

Nursing Acceleration Challenge Exam (NACE) PN-RN Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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SAMPLE

Questions

SAMPLE

- 1. What respiratory rate should be reported to the physician after extubation?**
 - A. 8 per minute.**
 - B. 24 per minute.**
 - C. 12 per minute.**
 - D. 30 per minute.**
- 2. What type of fever is characterized by a wide fluctuation in body temperature?**
 - A. Intermittent**
 - B. Remittent**
 - C. Sustained**
 - D. Relapsing**
- 3. If a patient in an air-fluidized bed requires CPR, what should the nurse first do?**
 - A. Turn off the bed's motor**
 - B. Remove the patient from the bed**
 - C. Position the patient on a backboard**
 - D. Proceed with CPR**
- 4. What are common signs of hyperglycemia?**
 - A. Increased hunger and decreased thirst**
 - B. Increased thirst, frequent urination, fatigue, and blurred vision**
 - C. Drowsiness and increased heart rate**
 - D. Sweating and muscle cramps**
- 5. What are leading causes of preventable hospital readmissions?**
 - A. Regular exercise and patient awareness**
 - B. Poor discharge planning and lack of follow-up care**
 - C. High-quality patient education and waiting times**
 - D. Unrestricted visitor access while hospitalized**

- 6. What are important considerations when caring for a patient with a tracheostomy?**
- A. Regular suctioning and observing ventilation patterns**
 - B. Maintaining a sterile environment only**
 - C. Regular suctioning, ensuring the trach tube is secure, and monitoring for signs of respiratory distress**
 - D. Frequent repositioning and checking blood pressure**
- 7. Which behavior best helps a nurse build trust with a patient?**
- A. Using terms of endearment, such as "honey."**
 - B. Telling the patient to trust the nursing staff.**
 - C. Promptly responding to the patient's requests.**
 - D. Addressing the patient by first name.**
- 8. A Jehovah's Witness patient requires a blood transfusion due to blood loss. What is the correct action for the nurse?**
- A. Provide full information and the reasons for the transfusion**
 - B. Assume the patient will not accept a transfusion and report this to the physician**
 - C. Tell the patient that he may die without the transfusion**
 - D. Tell the patient that his health is more important than religious beliefs**
- 9. What is an important assessment after medication administration showing signs of allergic reaction?**
- A. Administer an oral antihistamine.**
 - B. Check for any bleeding.**
 - C. Monitor vital signs closely.**
 - D. Observe for changes in skin condition.**
- 10. A patient doubts their self-image after a combat-related amputation. What issue are they likely facing?**
- A. Body image**
 - B. Self-esteem**
 - C. Mobility**
 - D. Motivation**

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. What respiratory rate should be reported to the physician after extubation?

- A. 8 per minute.**
- B. 24 per minute.**
- C. 12 per minute.**
- D. 30 per minute.**

A respiratory rate of 8 breaths per minute is considered bradypnea, which can indicate inadequate respiratory effort and potential respiratory failure, especially following extubation. After removing a patient from mechanical ventilation, it is crucial to monitor their respiratory function closely, as they may not be able to maintain adequate oxygenation and ventilation independently. A healthy respiratory rate typically ranges from 12 to 20 breaths per minute for adults. Therefore, a rate of 8 reflects a significant concern that should be communicated to the physician for further assessment and possible intervention to ensure the patient's airway and respiratory status are secure. Monitoring rates such as 24 or 30 breaths per minute could indicate tachypnea, which might also require attention, but 8 breaths per minute is critically low and warrants immediate clinical consideration.

2. What type of fever is characterized by a wide fluctuation in body temperature?

- A. Intermittent**
- B. Remittent**
- C. Sustained**
- D. Relapsing**

Remittent fever is characterized by a wide fluctuation in body temperature, typically defined as variations where the temperature remains elevated but does not return to normal. This type of fever fluctuates significantly, with the patient experiencing considerable swings between high and lower temperatures during the course of the day, yet it never fully resolves to a normal temperature. In contrast, intermittent fever involves periodic episodes of fever separated by periods of normal temperature, while sustained fever maintains a consistently high temperature without significant fluctuations. Relapsing fever features episodes of fever that alternate with periods of normal temperature, but these episodes typically last longer and are more cyclic in nature. Understanding these distinctions is critical when evaluating a patient's condition and determining the underlying cause of their symptoms.

3. If a patient in an air-fluidized bed requires CPR, what should the nurse first do?

- A. Turn off the bed's motor**
- B. Remove the patient from the bed**
- C. Position the patient on a backboard**
- D. Proceed with CPR**

The correct action is to turn off the bed's motor before proceeding with CPR. This step is crucial because an air-fluidized bed uses a motor to circulate warm air and create a fluid-like environment for the patient. When administering CPR, it is essential to have a stable surface to perform chest compressions effectively. By turning off the motor, the nurse ensures that the bed will not shift or move during the resuscitation efforts, allowing for better control and effectiveness of the CPR process. Moving directly to remove the patient from the bed or placing them on a backboard may introduce unnecessary delays that could impede timely resuscitation efforts. Furthermore, proceeding with CPR immediately without turning off the bed could complicate the process, potentially causing instability or difficulty in achieving effective compressions.

4. What are common signs of hyperglycemia?

- A. Increased hunger and decreased thirst**
- B. Increased thirst, frequent urination, fatigue, and blurred vision**
- C. Drowsiness and increased heart rate**
- D. Sweating and muscle cramps**

Hyperglycemia, or high blood sugar, is characterized by a variety of signs and symptoms that reflect the body's response to excessive glucose in the bloodstream. The correct choice highlights common signs that are typically experienced by individuals with hyperglycemia. Increased thirst, also known as polydipsia, occurs when the body attempts to dilute the excess sugar in the blood, leading to dehydration. Frequent urination, or polyuria, results from the kidneys filtering out the excess glucose, which draws water along with it, thereby increasing urine output. Fatigue is often a symptom because the body's cells are not able to utilize glucose properly, which means they are not getting the energy they need. Blurred vision can be a result of fluid changes in the lenses of the eyes due to shifts in osmotic gradients caused by high blood glucose levels. These symptoms collectively indicate the body's stress response to elevated blood sugar and the physiological mechanisms dealing with this excess. Recognizing these signs is crucial for early intervention and management of hyperglycemia to prevent complications such as diabetic ketoacidosis or hyperglycemic hyperosmolar state. Understanding these signs can be imperative for nurses and healthcare providers in identifying when a patient may need further evaluation or treatment for diabetes management.

5. What are leading causes of preventable hospital readmissions?

- A. Regular exercise and patient awareness**
- B. Poor discharge planning and lack of follow-up care**
- C. High-quality patient education and waiting times**
- D. Unrestricted visitor access while hospitalized**

The leading causes of preventable hospital readmissions primarily revolve around issues related to discharge planning and follow-up care. Effective discharge planning involves ensuring that patients understand their diagnoses, medications, and necessary lifestyle changes before leaving the hospital. When discharge planning is inadequate, patients may leave without a clear understanding of their post-discharge care plan or without the necessary resources and support, leading to confusion and exacerbation of their condition. Lack of follow-up care is equally critical, as it often results in patients not receiving the necessary medical attention after they leave the hospital. Follow-up appointments are vital for monitoring recovery and managing chronic conditions. When there is no follow-up care, health issues may worsen unnoticed, leading to readmissions that could have been avoided with proper post-discharge management. In contrast, options like regular exercise, patient awareness, high-quality patient education, and unrestricted visitor access do play roles in patient health and satisfaction but are not directly tied to the structural and systemic failures that typically lead to preventable readmissions. Effective communication and care coordination during and after hospitalization are crucial elements that directly influence the likelihood of readmission.

6. What are important considerations when caring for a patient with a tracheostomy?

- A. Regular suctioning and observing ventilation patterns**
- B. Maintaining a sterile environment only**
- C. Regular suctioning, ensuring the trach tube is secure, and monitoring for signs of respiratory distress**
- D. Frequent repositioning and checking blood pressure**

Caring for a patient with a tracheostomy involves several critical responsibilities to ensure their safety and comfort, and the correct choice encompasses essential aspects of this care. Regular suctioning is necessary to clear secretions that the patient may not be able to expel independently, which helps maintain airway patency. Additionally, ensuring the tracheostomy tube is secure is crucial as an unsecured tube can lead to complications such as accidental decannulation or displacement, which can quickly obstruct the airway and require immediate intervention. Monitoring for signs of respiratory distress is also important, as patients with tracheostomies may exhibit changes in breathing patterns or increased work of breathing. Jaundice, tachypnea, changes in level of consciousness, or decreased oxygen saturation could indicate an airway problem or other respiratory issues. Therefore, a combination of regular suctioning, securing the tube, and meticulous monitoring of respiratory status is fundamental to providing appropriate care and timely interventions for these patients. This choice includes a comprehensive approach, ensuring that both airway management and respiratory monitoring are prioritized to prevent complications associated with tracheostomy care.

7. Which behavior best helps a nurse build trust with a patient?

- A. Using terms of endearment, such as "honey."**
- B. Telling the patient to trust the nursing staff.**
- C. Promptly responding to the patient's requests.**
- D. Addressing the patient by first name.**

Promptly responding to the patient's requests is a key behavior that fosters trust between the nurse and the patient. When a nurse is attentive and responsive, it signals to the patient that their needs and concerns are being taken seriously. This responsiveness not only alleviates the patient's anxiety but also demonstrates that the nurse is committed to their care and well-being. Building trust is essential in a healthcare environment, as it can lead to better communication, increased patient satisfaction, and improved health outcomes. When patients feel that their requests are met promptly, they are more likely to feel valued and respected, which strengthens the nurse-patient relationship. In contrast, using terms of endearment may come off as overly familiar or unprofessional depending on the patient's background and preferences. Telling the patient to trust the nursing staff does not establish a trustworthy relationship; it's an instruction rather than a behavior that builds confidence. While addressing the patient by first name can contribute to a more personal connection, it does not have the same immediate impact on trust as being responsive to their needs.

8. A Jehovah's Witness patient requires a blood transfusion due to blood loss. What is the correct action for the nurse?

- A. Provide full information and the reasons for the transfusion**
- B. Assume the patient will not accept a transfusion and report this to the physician**
- C. Tell the patient that he may die without the transfusion**
- D. Tell the patient that his health is more important than religious beliefs**

Providing full information and the reasons for the transfusion is essential in this situation because it respects the patient's autonomy and allows the patient to make an informed decision regarding their care. Jehovah's Witnesses typically refuse blood transfusions based on their religious beliefs. By presenting the full details about the risks of not receiving a transfusion as well as the potential benefits, the nurse enables the patient to consider their options thoughtfully. This approach aligns with the ethical principles of nursing, including respect for the patient's values and the right to make decisions about their own health. Informed consent is a fundamental requirement in healthcare, and it is particularly critical in cases where the patient's beliefs may conflict with standard medical practices. Engaging in a compassionate and open dialogue allows the patient to discuss their concerns and beliefs without feeling pressured. It opens the door to exploring possible alternatives, such as the use of volume expanders or other therapies that align with the patient's wishes. This approach not only fosters trust but also ensures that the care provided is in accordance with the patient's values and preferences.

9. What is an important assessment after medication administration showing signs of allergic reaction?

- A. Administer an oral antihistamine.**
- B. Check for any bleeding.**
- C. Monitor vital signs closely.**
- D. Observe for changes in skin condition.**

Monitoring vital signs closely after medication administration when an allergic reaction is suspected is crucial because vital signs provide immediate insight into the patient's physiological response. An allergic reaction can lead to significant changes in vital signs; for instance, a rapid decrease in blood pressure or an increase in heart rate can indicate a severe reaction, such as anaphylaxis. Additionally, changes in respiratory rate may suggest airway compromise, which is a life-threatening condition. While observing for changes in skin condition is also important, it primarily focuses on dermatological symptoms, which may not give a comprehensive understanding of the overall impact of the allergic reaction. Administering an oral antihistamine is a potential treatment for milder reactions but may not address the immediate assessment needs or the status of the patient. Checking for bleeding is typically not directly related to allergic reactions unless there is a specific concern related to the medication's side effects or interactions. Therefore, closely monitoring vital signs is essential for timely and effective intervention in cases of allergic reactions.

10. A patient doubts their self-image after a combat-related amputation. What issue are they likely facing?

- A. Body image**
- B. Self-esteem**
- C. Mobility**
- D. Motivation**

The patient experiencing doubt about their self-image after a combat-related amputation is likely facing issues related to body image. Body image refers to a person's perception and feelings about their physical appearance, which can be profoundly affected by significant changes such as an amputation. In this context, the patient might struggle with how they view themselves now that their body has changed drastically due to the loss of a limb. This can lead to feelings of discomfort, dissatisfaction, or even distress regarding their altered appearance. Body image is closely tied to aspects of identity and how individuals relate to their bodies in both social and personal contexts, particularly after trauma or significant medical alterations. While self-esteem, mobility, and motivation may also be relevant to the patient's experience, the primary concern highlighted in the question is the patient's self-image, which directly connects to their perception of their body after an amputation.