

Montana Certified Rehabilitation Registered Nurse (CRRN) Practice Test (Sample)

Study Guide



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Questions

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- 1. What describes the general aim of cardiac rehabilitation?**
 - A. To improve cardiovascular health and enhance quality of life**
 - B. To increase physical stamina through exercise only**
 - C. To promote mental health awareness and therapy**
 - D. To decrease medical interventions for chronic illness**
- 2. What is the role of the physician or nurse in a multidisciplinary team model?**
 - A. Control activities of the team**
 - B. Minimize communication**
 - C. Conduct all patient assessments**
 - D. Provide emotional support**
- 3. What symptom is characteristic of Gerstmann's Syndrome?**
 - A. Difficulty with vision**
 - B. Confusion of right and left**
 - C. Inability to process sensory information**
 - D. Loss of memory consolidation**
- 4. What happens in the esophageal phase of swallowing?**
 - A. The bolus is pushed into the stomach**
 - B. Cranial nerves #7 and #10 are active**
 - C. The tongue is positioned to prevent entry into the nasopharynx**
 - D. The bolus is chewed and moved to the throat**
- 5. Which function is associated with the posterior column of the spinal tract?**
 - A. Pain and temperature sensation**
 - B. Touch, pressure, and vibration**
 - C. Major voluntary movement**
 - D. Muscle tone regulation**

- 6. What function is associated with the trigeminal nerve?**
- A. Tongue movement**
 - B. Chewing and facial sensation**
 - C. Swallowing and voice**
 - D. Shoulder and head movement**
- 7. What percentage of traumatic brain injuries are classified as mild?**
- A. 50%**
 - B. 65%**
 - C. 80%**
 - D. 90%**
- 8. What role does patient education play in rehabilitation nursing?**
- A. It creates confusion among patients**
 - B. It empowers patients to manage their own care and facilitates recovery**
 - C. It delays the recovery process**
 - D. It solely focuses on medication usage**
- 9. What role does the Hippocampus play in the brain?**
- A. Relay station for sensory information**
 - B. Consolidation of new memories**
 - C. Regulation of muscle tone**
 - D. Control of eye movement**
- 10. Why is knowledge of the Americans with Disabilities Act (ADA) relevant for CRRNs?**
- A. It offers financial compensation guidelines**
 - B. It restricts patients' rights**
 - C. It provides guidelines for patient rights and accessibility in rehabilitation services**
 - D. It eliminates the need for patient consent**

Answers

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

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Explanations

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1. What describes the general aim of cardiac rehabilitation?

- A. To improve cardiovascular health and enhance quality of life**
- B. To increase physical stamina through exercise only**
- C. To promote mental health awareness and therapy**
- D. To decrease medical interventions for chronic illness**

The general aim of cardiac rehabilitation is focused on improving cardiovascular health and enhancing the quality of life for individuals recovering from heart-related issues. This comprehensive approach not only addresses the physical aspects of recovery, such as increasing exercise tolerance and managing risk factors like diet and smoking cessation, but also emphasizes emotional support and education, thereby leading to an overall improved quality of life. By combining physical, psychological, and social support, cardiac rehabilitation programs help patients reintegrate into their daily lives and reduce the risk of future cardiovascular events. This multifaceted perspective distinguishes it from other options that may focus on isolated aspects of health or treatment. For instance, emphasizing exercise alone fails to encompass the complete picture of recovery, which includes mental health and lifestyle changes, while limiting the scope to merely decreasing medical interventions does not support the broader aim of improving overall health outcomes.

2. What is the role of the physician or nurse in a multidisciplinary team model?

- A. Control activities of the team**
- B. Minimize communication**
- C. Conduct all patient assessments**
- D. Provide emotional support**

The role of the physician or nurse in a multidisciplinary team model primarily revolves around collaboration and communication, rather than controlling activities. In this framework, the physician and nurse provide essential medical expertise and care, ensuring that all team members are aligned with the treatment plan and patient goals. A key aspect of this role is facilitating communication among team members, which is crucial for addressing the complex needs of patients. Physicians and nurses assess the patient's medical condition, share critical information, and help coordinate different aspects of care among various disciplines. They also play a significant role in leadership by guiding the team's approach to patient management while respecting the contributions and expertise of other team members. Providing emotional support is important in the overall care plan, but it is typically one of many functions performed by team members rather than a sole focus of the physician or nurse's role. Conducting all patient assessments is also not accurate, as assessments may be shared among different professionals depending on their specialties. Instead, the physician and nurse contribute to comprehensive assessments with their clinical knowledge. In summary, while the physician or nurse influences the team's direction and ensures effective patient care, their role is not to control but to collaborate, communicate, and ensure that all disciplines are working cohesively towards common patient outcomes.

3. What symptom is characteristic of Gerstmann's Syndrome?

- A. Difficulty with vision
- B. Confusion of right and left**
- C. Inability to process sensory information
- D. Loss of memory consolidation

Gerstmann's Syndrome is primarily characterized by a specific set of cognitive deficits, one of which is confusion of right and left. This condition often arises from damage to the dominant hemisphere of the brain, typically affecting the parietal lobe where spatial awareness and the understanding of body orientation are processed. Individuals with Gerstmann's Syndrome may also exhibit other symptoms such as difficulty with calculations (acalculia), problems with writing (agraphia), and issues with finger recognition (finger agnosia). The confusion of right and left is a prominent feature because it directly relates to the spatial processing capabilities that are impaired in this syndrome. The correct identification and understanding of body orientation and directionality are crucial for daily functioning and navigation, which is why this symptom is key in diagnosing the syndrome.

4. What happens in the esophageal phase of swallowing?

- A. The bolus is pushed into the stomach**
- B. Cranial nerves #7 and #10 are active
- C. The tongue is positioned to prevent entry into the nasopharynx
- D. The bolus is chewed and moved to the throat

In the esophageal phase of swallowing, the primary action involves the transport of the bolus from the pharynx to the stomach. This phase is characterized by the involuntary movement of the food bolus through the esophagus, facilitated by a series of coordinated muscle contractions known as peristalsis. These contractions push the bolus downward toward the stomach, allowing it to enter the gastric cavity for further digestion. While cranial nerves play significant roles in the earlier phases of swallowing, such as the oral and pharyngeal phases, their specific involvement is less emphasized during the esophageal phase where the autonomic nervous system takes over to manage the peristaltic action. Lifting the tongue to prevent entry into the nasopharynx occurs primarily in the pharyngeal phase, ensuring that food does not enter the respiratory pathway. Chewing and moving the bolus to the throat are actions associated with the oral phase, not the esophageal phase. Thus, the correct understanding of the esophageal phase focuses on the movement of the bolus into the stomach through peristalsis.

5. Which function is associated with the posterior column of the spinal tract?

- A. Pain and temperature sensation**
- B. Touch, pressure, and vibration**
- C. Major voluntary movement**
- D. Muscle tone regulation**

The posterior column of the spinal tract is primarily responsible for transmitting sensory information related to touch, pressure, and vibration. This pathway is crucial for proprioception—the awareness of body position and movement—allowing individuals to discern fine touch and the sensation of vibrations. It carries these modalities through specialized mechanoreceptors in the skin and muscles, subsequently traveling up the spinal cord to the brain. In clinical practice, understanding the role of the posterior column helps healthcare professionals assess and identify neurological conditions. Damage or lesions in this pathway can lead to loss of fine touch and proprioceptive abilities, significantly impacting a patient's balance and coordination. Thus, this function is integral to the sensory component of rehabilitation nursing, particularly in evaluating and designing therapeutic interventions that restore sensory and motor functions for patients recovering from neurological impairments.

6. What function is associated with the trigeminal nerve?

- A. Tongue movement**
- B. Chewing and facial sensation**
- C. Swallowing and voice**
- D. Shoulder and head movement**

The trigeminal nerve, known as cranial nerve V, is primarily responsible for providing sensory innervation to the face and motor functions for mastication (chewing). This nerve has three major branches: the ophthalmic, maxillary, and mandibular nerves, which collectively facilitate facial sensation, allowing us to feel touch, pain, and temperature on the face. Additionally, the mandibular branch of the trigeminal nerve innervates the muscles involved in chewing, making it essential for the motor function of mastication. This multifaceted role in both sensory perception and motor function directly relates to the correct choice regarding its associated functions.

7. What percentage of traumatic brain injuries are classified as mild?

- A. 50%**
- B. 65%**
- C. 80%**
- D. 90%**

Traumatic brain injuries (TBIs) are classified into three main categories: mild, moderate, and severe. The vast majority of TBIs are considered mild, which is characterized by a variety of symptoms such as confusion, disorientation, and brief loss of consciousness. Research indicates that approximately 75% to 90% of all reported TBIs fall into the mild category. The correct choice indicates that around 80% of traumatic brain injuries are mild, which aligns with this statistical overview. Understanding the prevalence of mild TBIs is crucial for rehabilitation professionals, as these injuries often present different challenges compared to more severe TBIs. While the estimates can vary slightly based on the specific demographics and definitions used in different studies, 80% is a widely accepted figure that reflects the significant portion of TBIs that are mild in nature. This knowledge is essential for implementing appropriate treatment and rehabilitation strategies for individuals affected by mild TBIs.

8. What role does patient education play in rehabilitation nursing?

- A. It creates confusion among patients**
- B. It empowers patients to manage their own care and facilitates recovery**
- C. It delays the recovery process**
- D. It solely focuses on medication usage**

Patient education plays a crucial role in rehabilitation nursing by empowering patients to take an active role in their own care and facilitating their recovery process. When patients receive comprehensive and clear information about their condition, treatment options, and self-care strategies, they are more likely to understand their health needs and the steps they need to take to promote better outcomes. This knowledge fosters confidence and independence, enabling patients to effectively manage their health and adhere to rehabilitation protocols. Additionally, effective patient education can enhance motivation and engagement in therapy, which can lead to improved functional abilities and a quicker recovery. While other options imply negative impacts of patient education, they do not accurately reflect its purpose or benefits in a rehabilitation setting. Effective education is designed to reduce confusion and provide clarity, rather than creating confusion. It also enhances rather than delays the recovery process, as informed patients are typically more compliant and proactive about their care. Furthermore, while medication management is part of patient education, it is not the sole focus; education encompasses a broader scope, including lifestyle changes, physical therapy exercises, and coping strategies.

9. What role does the Hippocampus play in the brain?

A. Relay station for sensory information

B. Consolidation of new memories

C. Regulation of muscle tone

D. Control of eye movement

The hippocampus is primarily involved in the consolidation of new memories, which is a critical function in the process of learning. It plays a significant role in transforming short-term memories into long-term memories, allowing us to retain information over time. This consolidation process is essential for memory formation, spatial navigation, and context-based retrieval of information. The operation of the hippocampus in memory consolidation is particularly evident in its interactions with other parts of the brain and its involvement in the formation of episodic and declarative memories. When new experiences occur, they are initially held in short-term memory, and the hippocampus helps to organize and integrate these experiences so they can be stored in long-term memory. In contrast, the other roles mentioned, such as acting as a relay station for sensory information, regulating muscle tone, or controlling eye movement, are primarily functions of other brain structures. For instance, sensory relay functions are mainly attributed to the thalamus, while motor control and muscle tone regulation are more commonly associated with the basal ganglia and cerebellum. The eye movement control involves different neural pathways connected to the brainstem and cerebellum. Thus, the hippocampus is uniquely suited for memory consolidation, setting it apart from these other functions.

10. Why is knowledge of the Americans with Disabilities Act (ADA) relevant for CRRNs?

A. It offers financial compensation guidelines

B. It restricts patients' rights

C. It provides guidelines for patient rights and accessibility in rehabilitation services

D. It eliminates the need for patient consent

Understanding the Americans with Disabilities Act (ADA) is crucial for Certified Rehabilitation Registered Nurses (CRRNs) because the act sets forth important guidelines that promote patient rights and ensure accessibility in rehabilitation services. The ADA aims to prevent discrimination against individuals with disabilities and mandates that facilities provide equal opportunities for access to rehabilitation services. This legal framework helps CRRNs advocate for their patients, ensuring they receive necessary accommodations and support throughout their rehabilitation journey. The ADA outlines expectations for physical accessibility in healthcare settings, such as wheelchair ramps and appropriate signage, which are essential for creating an inclusive environment. Additionally, CRRNs can leverage these guidelines to educate patients and their families about their rights, empowering them to engage in their care actively and advocate for their needs. This knowledge ultimately enhances the quality of care provided, supports compliance with federal regulations, and reinforces the ethical obligation of healthcare professionals to serve all patients equitably.