Soft and irregular
- 10. What action should a CNA take when a resident shows signs of anxiety?**
- A. Ignore the signs and continue with tasks
 - B. Provide reassurance and a calm presence, and involve the healthcare team as needed
 - C. Schedule a meeting for later
 - D. Leave the resident alone to calm down

Answers

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

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Explanations

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1. What should be confirmed before ambulating a patient?

- A. Patient's ability to follow commands
- B. Patient's willingness to be ambulated
- C. Patient's vital signs are stable
- D. All of the above**

Before ambulating a patient, it is crucial to confirm several factors that ensure the patient's safety and comfort during the process. Confirming the patient's ability to follow commands is important because it indicates that they can understand instructions and respond appropriately during walking. This contributes to a safer ambulation by ensuring that the patient can move as directed. Assessing the patient's willingness to be ambulated is also central because a patient's motivation and consent can directly affect their cooperation and the success of the ambulation. If a patient is unwilling or hesitant, it may signal discomfort, pain, or anxiety, necessitating further evaluation before proceeding. Additionally, ensuring that the patient's vital signs are stable is vital for determining their physiological readiness to ambulate. Vital signs such as heart rate, blood pressure, and respiratory rate provide critical information about the patient's overall health status and their capacity to safely engage in physical activity. All of these factors—ability to follow commands, willingness to ambulate, and stable vital signs—are interconnected and essential for a safe ambulation. Therefore, confirming all of these aspects collectively provides a comprehensive assessment that safeguards the patient's wellbeing and ensures a successful ambulation.

2. In which position should a patient's feet be when sitting on the side of the bed?

- A. Hanging off the edge
- B. Flat on the floor**
- C. Crossed
- D. Elevated on a stool

When a patient is sitting on the side of the bed, their feet should be flat on the floor. This position is important for several reasons. Having the feet flat provides stability and balance, which is crucial for preventing falls or slips as the patient prepares to stand up or move. It ensures that the distribution of weight is even, reducing strain on the legs and promoting a safe, comfortable posture. In addition, keeping the feet flat on the floor can help with circulation and comfort. It reduces the risk of developing complications such as pressure ulcers or venous stasis, which can occur when blood flow is restricted due to improper positioning. Other positions, such as having the feet hanging off the edge or crossed, can lead to instability and increase the risk of a fall. Elevating the feet on a stool may be appropriate in specific situations, but it is not the best choice for general sitting at the edge of the bed, as it can lead to misalignment or discomfort. Therefore, the safest and most supportive option for a patient sitting on the edge of the bed is to have their feet flat on the floor.

3. What is the goal of rehabilitation for a resident?

- A. To diagnose medical conditions
- B. To restrict movement for safety
- C. To assist them in reaching their highest level of ability physically, mentally, and socially**
- D. To prepare them to be independent at all times

The goal of rehabilitation for a resident focuses on helping them achieve their highest level of ability across various domains—physically, mentally, and socially. This holistic approach recognizes that rehabilitation is not just about physical recovery but also involves enhancing cognitive function and social interaction, which are vital for overall well-being. By supporting residents in regaining their independence and improving their quality of life, rehabilitation programs can empower individuals to participate more fully in their own care and activities. This may include tailored therapies that promote mobility, cognitive exercises to enhance mental agility, and opportunities for socialization to foster connections with others, thereby creating a comprehensive support system. The other options do not align with the primary focus of rehabilitation. Diagnosing medical conditions is a task typically associated with healthcare providers, not the direct aim of rehabilitation. While ensuring safety is important, restricting movement does not foster independence or recovery. Lastly, preparing residents to be independent at all times is an unrealistic expectation; rehabilitation aims to gradually enhance independence, recognizing that some individuals may always need varying levels of support.

4. Why might patients who are encouraged to be independent have a better outcome?

- A. They feel less stress
- B. They learn new skills
- C. They perceive themselves as active participants**
- D. They avoid physical therapy

Patients who are encouraged to be independent often perceive themselves as active participants in their care, which can lead to improved outcomes. This sense of agency is crucial for several reasons. When individuals feel they have control over their health and choices, they are more likely to engage positively in their treatment plans and lifestyle changes. This active participation can enhance motivation, foster a greater commitment to following healthcare recommendations, and promote adherence to therapeutic regimens. Furthermore, when patients view themselves as active participants, it contributes to an overall increase in self-esteem and confidence. This psychological aspect can be very impactful, as patients who believe they can manage their own care are often more willing to take initiative in their recovery process. This engagement can also lead to better communication with healthcare providers, resulting in a more tailored approach to their needs. While feeling less stress and learning new skills are certainly important factors in a patient's recovery journey, the fundamental shift in self-perception and empowerment that comes from viewing oneself as an active participant is what fundamentally drives better outcomes in healthcare settings. Avoiding physical therapy, on the other hand, can lead to worse health outcomes and is typically not a goal of fostering patient independence.

5. What is rehabilitation in the context of nursing care?

- A. A process to help patients regain their physical abilities and independence after illness or injury**
- B. A method for preventing illness in patients
- C. A technique for managing patient records
- D. A strategy for increasing staff efficiency in caring for patients

Rehabilitation in the context of nursing care refers to a comprehensive process designed to assist patients in recovering their physical abilities and achieving independence following an illness or injury. This involves a range of therapeutic interventions aimed at restoring function, improving mobility, and enhancing the overall quality of life for the patient. The focus is on enabling individuals to regain skills necessary for daily living, ultimately guiding them towards a state where they can perform activities independently. The core of rehabilitation encompasses not just physical therapy, but also occupational therapy, speech therapy, and other supportive measures tailored to the individual's needs. It emphasizes a holistic approach to patient care, combining physical, emotional, and psychological healing, thereby fostering empowerment and encouraging active participation in personal recovery. Understanding the nuances of rehabilitation is vital for nursing assistants, as they play a critical role in the implementation of rehabilitation programs through direct care and encouragement of patients, aiming to optimize their recovery and reintegration into everyday life.

6. Body alignment relates to which of the following?

- A. Correct positioning of the patient's body**
- B. Measuring the patient's height
- C. Assessing the patient's weight
- D. Determining the patient's body mass index

Body alignment refers to the proper positioning of a person's body in a way that promotes balance and function. Correct positioning is essential for maintaining physiological function and preventing complications such as pressure sores or musculoskeletal problems. When a patient is properly aligned, their body is in a position that allows for optimal functioning of the body's systems, aids in comfort, and promotes safety. Proper body alignment is particularly important in settings such as nursing care, where caregivers must ensure that patients are positioned comfortably and correctly in bed or during mobility to enhance their recovery and prevent injuries. This concept is foundational in nursing practice, which helps improve patient care and clinical outcomes. In contrast, measuring height, assessing weight, or determining body mass index (BMI) are related to evaluating a patient's overall health and nutritional status, but they do not directly pertain to the aspect of body alignment or its implications on body positioning. Therefore, the focus of body alignment is specifically on how well a patient's body is positioned for optimal support and ease of movement.

7. What is a primary safety concern when transferring, lifting, or ambulating a patient?

- A. Ensuring the patient is in a stable position
- B. Being cautious of any tubing the patient may have**
- C. Using proper body mechanics
- D. Gathering all necessary equipment beforehand

The primary safety concern when transferring, lifting, or ambulating a patient is using proper body mechanics. This ensures both the safety of the patient and the caregiver during the movement. Proper body mechanics involves using the body in a way that minimizes strain on the muscles and joints, thereby reducing the risk of injury to the caregiver and ensuring that the patient is supported correctly and safely. Whether lifting a patient from a bed, assisting with walking, or transferring them to a wheelchair, employing correct techniques—such as keeping a wide base of support, bending at the knees, and using the strength of the legs rather than the back—helps in maintaining balance and control. This practice is essential in promoting an effective transfer and reducing the chances of falls or mishaps, which is vital in a healthcare environment. While considering other factors, like the stability of the patient and equipment used, those are supportive measures, but they do not overshadow the paramount importance of using proper body mechanics in ensuring safety during physical transfers.

8. What is the role of a CNA in monitoring vital signs?

- A. To accurately measure and report changes to the nursing staff**
- B. To independently diagnose health issues
- C. To administer medications as needed
- D. To develop treatment plans for patients

The role of a CNA in monitoring vital signs primarily involves accurately measuring and reporting any changes to the nursing staff. This task is essential because vital signs—such as temperature, pulse, respiration, and blood pressure—serve as critical indicators of a patient's health status. By providing precise measurements and noting any variations, a CNA aids in the ongoing assessment and monitoring of a patient's condition, allowing nursing staff to make informed decisions regarding care. The importance of this responsibility lies in the CNA's position as a crucial member of the healthcare team, acting as a liaison who can identify potential changes that may require immediate attention from nurses or other healthcare professionals. Thus, the accurate reporting of vital signs is vital for ensuring patient safety and timely intervention. In contrast, independent diagnosis and treatment planning fall outside the CNA's scope of practice, as these are responsibilities designated to licensed nurses and physicians who have the required training and education to evaluate complex health issues and create comprehensive care plans. Similarly, administering medications is also a task reserved for licensed nursing staff, as it necessitates specific training and knowledge about pharmacology and patient safety protocols.

9. What is considered normal feces or bowel movement?

- A. Liquid and frequent
- B. Formed, brown, passing every 1 to 3 days**
- C. Hard and infrequent
- D. Soft and irregular

Normal feces or bowel movement is characterized as being formed, brown, and typically passing every 1 to 3 days. This description reflects the general characteristics of healthy stool alongside the frequency that most healthcare professionals would consider normal for an adult. Formed stool indicates that the contents have been adequately processed and have retained sufficient water, which contributes to a smooth and regular elimination process. The brown color is due to the presence of bile pigments and is a sign that digestion is functioning properly. A frequency of 1 to 3 days is considered typical for bowel movements, indicating that the digestive system is working efficiently without issues such as constipation or diarrhea. Other options do not align with these characteristics. Liquid and frequent bowel movements can indicate diarrhea, which may suggest an underlying health issue or dietary problems. Hard and infrequent bowel movements can signify constipation, which is not considered normal and can cause discomfort and other health complications. Similarly, soft and irregular stools may indicate issues with digestion or absorption, which are also not within the normal range.

10. What action should a CNA take when a resident shows signs of anxiety?

- A. Ignore the signs and continue with tasks
- B. Provide reassurance and a calm presence, and involve the healthcare team as needed**
- C. Schedule a meeting for later
- D. Leave the resident alone to calm down

When a resident shows signs of anxiety, providing reassurance and maintaining a calm presence is crucial for their emotional well-being. This approach helps to create a supportive environment, allowing the resident to feel safe and less distressed. By addressing their anxiety in the moment, the CNA can validate the resident's feelings and potentially alleviate their worries. Additionally, involving the healthcare team as needed ensures that the resident receives appropriate care and support. This collaborative approach is vital since it allows for a more comprehensive understanding of the resident's needs and may lead to interventions that can ease their anxiety. This choice promotes immediate comfort and suggests that the CNA is attentive to the emotional aspects of care, which is a critical component of the role in a healthcare setting. In contrast, ignoring signs of anxiety can leave the resident feeling unsupported and may exacerbate their distress. Scheduling a meeting for later might lead to unnecessary waiting and further anxious feelings, while leaving the resident alone can increase their sense of isolation, preventing them from accessing the immediate comfort and assurance they need.

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:

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

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