

# Nursing (NR446) Readiness CJE Practice Test (Sample)

## Study Guide



**Everything you need from our exam experts!**

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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. Stage 2 hypertension in adults is defined by?**
  - A. Systolic  $\geq 140$  or diastolic  $\geq 90$**
  - B. Systolic  $\geq 180$  or diastolic  $\geq 110$**
  - C. Systolic  $\geq 160$  mmHg or diastolic  $\geq 100$  mmHg**
  - D. Systolic  $\geq 150$  or diastolic  $\geq 95$**
  
- 2. Which action best supports safety and reduces confusion in an older adult with dehydration-related delirium-like symptoms?**
  - A. Providing fluids and gentle orientation**
  - B. Isolating the patient to prevent wandering**
  - C. Withholding fluids to monitor intake**
  - D. Restraint to prevent injury**
  
- 3. Postoperative positioning for an infant after cleft lip repair to protect the incision site?**
  - A. Supine and side-lying positions**
  - B. Prone position**
  - C. Standing upright**
  - D. Sitting up in a car seat**
  
- 4. Which step should occur first when obtaining informed consent for elective surgery?**
  - A. Healthcare provider explains procedure to client**
  - B. Client signs consent form**
  - C. Witness signs consent form**
  - D. Consent form is placed in chart**
  
- 5. What is a fundamental therapeutic communication technique in mental health nursing?**
  - A. Giving direct advice**
  - B. Interrupting patient to expedite care**
  - C. Confrontational questioning**
  - D. Active listening**

- 6. Timing in PQRST pertains to?**
- A. The location of pain**
  - B. The intensity**
  - C. When the pain started and how it has changed over time**
  - D. The quality**
- 7. Which of the following is NOT one of the three elements required for valid informed consent?**
- A. Voluntary agreement**
  - B. Disclosure of information**
  - C. Patient capacity/comprehension**
  - D. Physician expertise**
- 8. Which statement about non-therapeutic nurse responses to a recent cancer diagnosis would be classified as non-therapeutic?**
- A. Don't worry, treatment options have come so far, and the cure rates get higher every year.**
  - B. There are many support groups for women with breast cancer. I can provide you with contact information.**
  - C. Let's identify your family and friends who will be your support system through your treatment.**
  - D. Tell me what's worrying you right now regarding your recent diagnosis.**
- 9. Which description best characterizes shared governance in nursing practice?**
- A. A top-down management approach**
  - B. A collaborative model where nurses participate in policy and practice decisions**
  - C. A model where only physicians set policies**
  - D. A model focused solely on cost containment**
- 10. A sprained ankle; after applying compression and splint, what is the next nursing intervention?**
- A. Place the ankle on two pillows**
  - B. Elevate the ankle on two pillows**
  - C. Apply ice directly to the skin**
  - D. Massage the ankle**

## Answers

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

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## **Explanations**

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**1. Stage 2 hypertension in adults is defined by?**

- A. Systolic  $\geq 140$  or diastolic  $\geq 90$
- B. Systolic  $\geq 180$  or diastolic  $\geq 110$
- C. Systolic  $\geq 160$  mmHg or diastolic  $\geq 100$  mmHg**
- D. Systolic  $\geq 150$  or diastolic  $\geq 95$

Stage 2 hypertension is defined by a systolic blood pressure of 160 mmHg or higher, or a diastolic blood pressure of 100 mmHg or higher. This level signals a higher cardiovascular risk and typically leads to escalation of therapy beyond lifestyle changes, often including antihypertensive medication after confirmation on separate occasions or with home monitoring using proper technique. A reading around 140/90 would fall into a lower stage, and 150/95 is also below the Stage 2 threshold, while values higher than 160/100 meet the criteria for Stage 2.

**2. Which action best supports safety and reduces confusion in an older adult with dehydration-related delirium-like symptoms?**

- A. Providing fluids and gentle orientation
- B. Isolating the patient to prevent wandering
- C. Withholding fluids to monitor intake**
- D. Restraint to prevent injury

Dehydration-related delirium stems from reduced fluid volume affecting brain function, so the priority is to correct the underlying cause while supporting safety. Providing fluids helps restore circulating volume and cerebral perfusion, which can lessen confusion and improve cognitive clarity. Pairing hydration with gentle orientation helps the person recognize where they are, understand what's happening, and feel more secure, which reduces agitation and wandering without restricting movement. Isolating the patient to prevent wandering, withholding fluids to monitor intake, or using restraints all pose safety and ethical concerns and can worsen delirium. Isolation can increase confusion and fear; withholding fluids prolongs the delirium and increases risk of complications from dehydration; restraints can cause physical harm and heighten agitation. In this scenario, rehydration plus gentle, respectful orientation addresses the root cause and supports safety more effectively than the other approaches.

**3. Postoperative positioning for an infant after cleft lip repair to protect the incision site?**

- A. Supine and side-lying positions**
- B. Prone position**
- C. Standing upright**
- D. Sitting up in a car seat**

After cleft lip repair, the focus is on protecting the incision by minimizing pressure and friction on the upper lip. Placing the infant supine (on the back) reduces contact with the lip and keeps gravity from pushing the incision against a surface. Side-lying can also be used safely, with the head turned so the operative side isn't pressed into the bedding; this position helps keep the lip away from direct pressure while allowing easy breathing and feeding. In contrast, prone positioning would press the lip against a surface and increase the risk of wound disruption or edema. Standing upright or sitting in a car seat isn't appropriate for an infant post-op since these positions don't provide stable control of movement and can place pressure or cause movement that jeopardizes the incision.

**4. Which step should occur first when obtaining informed consent for elective surgery?**

- A. Healthcare provider explains procedure to client**
- B. Client signs consent form**
- C. Witness signs consent form**
- D. Consent form is placed in chart**

The essential idea is that informed consent must be based on the patient understanding what will be done. The first step is for the healthcare provider to explain the procedure, including what will be done, why it's recommended, the potential risks and benefits, and available alternatives, and to answer any questions. This ensures the patient can make a voluntary and informed decision. Only after understanding and agreeing should the patient sign the consent form; thereafter a witness can attest the signature if required, and the completed form is filed in the chart.

**5. What is a fundamental therapeutic communication technique in mental health nursing?**

- A. Giving direct advice**
- B. Interrupting patient to expedite care**
- C. Confrontational questioning**
- D. Active listening**

Active listening is a fundamental therapeutic communication technique in mental health nursing. It means giving the patient your full attention, noticing nonverbal cues, and responding in ways that encourage them to share more. This includes avoiding interruptions, using open-ended questions, reflecting the patient's feelings, and summarizing what they've said to confirm understanding. By doing this, the nurse builds trust, validates the patient's experience, and gathers accurate information needed for assessment and care planning. Direct advice can undermine autonomy, interrupting disrupts the patient's narrative, and confrontational questioning can trigger defensiveness and shut down communication. Active listening creates a safe space for expression and supports collaborative problem-solving.

**6. Timing in PQRST pertains to?**

- A. The location of pain**
- B. The intensity**
- C. When the pain started and how it has changed over time**
- D. The quality**

Timing in the PQRST approach refers to when the pain began and how it has changed over time—including onset, duration, frequency, and the pattern of the pain. This helps you understand the trajectory of the pain, whether it's new or ongoing, and whether it's improving, worsening, or staying the same, which is essential for deciding urgency and evaluating treatment response. Location is where the pain occurs, intensity is how strong it is, and quality describes what the pain feels like (e.g., sharp, dull, burning). These other aspects provide different pieces of the overall picture but Timing specifically captures the temporal course of the pain.

**7. Which of the following is NOT one of the three elements required for valid informed consent?**

- A. Voluntary agreement**
- B. Disclosure of information**
- C. Patient capacity/comprehension**
- D. Physician expertise**

Valid informed consent hinges on three components: clear disclosure of information, patient capacity to understand, and voluntary agreement without coercion. The statement about the physician's expertise is not one of these components. A clinician must be competent to perform the procedure and provide accurate information, but the consent itself rests on the patient's understanding, decision-making ability, and free agreement. If information is missing or unclear, if the patient lacks capacity, or if there's coercion, the consent isn't valid—regardless of the clinician's credentials. So, physician expertise is not one of the three elements of valid informed consent.

**8. Which statement about non-therapeutic nurse responses to a recent cancer diagnosis would be classified as non-therapeutic?**

**A. Don't worry, treatment options have come so far, and the cure rates get higher every year.**

**B. There are many support groups for women with breast cancer. I can provide you with contact information.**

**C. Let's identify your family and friends who will be your support system through your treatment.**

**D. Tell me what's worrying you right now regarding your recent diagnosis.**

Acknowledging and addressing the patient's feelings is essential when delivering difficult news. Saying "Don't worry, treatment options have come so far, and the cure rates get higher every year" offers reassurance based on statistics and optimism, but it minimizes the patient's immediate emotions and can imply that their fears are inappropriate or unnecessary. That kind of response can shut down the conversation and prevent the patient from voicing their concerns, fears, or questions. A more therapeutic approach would acknowledge what the patient is feeling and invite them to express those emotions or seek support. For example, providing information about support groups gives practical help while validating that they may need connection with others. Helping to identify family and friends who can be part of a support system reinforces social backing. Asking, "Tell me what's worrying you right now regarding your recent diagnosis?" opens the door for the patient to share specific concerns and boundaries for the conversation, fostering trust and ongoing communication. So the statement that attempts to ease distress with reassurance about overall progress is non-therapeutic, whereas offering resources, naming supports, and inviting the patient to discuss their worries are therapeutic approaches.

**9. Which description best characterizes shared governance in nursing practice?**

**A. A top-down management approach**

**B. A collaborative model where nurses participate in policy and practice decisions**

**C. A model where only physicians set policies**

**D. A model focused solely on cost containment**

Shared governance centers on collaborative decision-making and professional autonomy within nursing practice. It gives nurses at all levels a voice in shaping policies, standards of practice, and day-to-day decisions that affect patient care, safety, and the work environment. Structures like clinical practice councils and committees connect frontline nurses with leadership to ensure decisions are informed by bedside experience and evidence, while maintaining accountability and alignment with organizational goals. This approach fosters empowerment, professional growth, and better outcomes because care decisions reflect nurses' expertise and patient needs. This description fits best because it emphasizes nurses' active participation in policy and practice decisions, rather than centralized control, physician-only policymaking, or a sole focus on cost containment.

**10. A sprained ankle; after applying compression and splint, what is the next nursing intervention?**

- A. Place the ankle on two pillows**
- B. Elevate the ankle on two pillows**
- C. Apply ice directly to the skin**
- D. Massage the ankle**

Elevating the injured ankle is the next priority after immobilizing with a splint and applying compression. Raising the ankle on two pillows helps reduce swelling and pain by promoting venous and lymphatic drainage, lowering hydrostatic pressure in the injured area, and improving circulation back toward the heart. Keep the leg supported and comfortable, and monitor distal circulation (pulse, color, sensation) after elevating. If ice is used, it should be wrapped in cloth and not applied directly to the skin; avoid massaging the sprain in the acute phase.

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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](mailto:hello@examzify.com).**

**Or visit your dedicated course page for more study tools and resources:**

**<https://nursingnr446readinesscje.examzify.com>**

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

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