

Oklahoma PMU Practice Exam (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. In pharmacology, what type of drug interaction occurs when two drugs produce an additive effect?**
 - A. Synergistic interaction**
 - B. Potentiation**
 - C. Additive interaction**
 - D. Antagonistic interaction**

- 2. Which client should be considered for a prescription of acyclovir, valtrex, or Zovirax?**
 - A. A client with acne**
 - B. A client with a history of cold sores**
 - C. A client with eczema**
 - D. A client with active herpes zoster**

- 3. Pre-treatment instructions include**
 - A. Explain details and list the risk of the procedure**
 - B. Post-procedure care checklist**
 - C. Schedule a follow-up appointment**
 - D. Obtain payment information**

- 4. When using a drop factor to calculate IV rate in drops per minute, which formula is correct?**
 - A. Rate (mL/hour) = total volume ÷ time**
 - B. Rate (mL/min) = (volume ÷ time) × drop factor**
 - C. Rate (drops/min) = (volume × drop factor) ÷ time**
 - D. Rate (drops/hour) = volume ÷ time × drop factor**

- 5. Which condition is associated with increased healing time?**
 - A. Hypertension**
 - B. Anemia**
 - C. Diabetes**
 - D. Obesity**

- 6. In a situation involving suspected impairment, which approach aligns with professional standards?**
- A. Document concerns, follow policy, refer for evaluation, and protect patient safety**
 - B. Document concerns only**
 - C. Publicly accuse the colleague**
 - D. Terminate immediately without escalation**
- 7. What is the difference between consent and assent in minors' medical decisions?**
- A. They are interchangeable terms**
 - B. Consent is permission given by a parent/guardian; assent is the minor's affirmative agreement when capable**
 - C. Assent is required only for adults**
 - D. The minor's agreement; assent is parent's permission**
- 8. What is a key reason to honor advance directives in PMU care?**
- A. They determine hospital room assignments**
 - B. They specify resuscitation and treatment preferences, guiding care**
 - C. They are primarily for billing**
 - D. They are optional and rarely used**
- 9. After the initial procedure, which action should you avoid performing on the treated area?**
- A. Apply cosmetics over treatment area**
 - B. Gently wash the area with mild soap**
 - C. Keep the area dry and clean**
 - D. Expose the area to direct sunlight**
- 10. How should a PMU team handle suspected substance use disorder among a colleague?**
- A. Publicly accuse the colleague of misconduct**
 - B. Follow organizational policies, protect patient safety, refer for evaluation/treatment, and document concerns**
 - C. Ignore concerns to avoid conflict**
 - D. Immediately terminate the colleague**

Answers

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

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Explanations

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1. In pharmacology, what type of drug interaction occurs when two drugs produce an additive effect?

- A. Synergistic interaction**
- B. Potentiation**
- C. Additive interaction**
- D. Antagonistic interaction**

Additive interaction: when two drugs are given together and their effects simply add up, so the total effect equals the sum of the individual effects. If Drug A produces a certain amount of effect and Drug B produces another, the combined effect is roughly A plus B. This is different from a synergistic interaction, where the combination produces more than the sum of the parts, and from antagonistic interaction, where one drug reduces the effect of the other. Potentiation is when one drug enhances the effect of another, often without contributing its own effect. So, when the question describes an additive effect, the best way to describe it is an additive interaction.

2. Which client should be considered for a prescription of acyclovir, valtrex, or Zovirax?

- A. A client with acne**
- B. A client with a history of cold sores**
- C. A client with eczema**
- D. A client with active herpes zoster**

Antiviral therapy with acyclovir, valacyclovir, or Zovirax targets herpesviruses, especially herpes simplex virus types 1 and 2 and varicella-zoster virus. These drugs work by inhibiting viral DNA synthesis, which helps shorten outbreaks and can reduce recurrence when used for suppression. A client with a history of cold sores has recurrent herpes simplex virus-1 infection, making them a clear candidate for antiviral therapy to manage and prevent outbreaks. While antiviral treatment can also be used for shingles (active herpes zoster), the scenario here centers on a pattern of recurrent HSV-1 infections, so this patient is the best fit for prescription. The other options don't indicate HSV infections, so they don't align with the typical use of these medications.

3. Pre-treatment instructions include

- A. Explain details and list the risk of the procedure
- B. Post-procedure care checklist**
- C. Schedule a follow-up appointment
- D. Obtain payment information

Preparing a patient for a procedure involves outlining what to do after the procedure so recovery can start smoothly and safely. Including a post-procedure care checklist in pre-treatment instructions helps ensure the patient is ready to follow those steps as soon as the procedure is finished. This checklist typically covers rest and activity limits, medication guidance (what to take or avoid), wound or site care, signs of potential complications to watch for, and when to contact the clinic. By presenting these aftercare steps upfront, you reduce confusion, promote proper healing, and support safer outcomes right from the start. The other options are less aligned with pre-treatment instructions. Explaining risks and details is more about informed consent and understanding the procedure, which usually happens separately from the practical pre-care guidance. Scheduling a follow-up is a planning step that occurs after the procedure is completed or during post-care planning, not the immediate pre-treatment checklist. Obtaining payment information is administrative and not part of clinical preparation for recovery.

4. When using a drop factor to calculate IV rate in drops per minute, which formula is correct?

- A. Rate (mL/hour) = total volume ÷ time
- B. Rate (mL/min) = (volume ÷ time) × drop factor
- C. Rate (drops/min) = (volume × drop factor) ÷ time**
- D. Rate (drops/hour) = volume ÷ time × drop factor

Using the drop factor converts milliliters to drops, so to get a rate in drops per minute you convert the volume to drops and divide by the infusion time in minutes. Multiply the volume (in mL) by the drop factor (drops per mL) to get total drops, then divide by the time (minutes) to spread those drops over each minute: drops per minute = (volume × drop factor) ÷ time. For example, infusing 50 mL over 30 minutes with a drop factor of 15 drops/mL gives $(50 \times 15) \div 30 = 25$ drops per minute. This directly yields the required unit and uses the drop factor correctly. The other forms either mislabel the units, omit the drop factor, or yield a different time-based unit (drops per hour) rather than drops per minute.

5. Which condition is associated with increased healing time?

- A. Hypertension**
- B. Anemia**
- C. Diabetes**
- D. Obesity**

Healing time lengthens when a condition disrupts the body's ability to repair tissue, supply sufficient oxygen, and fend off infection. Diabetes affects these processes in several closely linked ways. High blood sugar impairs the function of immune cells and their ability to reach and fight infection, which means wounds linger longer and are more prone to infection. It also damages small blood vessels, lowering blood flow and oxygen delivery to healing tissue. In addition, chronic hyperglycemia alters collagen formation and remodeling, making the new tissue weaker and slower to mature. Neuropathy and edema often accompany diabetes, further reducing the body's ability to protect and care for wounds. While other conditions can influence healing, diabetes most consistently leads to slower, more prolonged healing because it directly disrupts immune response, blood supply, and tissue remodeling—key steps in every phase of wound healing.

6. In a situation involving suspected impairment, which approach aligns with professional standards?

- A. Document concerns, follow policy, refer for evaluation, and protect patient safety**
- B. Document concerns only**
- C. Publicly accuse the colleague**
- D. Terminate immediately without escalation**

When impairment is suspected, patient safety must come first, and you handle it through established procedures. Documenting your concerns creates a clear, factual record of what you've observed. Following the organization's policy ensures you use the proper channels and steps, rather than improvising. Referring the individual for evaluation brings in a qualified assessment to determine the extent of impairment and the appropriate next actions. Throughout this process, protecting patient safety means ensuring that care is monitored or adjusted as needed so patients aren't at risk. This approach is best because it relies on structured, fair processes that support both patient welfare and the colleague's opportunity to seek appropriate help. It also helps prevent harm that could arise from delaying action or making unverified accusations. Other options fall short because documenting concerns alone doesn't address patient safety, publicly accusing a colleague bypasses due process and can cause harm without verification, and terminating immediately without escalation removes necessary safeguards and support for resolving the issue.

7. What is the difference between consent and assent in minors' medical decisions?

A. They are interchangeable terms

B. Consent is permission given by a parent/guardian; assent is the minor's affirmative agreement when capable

C. Assent is required only for adults

D. The minor's agreement; assent is parent's permission

The concept being tested is how consent and assent function differently in pediatric care. Consent is the legal permission given by a parent or guardian to authorize medical treatment for a minor. Assent is the minor's affirmative agreement to a proposed treatment, sought when the child is capable of understanding and participating in the discussion. In practice, clinicians obtain parental consent to treat and, when appropriate, seek the child's assent to respect the child's developing autonomy. If a child cannot assent due to age or maturity, care can still proceed with the parent's consent, though the clinician should involve the child as much as possible. Assent is not a substitute for parental permission, and it is not something adults need.

8. What is a key reason to honor advance directives in PMU care?

A. They determine hospital room assignments

B. They specify resuscitation and treatment preferences, guiding care

C. They are primarily for billing

D. They are optional and rarely used

Honoring advance directives ensures patient preferences steer medical decisions when a person cannot communicate. In PMU care, these directives typically spell out resuscitation and treatment preferences, giving the team a clear, patient-centered plan to follow. This helps avoid unwanted procedures and ensures the care provided matches the patient's values, even in urgent situations. They guide what should be done or withheld, rather than influencing where a patient stays or how care is billed, and they are generally intended to be followed and, when possible, acted upon across different care settings.

9. After the initial procedure, which action should you avoid performing on the treated area?

A. Apply cosmetics over treatment area

B. Gently wash the area with mild soap

C. Keep the area dry and clean

D. Expose the area to direct sunlight

Right after a PMU procedure the skin is healing and delicate. Any product sitting on the surface, like cosmetics, can trap bacteria, cause irritation, and disturb the healing tissue and pigment. This can lead to infection, scabbing, or uneven color as the area recovers. So, cosmetics over the treated area should be avoided during the initial healing period. You should keep the area clean and dry and wash gently with a mild soap if advised, and protect it from direct sunlight to support proper healing.

10. How should a PMU team handle suspected substance use disorder among a colleague?

- A. Publicly accuse the colleague of misconduct**
- B. Follow organizational policies, protect patient safety, refer for evaluation/treatment, and document concerns**
- C. Ignore concerns to avoid conflict**
- D. Immediately terminate the colleague**

Handling suspected impairment in a colleague centers on patient safety, professional responsibility, and following the proper process. The best approach is to use the organization's policies to guide action: observe and record objective concerns, escalate through the appropriate channels (supervisor or impairment program), and arrange for evaluation or treatment as needed. While ensuring patient care remains safe, adjust duties or supervision to limit risk until the colleague is evaluated. Encourage access to help and support, recognizing that substance use disorder is treatable, and maintain confidentiality throughout. Document all observations and actions to create a clear record for accountability and future decisions. This approach preserves patient safety, follows due process, and provides a constructive path toward recovery, unlike public accusations, inaction, or premature termination.

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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.

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

<https://oklahomapmu.examzify.com>

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

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