

NCLEX GERIATRIC EXAM 1 PRACTICE (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. To reduce adverse drug events in older patients, which measure targets preparation errors?**
 - A. Conduct a monthly quality improvement study
 - B. Monitor each nurse's ability to detect preparation errors
 - C. Discuss the importance of not missing medication doses
 - D. Review pharmacy documentation regarding drug–drug interactions
- 2. The best question to obtain information about life trajectory of an older client is which of the following?**
 - A. Tell me about your spouse and children?
 - B. How do you feel about your treatment plan?
 - C. Would you like me to contact a chaplain for you?
 - D. Do you have an advanced directive or living will?
- 3. Which scenario best reflects cultural marginality?**
 - A. Acculturating rapidly and fully
 - B. Feeling disconnected from one's culture
 - C. Embracing many different cultural practices
 - D. Always attending diverse religious services
- 4. For a deaf patient, which communication approach is most appropriate?**
 - A. Use the hospital-approved interpreter program
 - B. Use the patient's family members to communicate
 - C. Ask the patient to read questions off the computer screen
 - D. Seek help from any staff member currently working
- 5. A frail older resident in a long-term care setting becomes increasingly irritable and naps during the day. Which body system is most implicated in this behavioral change?**
 - A. Immune
 - B. Neurological
 - C. Respiratory
 - D. Musculoskeletal

- 6. Which practice best supports protecting a nurse against a legal claim?**
- A. Consistently follow the physician's orders.
 - B. Document carefully all nursing care provided.
 - C. Avoid using emails and fax machines to send client information.
 - D. Always provide friendly and respectful care.
- 7. How should the hospital administrator describe an acute care of the elderly (ACE) unit to the nursing staff?**
- A. It will be run like a nursing home
 - B. It is no different from other hospital units
 - C. It primarily aims to return patients to their homes
 - D. It will be guided by nurse-driven protocols
- 8. Older adults with diabetes on high-dose antibiotic therapy should be monitored for which effect?**
- A. Diarrhea
 - B. Dizziness
 - C. Headaches
 - D. Lethargy
- 9. What statements about muscle mass and aging is accurate?**
- A. Exercise can slow the loss of muscle mass.
 - B. Increasing protein and fat intake will increase muscle mass.
 - C. Muscle mass declines by 40% between ages 30 and 70.
 - D. There is little that can be done to reduce the loss of muscle mass.
- 10. Which statement best demonstrates culturally competent care that considers disease risk across different groups?**
- A. Speak the patient's primary language
 - B. Use standardized assessment instruments in health evaluations
 - C. Approach patients of a particular ethnic group in the same manner
 - D. Know prevalence, incidence, and risk factors for diseases specific to different ethnic groups

Answers

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

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Explanations

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1. To reduce adverse drug events in older patients, which measure targets preparation errors?

- A. Conduct a monthly quality improvement study
- B. Monitor each nurse's ability to detect preparation errors**
- C. Discuss the importance of not missing medication doses
- D. Review pharmacy documentation regarding drug–drug interactions

To cut adverse drug events related to preparation errors, the most effective approach is to assess and strengthen the frontline ability to catch mistakes during medication preparation. Monitoring each nurse's ability to detect preparation errors directly targets the point where errors are introduced and can be corrected before administration. This focused measure supports training, bedside checks, and system safeguards (like double-checks or bar-code verification) that prevent incorrect drugs, doses, or labeling from reaching the patient. The other options are less directly tied to preparation mistakes. A monthly quality improvement study is broad and may not specifically address preparation practices; stressing not missing doses targets timing rather than the accuracy of preparation; and reviewing pharmacy documentation about drug–drug interactions addresses prescribing or dispensing safety, not the preparation process itself.

2. The best question to obtain information about life trajectory of an older client is which of the following?

- A. Tell me about your spouse and children?**
- B. How do you feel about your treatment plan?
- C. Would you like me to contact a chaplain for you?
- D. Do you have an advanced directive or living will?

Understanding an older adult's life trajectory starts with learning about their social world and who supports them. Asking about a spouse and children opens a narrative about relationships, caregiving resources, living arrangements, and long-term goals. This information helps you see how the person has organized their life, who is likely to be involved in decisions, and what kinds of changes or plans might be needed as they age. The other options focus on immediate care decisions or spiritual support rather than the broader life course. Asking about feelings toward the treatment plan targets current medical decisions, not long-range life context. Offering to contact a chaplain addresses spiritual needs, which is important but doesn't reveal the person's life path. Inquiring about an advanced directive or living will focuses on future medical decisions, not the overall trajectory of daily living and support systems.

3. Which scenario best reflects cultural marginality?

- A. Acculturating rapidly and fully
- B. Feeling disconnected from one's culture**
- C. Embracing many different cultural practices
- D. Always attending diverse religious services

Cultural marginality occurs when someone lacks a sense of belonging to any culture, feeling detached from both their heritage and the mainstream. Feeling disconnected from one's culture captures this directly, showing no strong cultural affiliation and a sense of being on the cultural periphery. Acculturating rapidly and fully implies adopting the dominant culture while retaining some heritage, which reduces marginality. Embracing many different cultural practices suggests a blended or bicultural identity, not marginality. Always attending diverse religious services indicates ongoing engagement across beliefs, again not marginality. In practice, recognizing cultural marginality is important in geriatrics because it can affect social support, health beliefs, and adjustment to aging, so clinicians should explore the patient's sense of cultural belonging and provide culturally responsive care.

4. For a deaf patient, which communication approach is most appropriate?

- A. Use the hospital-approved interpreter program**
- B. Use the patient's family members to communicate
- C. Ask the patient to read questions off the computer screen
- D. Seek help from any staff member currently working

Clear, accurate, and confidential communication with a deaf patient is best achieved by using the hospital-approved interpreter program. This provides trained interpreters who understand medical terminology and preserve privacy, ensuring the patient fully understands diagnoses, treatments, and consent. Relying on family members can lead to gaps in translation, bias, or breaches of confidentiality. Asking the patient to read questions off a computer screen assumes literacy and may still miss nonverbal cues or nuances. Asking any staff member for help is unreliable for accuracy and privacy. When possible, the interpreter program should be engaged to facilitate the conversation.

5. A frail older resident in a long-term care setting becomes increasingly irritable and naps during the day. Which body system is most implicated in this behavioral change?

- A. Immune
- B. Neurological**
- C. Respiratory
- D. Musculoskeletal

Changes in behavior and increased daytime napping in an elderly, frail resident point to alterations in brain function that regulate arousal, attention, and mood. The nervous system controls the sleep–wake cycle and how we respond to our environment, so when it's not functioning optimally—such as in delirium or neurodegenerative processes—the result can be irritability and daytime sleepiness. While infections, respiratory issues, or musculoskeletal pain can contribute to fatigue or discomfort, they don't directly govern behavior and wakefulness the way the nervous system does. Therefore, the neurological system is the most implicated in this behavioral change. If delirium is a concern, assess for acute changes in mental status, attention, and awareness, and review medications and potential triggers.

6. Which practice best supports protecting a nurse against a legal claim?

- A. Consistently follow the physician's orders.
- B. Document carefully all nursing care provided.**
- C. Avoid using emails and fax machines to send client information.
- D. Always provide friendly and respectful care.

Accurate, complete, and timely documentation is the most important way a nurse builds a shield against legal claims. When the chart clearly records exactly what care was provided, the patient's responses, and why actions were taken, it creates an objective, defensible account of the nursing process. This documentation shows that standards of care were followed, supports continuity of care, and helps others understand what happened, reducing ambiguity if a claim arises. To be effective, charting should be specific and factual: note vital signs, medications given or refused, treatments performed, patient education provided, changes in condition, and any deviations from the plan, including who performed and witnessed care, with exact dates and times and the nurse's signature. If errors occur, correct them properly with a single line, date and time, and initials. While following physician orders is important, it doesn't by itself create the comprehensive record that protects the nurse; ensuring privacy and confidentiality is essential too, but secure communication addresses another risk area rather than the core protection that thorough documentation provides. Providing friendly, respectful care is vital for the patient experience, but it doesn't substitute for documented evidence of care and decision-making.

7. How should the hospital administrator describe an acute care of the elderly (ACE) unit to the nursing staff?

- A. It will be run like a nursing home
- B. It is no different from other hospital units
- C. It primarily aims to return patients to their homes
- D. It will be guided by nurse-driven protocols**

ACE units organize care around nurse-driven, evidence-based protocols that empower bedside nurses to initiate timely, standardized interventions for common geriatric issues. This approach helps prevent delirium and functional decline, promotes early mobilization and appropriate medication management, and ensures coordinated, geriatrics-focused care within the acute hospital setting. While discharge goals are important, the defining feature is that care is guided by nurse-led protocols, enabling consistent, efficient management tailored to older adults. The other options describe settings or aims that don't capture this core practical model.

8. Older adults with diabetes on high-dose antibiotic therapy should be monitored for which effect?

- A. Diarrhea**
- B. Dizziness
- C. Headaches
- D. Lethargy

*High-dose antibiotics disrupt the normal gut flora, which can lead to antibiotic-associated diarrhea. In older adults, dehydration from diarrhea can quickly destabilize fluid and electrolyte balance, complicate glucose control, and raise the risk of kidney strain. Diarrhea can also signal the development of *C. difficile* infection, a serious concern in the elderly. Other reported effects like dizziness, headaches, or lethargy are less specific indicators of a gut-related complication and don't carry the same immediate risk for dehydration and glycemic instability. So, monitoring for diarrhea is essential to catch dehydration and potential infection early and protect diabetes management.*

9. What statements about muscle mass and aging is accurate?

- A. Exercise can slow the loss of muscle mass.**
- B. Increasing protein and fat intake will increase muscle mass.
- C. Muscle mass declines by 40% between ages 30 and 70.
- D. There is little that can be done to reduce the loss of muscle mass.

Regular exercise, especially resistance training, slows aging-related muscle loss (sarcopenia) by boosting muscle protein synthesis, preserving fiber size and neural activation, and maintaining strength and function. While adequate protein supports repair, simply increasing protein and fat intake without a stimulus to build muscle does not reliably increase muscle mass. The amount of muscle lost with aging varies and isn't a fixed 40% decline for everyone, so the idea that little can be done is not accurate. With consistent activity and proper nutrition, the rate of muscle loss can be reduced, making exercise the most effective way to preserve muscle as we age.

10. Which statement best demonstrates culturally competent care that considers disease risk across different groups?

- A. Speak the patient's primary language
- B. Use standardized assessment instruments in health evaluations
- C. Approach patients of a particular ethnic group in the same manner
- D. Know prevalence, incidence, and risk factors for diseases specific to different ethnic groups**

Recognizing that disease risk varies across ethnic groups and tailoring care accordingly is what demonstrates culturally competent practice. When you know the prevalence, incidence, and specific risk factors for diseases in different populations, you can assess each patient's true risk more accurately and design prevention, screening, and education that are relevant and respectful. This approach avoids assuming all patients have the same risk and supports individualized care that reflects real population differences. Speaking the patient's primary language helps communication, but it doesn't by itself address how disease patterns differ among groups. Using standardized instruments may not be culturally valid for all populations and can miss important context. Treating every patient the same ignores meaningful variations in risk. The idea here is to integrate knowledge of how diseases affect different groups into clinical decisions, making care more responsive and appropriate.

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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://nclexgeriatric1.examzify.com>

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

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