

NEXT GENERATION NCLEX (NGN) B PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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THE FULL VERSION STUDY GUIDE

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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. Which food item is highest in nonheme iron for an adolescent with iron deficiency anemia?**
 - A. 1/2 cup whole milk
 - B. 1 cup orange juice
 - C. 1/2 cup raisins
 - D. 1 cup raw carrots
- 2. Why is understanding patient-centered care important in the NGN exam?**
 - A. It focuses on the nurse's perspective only
 - B. It emphasizes the importance of individual patient needs
 - C. It ignores a collaborative approach
 - D. It is not relevant to nursing practice
- 3. What is a key factor in effective communication within the NGN framework?**
 - A. Limiting information to medical jargon
 - B. Engaging patients in open dialogue
 - C. Providing information only when asked
 - D. Using only written communication
- 4. What intervention should be included in the care plan for a preschooler with cystic fibrosis concerning nutrition?**
 - A. Administer pancreatic enzymes 2 hours after meals
 - B. Discontinue pancreatic enzymes if steatorrhea occurs
 - C. Limit fluid intake to 750 mL per day
 - D. Increase dietary fat content to 40% of total calories
- 5. What approach should a nurse take when educating a patient about their medications during discharge?**
 - A. Assume they understand the prescribed medications
 - B. Provide clear explanations and instructions
 - C. Focus primarily on the side effects
 - D. Limit interaction to avoid overwhelming the patient

- 6. What is a crucial strategy for managing patients with a history of urinary tract infections (UTIs)?**
- A. Providing complex medication regimens
 - B. Teaching effective prevention strategies
 - C. Encouraging minimal fluid intake
 - D. Relying solely on antibiotics
- 7. What is the significance of understanding legal implications in nursing regarding NGN preparedness?**
- A. It ensures compliance with hospital policies only.
 - B. It helps ensure candidates make compliant decisions to safeguard patients and themselves.
 - C. It is irrelevant to patient safety.
 - D. It emphasizes the role of technology over legal knowledge.
- 8. Which method is best for assessing dehydration in toddlers?**
- A. Monitoring skin turgor
 - B. Counting the number of wet diapers
 - C. Assessing capillary refill time
 - D. Checking for periorbital swelling
- 9. What does the term 'client-centered care' refer to in an NGN context?**
- A. Providing care based solely on nurse preferences
 - B. Involving clients in their own care decisions and respecting their needs
 - C. Focusing exclusively on medical treatments
 - D. Implementing standardized care plans without adjustments
- 10. Why is it crucial for nurses to be aware of a patient's medical history during assessments?**
- A. To avoid gathering unnecessary information
 - B. To identify risk factors and plan appropriate care
 - C. To ensure they provide entertainment during hospital stays
 - D. To fill in administrative paperwork efficiently

Answers

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

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Explanations

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1. Which food item is highest in nonheme iron for an adolescent with iron deficiency anemia?

- A. 1/2 cup whole milk
- B. 1 cup orange juice
- C. 1/2 cup raisins**
- D. 1 cup raw carrots

The food item that is highest in nonheme iron for an adolescent with iron deficiency anemia is raisins. Nonheme iron is the type of iron primarily found in plant-based foods, and it is less readily absorbed by the body compared to heme iron, which is found in animal products. Raisins are a dried form of grapes and are known to be a significant source of nonheme iron, providing a higher concentration of this essential nutrient compared to other plant-based foods listed. They also offer additional nutrients and energy, making them a beneficial snack for someone needing to boost their iron intake. In contrast, options such as whole milk, orange juice, and raw carrots either contain minimal amounts of iron or are sources of other nutrients that do not significantly contribute to iron levels. Whole milk, while nutritious, is not a good source of iron. Orange juice, although rich in vitamin C (which can enhance iron absorption when consumed alongside iron-rich foods), does not contain iron itself. Raw carrots are also low in iron content. Therefore, raisins stand out as the best option for increasing nonheme iron intake in an adolescent with iron deficiency anemia.

2. Why is understanding patient-centered care important in the NGN exam?

- A. It focuses on the nurse's perspective only
- B. It emphasizes the importance of individual patient needs**
- C. It ignores a collaborative approach
- D. It is not relevant to nursing practice

Understanding patient-centered care is crucial in the NGN exam because it emphasizes the importance of individual patient needs. Patient-centered care places the patient at the core of the healthcare process, recognizing that each patient has unique preferences, characteristics, and values that must be considered in their care. This approach involves actively engaging patients in their own health care decisions and ensuring that the care provided aligns with their personal goals and lifestyle. By prioritizing individual needs, patients often experience better satisfaction, adherence to treatment, and positive health outcomes. The NGN exam assesses not only knowledge but also the application of concepts that enhance patient outcomes, and understanding patient-centered care is essential for nurses to provide holistic and personalized care. In this context, focusing solely on the nurse's perspective or dismissing the collaborative approach would be contrary to the principles of effective nursing practice. Similarly, considering patient-centered care irrelevant to nursing practice would overlook a fundamental aspect of providing quality care in today's healthcare environment.

3. What is a key factor in effective communication within the NGN framework?

- A. Limiting information to medical jargon
- B. Engaging patients in open dialogue**
- C. Providing information only when asked
- D. Using only written communication

Engaging patients in open dialogue is crucial for effective communication within the NGN framework because it fosters a collaborative relationship between healthcare providers and patients. Open dialogue encourages patients to express their concerns, ask questions, and actively participate in their care. This two-way communication not only enhances patient understanding and satisfaction but also promotes adherence to treatment plans and improves health outcomes. In the context of healthcare, where patient-centered care is increasingly emphasized, dialogue allows healthcare professionals to assess patients' knowledge levels, share information in a more relatable manner, and address any misconceptions. This approach aligns with the principles of the NGN framework, which focus on holistic, patient-centered strategies in nursing practice. Effective communication requires more than just relaying information; it involves creating a safe space where patients feel valued and understood. By engaging in open dialogue, healthcare providers can better identify patient needs and tailor their interventions accordingly.

4. What intervention should be included in the care plan for a preschooler with cystic fibrosis concerning nutrition?

- A. Administer pancreatic enzymes 2 hours after meals
- B. Discontinue pancreatic enzymes if steatorrhea occurs
- C. Limit fluid intake to 750 mL per day
- D. Increase dietary fat content to 40% of total calories**

The correct intervention for a preschooler with cystic fibrosis concerning nutrition is to increase the dietary fat content to 40% of total calories. This recommendation is based on the need for children with cystic fibrosis to meet their energy needs due to the increased metabolic demands associated with the disease. Cystic fibrosis affects the pancreas, impairing its ability to produce digestive enzymes necessary for breaking down food effectively. A significant challenge for those affected is maintaining adequate nutrition and weight gain. Increasing the dietary fat content in their meals can help provide the necessary calories that are often needed to support growth and development. In fact, many children with cystic fibrosis require a high-calorie, high-fat diet to offset malabsorption and sustain energy levels. Including pancreatic enzymes with meals is essential for improving the digestion of fats, protein, and carbohydrates, but the focus on increasing dietary fat specifically addresses the nutritional needs of the child effectively. Therefore, ensuring that fat constitutes a substantial portion of their total caloric intake helps to compensate for the malabsorption issues they face.

5. What approach should a nurse take when educating a patient about their medications during discharge?

- A. Assume they understand the prescribed medications
- B. Provide clear explanations and instructions**
- C. Focus primarily on the side effects
- D. Limit interaction to avoid overwhelming the patient

Providing clear explanations and instructions when educating a patient about their medications during discharge is essential for several reasons. First, it ensures that the patient comprehends the purpose of each medication, how to take it, the correct dosages, and the schedule for administration. Effective communication is crucial, as it empowers patients to manage their health and make informed decisions post-discharge. Moreover, by offering detailed instructions, the nurse can address any potential concerns or questions the patient may have, which can enhance adherence to the medication regimen. Patients who clearly understand their medications are more likely to follow the prescribed plan, which can lead to better health outcomes and reduce the risk of complications related to misunderstanding medication regimens. This approach fosters a collaborative relationship between the nurse and the patient, which is vital for promoting overall health literacy and patient engagement. Engaging patients in their care can also mitigate feelings of anxiety associated with self-management after hospital discharge.

6. What is a crucial strategy for managing patients with a history of urinary tract infections (UTIs)?

- A. Providing complex medication regimens
- B. Teaching effective prevention strategies**
- C. Encouraging minimal fluid intake
- D. Relying solely on antibiotics

Teaching effective prevention strategies is crucial for managing patients with a history of urinary tract infections (UTIs). This approach empowers patients to reduce the frequency of UTIs by understanding and adopting behaviors that help prevent them. Preventive strategies may include staying hydrated, practicing proper hygiene, urinating after intercourse, and using barrier methods of contraception instead of diaphragms or spermicides. Educating patients about these measures not only helps them take an active role in their health care but also fosters long-term health habits that can significantly reduce the recurrence of UTIs. This proactive approach can lower the reliance on antibiotics and the risk of antibiotic resistance, which is an important aspect of contemporary healthcare management. The other options, while they may have some relevance, do not focus on empowering the patient with knowledge to prevent future infections, which is the primary goal in the management of recurrent UTIs.

7. What is the significance of understanding legal implications in nursing regarding NGN preparedness?

- A. It ensures compliance with hospital policies only.
- B. It helps ensure candidates make compliant decisions to safeguard patients and themselves.**
- C. It is irrelevant to patient safety.
- D. It emphasizes the role of technology over legal knowledge.

Understanding legal implications in nursing is crucial for both patient safety and the protection of healthcare professionals. The correct answer highlights that a comprehensive grasp of legal considerations enables nurses to make informed and compliant decisions. This understanding helps safeguard not only the patients under their care but also themselves from potential legal repercussions. By being aware of the legal framework that governs nursing practice, including issues related to consent, confidentiality, and scope of practice, nurses can navigate complex clinical situations effectively. This knowledge is fundamental to minimizing the risk of malpractice and ensuring that care aligns with established legal standards. Furthermore, this legal acumen is increasingly relevant in the evolving landscape of healthcare, particularly as it pertains to new technologies and care models that may introduce unique legal challenges. Therefore, cultivating this understanding is a vital component of preparing for practice in the Next Generation NCLEX context, as it integrates clinical skills with a solid foundation in legal principles. In contrast, the other options miss the broader implications of legal awareness. Focusing solely on compliance with hospital policies lacks the complete picture, as it does not encompass the wider range of legal obligations nurses have. Declaring it irrelevant to patient safety undermines the connection between legal knowledge and ethics in nursing practice. Lastly, emphasizing technology over legal knowledge ignores that technology

8. Which method is best for assessing dehydration in toddlers?

- A. Monitoring skin turgor
- B. Counting the number of wet diapers**
- C. Assessing capillary refill time
- D. Checking for periorbital swelling

Monitoring the number of wet diapers is a highly effective method for assessing dehydration in toddlers because it provides direct information about their fluid intake and output. In young children, especially toddlers, urine output is a critical indicator of hydration status. A decrease in the number of wet diapers indicates that the child may not be taking in enough fluids or is losing excess fluids, which is a key sign of dehydration. Tracking the frequency of wet diapers allows health care providers and caregivers to gauge overall hydration levels, as toddlers typically should have several wet diapers throughout the day if they are adequately hydrated. This method is practical and non-invasive, making it suitable for monitoring hydration status in a pediatric population. Other methods, such as assessing skin turgor and checking capillary refill time, can provide useful information about dehydration but may not be as definitive in young children. Skin turgor can be less reliable in this age group due to the inherent differences in skin elasticity. Capillary refill time can indicate perfusion and circulatory status but does not specifically measure hydration levels. Periorbital swelling is not a reliable indicator of dehydration and may actually suggest fluid overload or other conditions. Overall, counting the number of wet diapers is the most direct and effective way to assess hydration in toddlers,

9. What does the term 'client-centered care' refer to in an NGN context?

- A. Providing care based solely on nurse preferences
- B. Involving clients in their own care decisions and respecting their needs**
- C. Focusing exclusively on medical treatments
- D. Implementing standardized care plans without adjustments

The term 'client-centered care' in the context of NGN refers to the approach that actively involves clients in their care decisions while respecting their individual needs, preferences, and values. This concept emphasizes the importance of collaboration between healthcare providers and clients, ensuring that care aligns with what matters most to the individual. By incorporating clients' insights and choices, healthcare professionals can develop more personalized and effective care plans, ultimately leading to better health outcomes and increased client satisfaction. This approach contrasts with care models that do not prioritize client involvement, such as those focused on standardized care plans or those driven solely by the preferences of the healthcare providers. In client-centered care, the client's perspective is crucial, fostering a partnership in the care process.

10. Why is it crucial for nurses to be aware of a patient's medical history during assessments?

- A. To avoid gathering unnecessary information
- B. To identify risk factors and plan appropriate care**
- C. To ensure they provide entertainment during hospital stays
- D. To fill in administrative paperwork efficiently

Understanding a patient's medical history is fundamental for nurses during assessments because it allows for the identification of risk factors that may influence the patient's current health status and their response to treatment. By knowing a patient's past illnesses, surgeries, allergies, and medications, nurses can better anticipate potential complications, tailor interventions, and create an individualized care plan that addresses the specific needs of the patient. This comprehensive approach enhances patient safety, improves health outcomes, and supports more effective communication among the healthcare team. The other options do not encompass the core importance of medical history in nursing assessments. For instance, avoiding unnecessary information, while relevant, does not fully capture the depth of understanding that medical history provides regarding patient care. Similarly, providing entertainment is not a nursing responsibility, nor is administrative efficiency the primary goal in patient assessments. Focus should always remain on delivering high-quality, patient-centered care.

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://nextgennclxb.examzify.com>

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

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