

NURSING ENTRANCE EXAM (NEX) 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. If a person has fasted for 24 hours without carbohydrates, how will the liver meet the body's needs?**
 - A. Converting glycogen into glucose
 - B. Breaking down red blood cells
 - C. Producing more bile
 - D. Emulsifying fat

- 2. What does a thorough assessment help to identify in nursing?**
 - A. Only physical ailments
 - B. Potential preferences for treatment
 - C. Overall health status and necessary interventions
 - D. Only psychological issues

- 3. Why is prioritization essential in nursing?**
 - A. To maintain a busy schedule
 - B. To determine which patient needs take precedence based on urgency and severity
 - C. To create a routine for the day's work
 - D. To assist with patient transportation

- 4. Which of the following is NOT a major function of the kidney?**
 - A. Filtration of blood
 - B. Regulation of blood pressure
 - C. Production of insulin
 - D. Acid-base balance

- 5. Why are vital signs critical in nursing practice?**
 - A. They determine a patient's level of pain
 - B. They provide information about a patient's physiological status
 - C. They are used solely for record-keeping
 - D. They help in diagnosing psychological conditions

- 6. Which strategy is most effective for improving time management in nursing?**
- A. Juggling multiple tasks at once
 - B. Prioritizing patient care needs
 - C. Scheduling frequent breaks
 - D. Limiting communication with colleagues
- 7. What is one of the five rights of medication administration?**
- A. Right diagnosis
 - B. Right patient
 - C. Right time to diagnosis
 - D. Right insurance coverage
- 8. What approach should nurses take when educating patients about their medications?**
- A. Focus solely on the potential side effects
 - B. Discuss the importance of adherence and how to manage medications
 - C. Encourage patients to avoid any questions regarding their medications
 - D. Only provide written information without verbal communication
- 9. Which structures contain valves to prevent blood from flowing in the wrong direction?**
- A. Lymph ducts
 - B. Veins
 - C. Arteries
 - D. Capillaries
- 10. Where does most internal gas exchange in the human respiratory tract occur?**
- A. Trachea
 - B. Nasal passages
 - C. Alveoli
 - D. Bronchus

Answers

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

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Explanations

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1. If a person has fasted for 24 hours without carbohydrates, how will the liver meet the body's needs?

- A. Converting glycogen into glucose**
- B. Breaking down red blood cells
- C. Producing more bile
- D. Emulsifying fat

When a person has fasted for an extended period, such as 24 hours without carbohydrates, the body requires a steady supply of glucose to meet its energy needs, particularly for vital organs like the brain. The liver plays a crucial role in maintaining glucose levels during fasting. In this situation, the primary mechanism the liver employs is the conversion of glycogen into glucose. Glycogen, which is stored in the liver, acts as a readily available source of glucose. When blood glucose levels begin to drop due to fasting, the liver initiates glycogenolysis, the process of breaking down glycogen into glucose molecules. This glucose can then be released into the bloodstream, ensuring that the body has a consistent supply of energy. This method of gluconeogenesis is vital because it enables the body to function adequately even in the absence of dietary carbohydrates. The liver's ability to efficiently manage glycogen stores is critical for maintaining homeostasis during periods of fasting.

2. What does a thorough assessment help to identify in nursing?

- A. Only physical ailments
- B. Potential preferences for treatment
- C. Overall health status and necessary interventions**
- D. Only psychological issues

A thorough assessment in nursing is crucial because it provides a comprehensive view of a patient's overall health status and determines the necessary interventions required for proper care. This process involves not only examining physical ailments but also taking into account psychological, social, and environmental factors that may impact the patient's health. By conducting a thorough assessment, a nurse can gather vital information that helps in diagnosing health issues, planning tailored treatment strategies, and prioritizing care according to the patient's needs. This holistic approach ensures that all dimensions of a person's health are considered, ultimately leading to more effective and individualized care. In contrast to the other options, which may focus on specific aspects of health, such as only physical or psychological issues, or preferences for treatment, a complete assessment encompasses all relevant factors to give a rounded perspective of the patient's condition.

3. Why is prioritization essential in nursing?

- A. To maintain a busy schedule
- B. To determine which patient needs take precedence based on urgency and severity**
- C. To create a routine for the day's work
- D. To assist with patient transportation

Prioritization is crucial in nursing because it allows healthcare professionals to identify and address patient needs effectively based on urgency and severity. In a clinical setting, nurses often encounter multiple patients who require attention, but not all conditions are of equal importance or immediate risk. By prioritizing, nurses ensure that the most critical patients receive timely interventions, which can be vital in preventing complications and promoting optimal health outcomes. The ability to assess and prioritize patient needs involves evaluating various factors, including the patient's vital signs, the nature of their condition, and the potential consequences of delayed care. This systematic approach not only enhances patient safety but also improves the overall efficiency of the healthcare team, as tasks can be delegated appropriately based on the level of need. Ultimately, effective prioritization leads to better care and contributes to positive recovery trajectories for patients.

4. Which of the following is NOT a major function of the kidney?

- A. Filtration of blood
- B. Regulation of blood pressure
- C. Production of insulin**
- D. Acid-base balance

The correct answer is the production of insulin, as this is not a major function of the kidney. The kidneys primarily focus on filtration of blood, where they remove waste products and excess substances from the bloodstream to form urine. They also play a central role in regulating blood pressure through the renin-angiotensin-aldosterone system, which helps maintain fluid balance and vascular resistance. Additionally, kidneys contribute to acid-base balance by excreting hydrogen ions and reabsorbing bicarbonate from urine, which helps maintain the pH levels in the blood. In contrast, insulin is a hormone produced by the pancreas, and its primary function is to regulate blood glucose levels. While the kidneys do have some influence on glucose metabolism and can engage in gluconeogenesis, producing insulin is fundamentally outside their major functions. Understanding the distinct roles of different organs is crucial for grasping the complexity of human physiology.

5. Why are vital signs critical in nursing practice?

- A. They determine a patient's level of pain
- B. They provide information about a patient's physiological status**
- C. They are used solely for record-keeping
- D. They help in diagnosing psychological conditions

Vital signs are crucial in nursing practice because they provide essential information about a patient's physiological status. These measurements—such as heart rate, blood pressure, respiratory rate, and temperature—serve as key indicators of the underlying health of a patient. They help nurses assess how well the body's systems are functioning and can reveal any deviations from normal ranges that may indicate illness or the need for further evaluation. Monitoring vital signs allows healthcare providers to quickly identify changes in a patient's condition, which is particularly important in acute care settings. Early detection of significant changes can lead to timely interventions, which can be critical in preventing complications or worsening of the patient's health status. Additionally, evaluating vital signs over time helps in tracking the effectiveness of treatments and the overall progress of recovery. While some of the other options may seem relevant, they do not capture the primary role of vital signs in a comprehensive way. For instance, they do not serve solely for record-keeping; although documentation is a part of the process, the main focus is on patient assessment. Also, while vital signs can give insights that may contribute to understanding pain levels or psychological states, they are primarily physiological indicators rather than tools for diagnosing psychological conditions. Thus, understanding vital signs is pivotal for providing safe and effective nursing care.

6. Which strategy is most effective for improving time management in nursing?

- A. Juggling multiple tasks at once
- B. Prioritizing patient care needs**
- C. Scheduling frequent breaks
- D. Limiting communication with colleagues

Prioritizing patient care needs is the most effective strategy for improving time management in nursing because it focuses on delivering optimal care to patients while efficiently organizing tasks. In a nursing environment, where numerous responsibilities and urgent situations can arise simultaneously, understanding which tasks are most critical ensures that nurses address the most pressing patient needs first. This approach helps prevent delays in care, reduces the risk of complications, and enhances overall patient outcomes. Prioritizing patient care allows nurses to assess the situation effectively, allocate resources wisely, and delegate tasks when appropriate. It enables them to remain focused on high-priority actions while managing their time efficiently. Ultimately, prioritization is an essential skill in nursing practice as it directly influences the quality of care provided and helps nurses handle their workloads without feeling overwhelmed. Other strategies, like juggling multiple tasks, scheduling frequent breaks, or limiting communication with colleagues, may not effectively enhance time management. Juggling multiple tasks can lead to decreased attention on each task, potentially compromising patient safety and care. Scheduling breaks is essential for self-care but may not contribute to immediate time management in clinical duties. Limiting communication with colleagues can hinder collaboration and teamwork, which are vital in nursing environments for effective care delivery.

7. What is one of the five rights of medication administration?

- A. Right diagnosis
- B. Right patient**
- C. Right time to diagnosis
- D. Right insurance coverage

One of the five rights of medication administration is ensuring the "Right patient" receives the medication. This principle is crucial in nursing practice to prevent medication errors. Identifying the correct patient before administering medication protects against potentially serious consequences, such as giving the wrong medication to a patient, which could lead to adverse drug reactions or ineffective treatment. In practice, verifying the patient's identity typically involves using two identifiers, such as the patient's name and date of birth, and confirming this information against the medication administration record. This process is essential in promoting patient safety and ensuring that medications are given to those who are prescribed them. The other options relate to important aspects of patient care but do not fall under the established rights of medication administration. "Right diagnosis" and "Right time to diagnosis" focus on diagnosis rather than medication administration, while "Right insurance coverage" pertains to financial aspects and access to medications rather than the safe administration of those medications.

8. What approach should nurses take when educating patients about their medications?

- A. Focus solely on the potential side effects
- B. Discuss the importance of adherence and how to manage medications**
- C. Encourage patients to avoid any questions regarding their medications
- D. Only provide written information without verbal communication

The focus on discussing the importance of adherence and how to manage medications is crucial in patient education regarding medications. This approach equips patients with the necessary knowledge and skills to take their medications correctly and consistently, which is essential for the effectiveness of their treatment. When patients understand the significance of adhering to their medication regimen, they are more likely to follow the prescribed instructions, thus improving their health outcomes. Furthermore, providing strategies for managing their medications, such as scheduling doses, using pill organizers, or utilizing reminder apps, empowers patients to take control of their health, reducing the risk of medication errors or missed doses. In contrast, focusing solely on the potential side effects may lead to unnecessary anxiety or fear about the treatment, while discouraging questions would hinder open communication, which is vital for building trust and understanding between the nurse and the patient. Relying only on written information limits the opportunity for personalized interaction, where patients can seek clarification and engage in a dialogue about their treatment. Thus, the chosen approach aligns with best practices in nursing that prioritize patient education, engagement, and support for medication management.

9. Which structures contain valves to prevent blood from flowing in the wrong direction?

- A. Lymph ducts
- B. Veins**
- C. Arteries
- D. Capillaries

Veins contain valves that play a crucial role in maintaining unidirectional blood flow back to the heart. These valves are essential because they prevent the backward flow of blood, especially in areas of the body where blood must travel against gravity, such as in the legs. The presence of these valves helps to ensure that blood moves efficiently and reduces the risk of venous blood pooling. In contrast, lymph ducts primarily function in the lymphatic system and also have valves, but they are not the primary structures associated with the circulation of blood. Arteries do not contain valves because they are designed to carry blood away from the heart under high pressure, and their muscular walls maintain the pathway of blood flow. Capillaries, being tiny vessels where exchange of gas and nutrients occurs, do not have valves since their primary function does not involve maintaining directed blood flow like veins do. Thus, the presence of valves is a defining feature of veins in the context of the question.

10. Where does most internal gas exchange in the human respiratory tract occur?

- A. Trachea
- B. Nasal passages
- C. Alveoli**
- D. Bronchus

Most internal gas exchange in the human respiratory tract occurs in the alveoli. These tiny, balloon-like structures are located at the end of the respiratory tree and are designed for efficient gas exchange. The walls of the alveoli are extremely thin and surrounded by a network of capillaries, allowing for oxygen and carbon dioxide to diffuse easily between the air in the alveoli and the blood. This is where oxygen from inhaled air is absorbed into the bloodstream, and carbon dioxide from the blood is released into the alveoli to be exhaled. In contrast, the trachea, nasal passages, and bronchus primarily serve as conduits for airflow rather than sites of gas exchange. The trachea and bronchus deliver air to the lungs, while the nasal passages filter, warm, and humidify inhaled air. While some very minimal gas exchange can technically occur in the larger airways, it is the alveoli that perform the vital function of exchanging gases with the blood, which is crucial for maintaining proper oxygen levels and removing carbon dioxide from the body. Thus, the alveoli's unique structure and abundance make them the primary site of internal gas exchange in the respiratory system.

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://nln-nex.examzify.com>

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

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