

NURSING ETHICS, LAWS, AND PRACTICES PRACTICE TEST (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

VISIT US ONLINE FOR
THE FULL VERSION STUDY GUIDE

<https://nursingethicslawspractices.examzify.com>



Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.

ALL RIGHTS RESERVED.

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain accurate, complete, and timely information about this product from reliable sources.

SAMPLE

Table of Contents

Copyright	1
Table of Contents	2
Introduction	3
How to Use This Guide	4
Questions	5
Answers	9
Explanations	11
Next Steps	17

SAMPLE

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

SAMPLE

- 1. Ethical decision making requires integrating which elements?**
 - A. The clinician's personal preferences only
 - B. The patient's preferences only
 - C. A comprehensive integration of personal, societal, and professional values and codes
 - D. Financial incentives
- 2. Five Wishes is a document related to which aspect of advance directives?**
 - A. The person I delegate
 - B. The five wishes for comfort, treatment, and what loved ones should know
 - C. The legal language of the document
 - D. The date at which the directive expires
- 3. Which concept focuses on working collaboratively to provide the best patient care?**
 - A. Patient-Centered Care
 - B. Interprofessional Relationships
 - C. Advancement of the Profession
 - D. Lifelong Learning
- 4. Which term describes the threat of bodily harm or a feeling of imminent danger?**
 - A. Assault
 - B. Battery
 - C. False Imprisonment
 - D. Appearance
- 5. How should nurses respond to a request for a treatment believed to be medically futile?**
 - A. Immediate withdrawal of treatment without discussion.
 - B. Engage in open dialogue about prognosis and goals, explore alternatives, involve ethics support, document discussions, and respect patient/family wishes.
 - C. Persuade patient to accept a different treatment without involving others.
 - D. Ignore and continue futile treatment.

6. Which item is NOT a component of autonomy in nursing ethics?

- A. Self determination
- B. Informed consent
- C. Respect for patient preferences
- D. Beneficence

7. How do assault and battery differ in the nursing context?

- A. Assault is the threat of harmful or unwanted contact; battery is the actual unlawful physical contact.
- B. Assault means physical harm; battery means verbal threats.
- C. Assault and battery are the same.
- D. Battery is a legal concept not applicable to nursing.

8. Which practice best supports culturally competent end-of-life care for patients with limited English proficiency?

- A. Rely on family members to translate even when inaccurate.
- B. Prohibit interpreters to avoid cost.
- C. Conduct all conversations without interpreters to practice direct communication.
- D. Provide language access through interpreters or translated materials and involve family appropriately.

9. How can nurses ensure safe delegation of tasks to unlicensed assistive personnel (UAP)?

- A. Delegate tasks based solely on the nurse's convenience and avoid supervision.
- B. Know the scope of practice, delegate appropriate tasks, supervise, and provide clear instructions; assess patient needs and readiness of the delegatee.
- C. Delegate all clinical tasks to UAPs without any training.
- D. Always delegate without considering patient needs.

10. What considerations are important in ethical genetic testing and counseling?

- A. Genetic testing should be conducted only with patient consent if the test is expensive.
- B. Privacy concerns are never a barrier to genetic testing.
- C. Genetic counseling is unnecessary for most genetic tests.
- D. Informed consent, privacy, potential implications for family, and preventing discrimination; provide genetic counseling.

SAMPLE

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. Ethical decision making requires integrating which elements?

- A. The clinician's personal preferences only
- B. The patient's preferences only
- C. A comprehensive integration of personal, societal, and professional values and codes**
- D. Financial incentives

Ethical decision making in nursing relies on weaving together personal values, patient preferences, societal norms, and professional codes to guide actions. Patient preferences are essential for honoring autonomy, but they must be weighed alongside beneficence, nonmaleficence, and the duties outlined in professional codes. Personal values influence how a situation is interpreted, yet they cannot override patient rights or established standards of care. Societal values about justice and fair distribution of resources shape decisions that affect groups of patients, while professional codes provide clear obligations and ethical expectations for practice. Financial incentives have no place in ethical judgment and can bias care, undermining fairness and integrity. Integrating these elements ensures decisions are patient-centered, just, and professionally responsible rather than driven by a single perspective.

2. Five Wishes is a document related to which aspect of advance directives?

- A. The person I delegate
- B. The five wishes for comfort, treatment, and what loved ones should know**
- C. The legal language of the document
- D. The date at which the directive expires

Five Wishes centers on expressing personal preferences about how you want to be cared for and treated if you can't speak for yourself. It's an advance directive that focuses on comfort, the kinds of medical treatments you want or don't want, and what you want your loved ones to know, including who should be involved in decision-making. This makes it a practical, person-centered way to convey values and end-of-life wishes in plain language, rather than just presenting legal boilerplate. It isn't primarily about who is designated to make decisions (though that can be part of the process), nor about the specific legal wording or expiration dates, which is why the option describing five wishes for comfort, treatment, and what loved ones should know best captures what Five Wishes is about.

3. Which concept focuses on working collaboratively to provide the best patient care?

- A. Patient-Centered Care
- B. Interprofessional Relationships**
- C. Advancement of the Profession
- D. Lifelong Learning

Working across different health-professional disciplines to coordinate and deliver the best patient care is the idea being tested. Building strong interprofessional relationships creates the teamwork, communication, mutual respect, and shared decision-making essential for safe, effective care. While patient-centered care emphasizes aligning care with the patient's values and preferences, and lifelong learning or advancement of the profession address ongoing education and professional development, respectively, they don't specifically capture the collaborative process among different professionals that this item highlights.

4. Which term describes the threat of bodily harm or a feeling of imminent danger?

- A. Assault
- B. Battery
- C. False Imprisonment
- D. Appearance

The idea being tested is the distinction between threats and actual contact. Assault describes intentionally creating or placing someone in apprehension of imminent harmful or offensive contact. The crucial point is that no physical touch is required—the fear of imminent harm communicated through words or actions can qualify as assault if a reasonable person would feel in immediate danger. Battery, by contrast, is the actual harmful or offensive touching without the person's consent. False imprisonment involves unlawfully restraining someone's freedom of movement, not merely threatening harm. Appearance isn't a term used to describe any of these concepts. In practice, recognizing assault helps ensure safety and appropriate reporting when someone feels threatened, distinct from situations involving actual contact or confinement.

5. How should nurses respond to a request for a treatment believed to be medically futile?

- A. Immediate withdrawal of treatment without discussion.
- B. Engage in open dialogue about prognosis and goals, explore alternatives, involve ethics support, document discussions, and respect patient/family wishes.
- C. Persuade patient to accept a different treatment without involving others.
- D. Ignore and continue futile treatment.

When a treatment is believed to be medically futile, the key is open, patient-centered communication that centers on goals of care. The nurse should engage in honest discussion about prognosis and what the treatment can realistically achieve, helping the patient and family articulate their values and what outcomes matter most. Explore alternatives, including comfort-focused or palliative options, and ensure everyone understands the likely benefits, burdens, and risks. Involve ethics support or a palliative care team if disagreements arise, to guide decisions in a structured, ethical way. Document all conversations and decisions clearly to maintain continuity of care and protect all parties. Above all, respect the patient's and family's wishes, honoring their autonomy and preferences even when they differ from medical recommendations, while continuing to provide support and clear information. This approach avoids coercion or withdrawal without discussion, and it refrains from pressuring the patient to accept a different path or from simply continuing non-beneficial treatment.

6. Which item is NOT a component of autonomy in nursing ethics?

- A. Self determination
- B. Informed consent
- C. Respect for patient preferences
- D. Beneficence**

Autonomy in nursing ethics means recognizing and honoring a patient's right to make their own decisions about their care. Self-determination is at the heart of this, as it captures the patient's ability to choose what happens to their body and treatment. Informed consent supports autonomy by ensuring the patient has the necessary information and freedom to decide voluntarily. Respect for patient preferences is another expression of autonomy, meaning the care team honors the patient's values and choices, even when they differ from the clinician's own views. Beneficence, while essential, is a separate ethical principle focused on acting in the patient's best interest and promoting their well-being. It guides how care is delivered but does not define the patient's right to decide or the process by which those decisions are made. So the item that is not a component of autonomy is beneficence.

7. How do assault and battery differ in the nursing context?

- A. Assault is the threat of harmful or unwanted contact; battery is the actual unlawful physical contact.**
- B. Assault means physical harm; battery means verbal threats.
- C. Assault and battery are the same.
- D. Battery is a legal concept not applicable to nursing.

In nursing law, the distinction rests on whether harmful or unwanted contact is only threatened or actually carried out. Assault is the threat or attempt to inflict harmful or unwanted contact, while battery is the actual unlawful touching that occurs. This matters in practice because a nurse who threatens to restrain a patient or makes a gesture of harm without touching may be committing assault, whereas physically restraining or touching a patient without proper consent or beyond what is allowed constitutes battery. Consent is central here. Patients have the right to determine who touches them and how. Any contact without valid consent, or beyond the scope of consent given, can be battery. In contrast, if there is a legitimate, authorized plan to restrain or treat—done with proper consent and within policy—those actions are not battery. Other statements don't fit because they either misstate the terms (assault as physical harm or battery as verbal threats), claim they are the same, or suggest battery isn't legally relevant to nursing.

8. Which practice best supports culturally competent end-of-life care for patients with limited English proficiency?

- A. Rely on family members to translate even when inaccurate.
- B. Prohibit interpreters to avoid cost.
- C. Conduct all conversations without interpreters to practice direct communication.

D. Provide language access through interpreters or translated materials and involve family appropriately.

Providing language access is essential for culturally competent end-of-life care for patients with limited English proficiency. When patients can understand prognostic information, treatment options, and goals of care in their preferred language, they can participate meaningfully in decisions and express their values and wishes. Using professional interpreters—whether in person or via telecommunication—and offering translated materials ensures accurate, culturally appropriate communication and supports informed consent, advance care planning, and concordance between care plans and the patient's preferences. Involve family in ways that respect the patient's autonomy and privacy, but avoid using family members as the sole or primary interpreters. Family members may unintentionally omit, add, or alter information, misinterpret medical terms, or raise confidentiality concerns. Professional interpreters help maintain accuracy and neutrality, while translated documents reinforce understanding of options and decisions. Denying interpreter services or relying on ad hoc translation undermines care quality and patient rights, whereas combining language access with thoughtful family involvement fosters respectful, patient-centered, culturally appropriate end-of-life care.

9. How can nurses ensure safe delegation of tasks to unlicensed assistive personnel (UAP)?

- A. Delegate tasks based solely on the nurse's convenience and avoid supervision.

B. Know the scope of practice, delegate appropriate tasks, supervise, and provide clear instructions; assess patient needs and readiness of the delegatee.

- C. Delegate all clinical tasks to UAPs without any training.
- D. Always delegate without considering patient needs.

Safe delegation hinges on matching tasks to what the UAP is trained and allowed to do, while keeping patient safety at the forefront. The nurse must know the UAP's scope of practice, choose tasks that are appropriate for the delegatee, and provide clear instructions. Ongoing supervision and evaluation are essential, along with assessing each patient's needs and the delegatee's readiness and competence. This combination ensures tasks are handed off only when safe, feasible, and within appropriate professional boundaries. Delegating based on convenience or avoiding supervision, assigning all clinical tasks to UAPs without training, or always delegating without considering patient needs all undermine safety and accountability. When tasks stay within the UAP's scope, are clearly communicated, and are supervised with patient needs and the delegatee's abilities in mind, care remains safe and effective.

10. What considerations are important in ethical genetic testing and counseling?

- A. Genetic testing should be conducted only with patient consent if the test is expensive.
- B. Privacy concerns are never a barrier to genetic testing.
- C. Genetic counseling is unnecessary for most genetic tests.
- D. Informed consent, privacy, potential implications for family, and preventing discrimination; provide genetic counseling.**

In ethical genetic testing, respect for patient autonomy and protection of those affected by the results drive practice. Informed consent is essential because it ensures individuals understand what the test can reveal, the limitations, possible outcomes, and the choices they may face afterward. Privacy matters because genetic information can have implications beyond the individual, potentially affecting family members and raising risks of misuse if confidentiality isn't protected. Since relatives can be impacted by a person's results, there's a responsibility to consider how information is shared and who needs to know. Discrimination is a real concern—safeguards to prevent genetic information from being used to deny rights or services are a key ethical consideration. Genetic counseling is a critical part of this process. It helps translate complex results into meaningful information, clarifies risks and probabilities, discusses available options for monitoring or intervention, and supports the emotional and psychological responses that can come with genetic information. It also guides decisions about sharing information with relatives and coordinating cascade testing when appropriate. The other choices fall short because they minimize or omit these elements. Consent should not hinge on cost, privacy is not optional, counseling is not unnecessary for most tests, and seizing all these considerations into a single comprehensive approach is what ethical practice requires.

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://nursingethicslawspractices.examzify.com>

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

SAMPLE