

NBCSN Nationally Certified School Nurse Practice Exam (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 is the vision screening threshold for Kindergartners?**
 - A. 20/20
 - B. 20/30
 - C. 20/40
 - D. 20/50
- 2. Which of the following is a sign of shunt malfunction in hydrocephalus?**
 - A. Joint pain
 - B. Respiratory distress
 - C. Irritability
 - D. Skin rash
- 3. What is the recommended care for newly pierced ears?**
 - A. Use hydrogen peroxide daily
 - B. Remove metal jewelry immediately
 - C. Wash twice daily with antibacterial soap
 - D. Remove earrings for a week
- 4. What condition is characterized by yellowing of the skin due to excess beta-carotene?**
 - A. Cholestasis
 - B. Jaundice
 - C. Carotenemia
 - D. Hyperbilirubinemia
- 5. In CPR, what should be done if a victim has a pulse but is not breathing?**
 - A. CPR should be initiated immediately
 - B. Give breaths every 3 seconds and check pulse every 2 minutes
 - C. Administer an AED as soon as possible
 - D. Wait for emergency responders to arrive

- 6. Muscular dystrophy is primarily characterized by which of the following?**
- A. Joint stiffness**
 - B. Degeneration of muscle**
 - C. Increased muscle mass**
 - D. Hyperactivity**
- 7. In a triage situation, how should a Level 1 patient be classified?**
- A. Dead or mortally wounded**
 - B. Serious but not life-threatening**
 - C. Immediate, correctable, life-threatening**
 - D. Non-emergent, walking wounded**
- 8. What is the calorie requirement for children aged 4-8 years?**
- A. 800-1000 calories**
 - B. 1000-1200 calories**
 - C. 1400-1600 calories**
 - D. 2000-2400 calories**
- 9. Which law prohibits sharing of medical information in schools?**
- A. HIPAA**
 - B. FERPA**
 - C. IDEA**
 - D. PPRA**
- 10. Which of the following factors is NOT measured by the Denver Developmental Screening Test?**
- A. Fine motor skills**
 - B. Language development**
 - C. Intelligence**
 - D. Gross motor skills**

Answers

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

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Explanations

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1. What is the vision screening threshold for Kindergartners?

- A. 20/20**
- B. 20/30**
- C. 20/40**
- D. 20/50**

The vision screening threshold for Kindergartners is set at 20/40. This means that a child should be able to see at 20 feet what a person with normal vision can see at 40 feet. The significance of this threshold lies in its implications for early childhood education and development. Detecting vision problems at an early age is essential for academic success and overall development, as good vision is critical for learning. A threshold of 20/40 is generally considered reasonable for this age group to ensure that any significant issues are identified early enough to intervene effectively. Children who do not meet this standard may require further evaluation and potential correction to support their educational experiences. Younger children, particularly those in Kindergarten, may not have fully developed visual acuity, so the 20/40 threshold recognizes their developmental stage while still emphasizing the importance of vision in learning. This standard helps ensure that vision impairment does not hinder a child's ability to engage fully in their educational environment.

2. Which of the following is a sign of shunt malfunction in hydrocephalus?

- A. Joint pain**
- B. Respiratory distress**
- C. Irritability**
- D. Skin rash**

Irritability is a common sign of shunt malfunction in hydrocephalus. When a shunt fails to properly drain cerebrospinal fluid (CSF), it can lead to increased intracranial pressure. The brain is sensitive to changes in pressure, and this can manifest in behavioral changes, including irritability, particularly in children. This emotional and behavioral response can indicate that the individual is experiencing discomfort or distress due to the complications arising from issues with the shunt system. Other signs that might indicate shunt malfunction can include headache, vomiting, lethargy, and changes in vision. These symptoms all relate to increased intracranial pressure and necessitate prompt assessment and intervention. While joint pain, respiratory distress, and skin rash can signal various medical conditions, they are not directly associated with shunt malfunction in the context of hydrocephalus.

3. What is the recommended care for newly pierced ears?

- A. Use hydrogen peroxide daily
- B. Remove metal jewelry immediately
- C. Wash twice daily with antibacterial soap**
- D. Remove earrings for a week

For newly pierced ears, the recommended care involves gentle cleansing to prevent infection and promote healing. Washing twice daily with antibacterial soap is effective because it helps to keep the area clean from any bacteria that could enter the newly created piercing. This practice reduces the risk of infection, which is especially important in the early healing stages when the tissue is still vulnerable. Using hydrogen peroxide daily is not recommended, as it can be too harsh and may irritate the piercing, potentially leading to delayed healing. Removing metal jewelry immediately could disrupt the healing process since the earring serves as a guide for the hole; if removed too soon, the hole may close. Additionally, removing earrings for a week is not advisable, as it may lead to the piercing becoming blocked and needing to be repierced. Maintaining a consistent cleaning routine with antibacterial soap while leaving the earrings in place will promote a healthy healing process.

4. What condition is characterized by yellowing of the skin due to excess beta-carotene?

- A. Cholestasis
- B. Jaundice
- C. Carotenemia**
- D. Hyperbilirubinemia

Carotenemia is characterized by the yellowing of the skin caused by an excessive intake of beta-carotene, which is a pigment found in many fruits and vegetables, particularly those that are orange or yellow in color, like carrots and sweet potatoes. Unlike jaundice, which results from elevated bilirubin levels typically due to liver conditions, carotenemia does not result from liver dysfunction and does not affect the sclera of the eyes. The condition is generally harmless, and the yellowing of the skin typically resolves once the beta-carotene intake is reduced. In contrast, cholestasis is a condition related to bile flow obstruction, leading to increased bile acids in the bloodstream, whereas hyperbilirubinemia specifically refers to elevated levels of bilirubin in the blood, typically leading to jaundice. Hence, while jaundice, cholestasis, and hyperbilirubinemia all involve different biochemical pathways or conditions involving the liver or bile, carotenemia is distinctly associated with dietary beta-carotene and is not indicative of any underlying disease state.

5. In CPR, what should be done if a victim has a pulse but is not breathing?

- A. CPR should be initiated immediately**
- B. Give breaths every 3 seconds and check pulse every 2 minutes**
- C. Administer an AED as soon as possible**
- D. Wait for emergency responders to arrive**

If a victim has a pulse but is not breathing, the appropriate action is to provide rescue breaths to support their breathing. Giving breaths every few seconds—specifically every 3 seconds—ensures that the person receives necessary oxygen to prevent brain damage and maintain vital organ function while monitoring the pulse regularly every 2 minutes. This method allows you to assess the effectiveness of the rescue breaths and whether further intervention is needed. It's important to note that initiating CPR would not be appropriate in this scenario since the victim does have a pulse; CPR is reserved for those who are unresponsive and lack a detectable pulse. Administering an AED is intended for situations where there is no pulse, primarily to treat cardiac arrest. Waiting for emergency responders to arrive, while sometimes necessary, would not provide immediate assistance to the victim and could compromise their condition further if assistance is delayed. Providing breaths in the absence of autonomous breathing while ensuring the pulse remains stable is a critical intervention in this scenario.

6. Muscular dystrophy is primarily characterized by which of the following?

- A. Joint stiffness**
- B. Degeneration of muscle**
- C. Increased muscle mass**
- D. Hyperactivity**

Muscular dystrophy is primarily characterized by the degeneration of muscle, which is a critical aspect of the condition. This progressive muscle weakness and eventual loss of muscle mass occurs due to genetic mutations that affect the proteins necessary for healthy muscle function. As the disease advances, individuals experience a decline in strength and mobility, leading to significant physical disabilities. In contrast, joint stiffness is not a defining feature of muscular dystrophy, although individuals may experience secondary joint problems due to muscle weakness. Increased muscle mass would not occur in this condition; rather, muscle tissue deteriorates, leading to a reduction in muscle fibers. Hyperactivity is also unrelated to muscular dystrophy; individuals may actually display reduced movement and activity levels because of muscle weakness. The focus on muscle degeneration accurately reflects the underlying pathology and symptoms associated with muscular dystrophy.

7. In a triage situation, how should a Level 1 patient be classified?

- A. Dead or mortally wounded**
- B. Serious but not life-threatening**
- C. Immediate, correctable, life-threatening**
- D. Non-emergent, walking wounded**

In a triage situation, a Level 1 patient is classified as "Immediate, correctable, life-threatening." This classification is used for individuals who require urgent medical attention to survive. Such patients may exhibit severe conditions that, if not addressed promptly, could lead to fatal outcomes. Examples include those with compromised airways, severe hemorrhage, or critical injuries. The emphasis on "correctable" indicates that, while these patients are in critical condition, there are definitive interventions available that can significantly improve their chances of survival if treatment is initiated without delay. This classification ensures that healthcare resources are allocated effectively to save lives during emergencies. In contrast, other classifications such as "Dead or mortally wounded" pertain to casualties who are beyond medical assistance and require no intervention, while "Serious but not life-threatening" describes patients who have significant injuries but can wait a bit longer for care without immediate risk to life. "Non-emergent, walking wounded" refers to individuals who are stable and can wait for treatment without jeopardizing their health, indicating that they are at a much lower priority level.

8. What is the calorie requirement for children aged 4-8 years?

- A. 800-1000 calories**
- B. 1000-1200 calories**
- C. 1400-1600 calories**
- D. 2000-2400 calories**

For children aged 4 to 8 years, the recommended calorie intake is generally around 1,200 to 1,600 calories per day, which aligns closely with the range provided in the chosen answer. At this developmental stage, children are typically very active, and their bodies require a sufficient amount of energy to support growth, maintain activity levels, and meet their overall nutritional needs. This age group is going through critical growth phases where they are building muscle and bone mass, and their metabolic rate is relatively high. Therefore, it's essential to ensure they consume a balanced diet rich in nutrients to support not only their caloric needs but also provide essential vitamins and minerals necessary for their development. The other options provide calorie ranges that do not meet the physiological needs of children in this age bracket. For instance, the lower calorie intakes would be insufficient to cover the energy expenditure of growing children, while the higher intakes would be inappropriate and potentially lead to excessive weight gain or other health issues.

9. Which law prohibits sharing of medical information in schools?

- A. HIPAA**
- B. FERPA**
- C. IDEA**
- D. PPRA**

The Family Educational Rights and Privacy Act (FERPA) is the correct choice because it specifically protects the privacy of student education records, which include medical information maintained by schools. FERPA gives parents and eligible students the right to access their educational records, request amendments, and control disclosure of personally identifiable information from those records. While HIPAA (Health Insurance Portability and Accountability Act) sets standards for the protection of health information, its primary application is to healthcare providers and insurers rather than to educational institutions, except in specific circumstances involving school-based health centers. IDEA (Individuals with Disabilities Education Act) focuses on ensuring services to children with disabilities and also has confidentiality provisions, but it does not primarily govern the sharing of medical information in schools. The Protection of Pupil Rights Amendment (PPRA) deals with the policies related to surveys and parental consent in educational settings rather than direct medical information. Thus, FERPA is the relevant law that directly pertains to the sharing and privacy of medical information in educational settings, outlining the framework schools must follow to protect students' privacy rights regarding their educational records, which encompass health information.

10. Which of the following factors is NOT measured by the Denver Developmental Screening Test?

- A. Fine motor skills**
- B. Language development**
- C. Intelligence**
- D. Gross motor skills**

The Denver Developmental Screening Test focuses on assessing various developmental milestones in children, particularly in the areas of gross motor skills, fine motor skills, language development, and personal-social skills. It is designed to identify any potential delays in development in young children, typically from birth to six years of age. The test evaluates gross motor skills, which include activities such as sitting, walking, and running; fine motor skills, which involve smaller actions like grabbing objects and using utensils; and language development, which encompasses the ability to understand and use spoken language. Intelligence, however, is not directly assessed by the Denver Developmental Screening Test. While the test can provide insights into a child's developmental level and may indicate areas of concern, it does not measure cognitive abilities or intelligence in a formal sense. Instead, other standardized tests specifically designed to assess cognitive functioning are needed to evaluate intelligence comprehensively. Therefore, the correct answer is that intelligence is not a factor measured by the Denver Developmental Screening Test, as the test is primarily focused on developmental milestones rather than an assessment of overall cognitive ability.

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://nbcnexamzify.com>

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

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