

Oncology Certified Nurse (OCN) Nursing 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. What distinguishes cancer cells from normal cells in terms of growth behavior?**
 - A. They migrate to neighboring tissues and locations**
 - B. They divide only when new cells are needed**
 - C. They reside in a genetically coded area**
 - D. They allow contact inhibition with other cells**

- 2. Genes responsible for family cancer syndromes are typically classified as what type of gene?**
 - A. Oncogenes**
 - B. Mutation genes**
 - C. Defective genes**
 - D. Tumor suppressor genes**

- 3. What is the role of antiangiogenesis factors in cancer treatment?**
 - A. Enhance tumor growth**
 - B. Suppress tumors' ability to grow new blood vessels**
 - C. Trigger apoptosis in cancer cells**
 - D. Boost the immune response**

- 4. A nagging cough can be indicative of what type of issue?**
 - A. Respiratory infection**
 - B. Possible lung cancer**
 - C. Seasonal allergies**
 - D. Gastroesophageal reflux disease**

- 5. What is a common long-term side effect of hematopoietic stem cell transplantation (HSCT)?**
 - A. Weight gain**
 - B. Fatigue**
 - C. Increased energy**
 - D. Improved sexual function**

- 6. In which position is pain usually aggravated during spinal cord compression?**
- A. Sitting upright**
 - B. Standing**
 - C. Lying down supine**
 - D. Walking**
- 7. What condition is treated with ATRA?**
- A. Acute Lymphoblastic Leukemia**
 - B. Acute Promyelocytic Leukemia**
 - C. Chronic Myelogenous Leukemia**
 - D. Chronic Lymphocytic Leukemia**
- 8. What is selective screening designed to do?**
- A. Identify individuals needing immunization**
 - B. Screen every demographic equally**
 - C. Look for specific issues in high-risk groups**
 - D. Provide treatment plans for all patients**
- 9. Which of the following is NOT a cancer warning sign?**
- A. Change in bowel or bladder**
 - B. Thinning hair**
 - C. Unusual bleeding**
 - D. Nagging cough**
- 10. Which of the following is a late effect of radiation therapy on the urinary system?**
- A. Necrosis**
 - B. Strictures**
 - C. Oligospermia**
 - D. Hyperpigmentation**

Answers

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

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Explanations

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1. What distinguishes cancer cells from normal cells in terms of growth behavior?

- A. They migrate to neighboring tissues and locations**
- B. They divide only when new cells are needed**
- C. They reside in a genetically coded area**
- D. They allow contact inhibition with other cells**

The growth behavior of cancer cells is characterized by their ability to migrate to neighboring tissues and locations, a phenomenon known as metastasis. This distinguishes them significantly from normal cells, which typically remain in their designated tissue and do not invade other areas. Cancer cells exhibit uncontrolled growth and can infiltrate surrounding tissues, leading to the formation of secondary tumors in distant organs. This invasive property is a hallmark of malignancy and contributes to the challenges faced in cancer treatment and management. In contrast, normal cells maintain their position and are often limited by mechanisms that regulate growth, such as contact inhibition, which prevents overcrowding and uncontrolled proliferation. The other choices do not accurately reflect the behavior of cancer cells. Normal cells typically divide in response to the needs of the tissue (not in the uncontrolled manner seen in cancer cells), they have specific roles within certain areas of the body, and they exhibit contact inhibition, meaning they stop dividing when they come into contact with other cells which cancer cells do not follow. The ability of cancer cells to migrate is crucial to understanding their aggressive nature and the process of cancer progression.

2. Genes responsible for family cancer syndromes are typically classified as what type of gene?

- A. Oncogenes**
- B. Mutation genes**
- C. Defective genes**
- D. Tumor suppressor genes**

Family cancer syndromes are often associated with mutations in tumor suppressor genes. These genes are pivotal in controlling cell growth and preventing uncontrolled cell division, which is a hallmark of cancer. When tumor suppressor genes are mutated or altered, their ability to regulate cellular functions is compromised, leading to increased risk for various familial cancers. For example, mutations in the BRCA1 and BRCA2 genes are well-known for their association with hereditary breast and ovarian cancer syndrome, underscoring the role of tumor suppressor genes in maintaining genomic stability and preventing malignancies. Oncogenes, in contrast, are typically involved in the promotion of cancer when they are activated or overexpressed, but their mutations are not the direct cause of inherited cancer syndromes. Mutation genes and defective genes are not widely recognized classifications within the context of cancer genetics, making them less relevant to this specific question. Thus, the classification of genes responsible for family cancer syndromes firmly aligns with the function of tumor suppressor genes.

3. What is the role of antiangiogenesis factors in cancer treatment?

- A. Enhance tumor growth
- B. Suppress tumors' ability to grow new blood vessels**
- C. Trigger apoptosis in cancer cells
- D. Boost the immune response

Antiangiogenesis factors play a crucial role in cancer treatment by targeting the process of angiogenesis, which is the formation of new blood vessels. Tumors often require a blood supply to grow and metastasize, as they need oxygen and nutrients that are delivered through the bloodstream. By suppressing the tumors' ability to grow new blood vessels, antiangiogenesis factors effectively starve the tumor of essential resources, inhibiting its growth and potentially limiting its spread. In contrast to the other options, enhancing tumor growth would clearly contradict the aim of antiangiogenesis therapy, as it focuses on limiting tumor growth and survival. While some treatments may trigger apoptosis in cancer cells, antiangiogenesis factors specifically target the blood supply rather than inducing cell death directly. Finally, while boosting the immune response is a vital aspect of cancer treatment, antiangiogenesis itself does not primarily function through immunomodulation but rather through a vascular-targeted approach. Thus, the suppression of new blood vessel formation is the key role of antiangiogenesis factors in cancer therapy.

4. A nagging cough can be indicative of what type of issue?

- A. Respiratory infection
- B. Possible lung cancer**
- C. Seasonal allergies
- D. Gastroesophageal reflux disease

A nagging cough can indeed be a significant clinical indicator when it comes to potential issues, with possible lung cancer being a particularly important consideration. In oncology, persistent cough has to be evaluated carefully because it can be a symptom of malignancies, such as lung cancer. This is especially true if the cough is new, worsening, associated with weight loss, or accompanied by hemoptysis (coughing up blood). When assessing a nagging cough, oncologists often consider the patient's smoking history, exposure to carcinogens, and family history of lung cancer, as these factors further elevate the likelihood of malignancy. Early detection of symptoms related to lung cancer can significantly impact treatment options and outcomes, which is why a persistent cough warrants thorough investigation when in this context. While respiratory infections, seasonal allergies, and gastroesophageal reflux disease can also present with a cough, they typically have additional symptoms and clinical presentations that help differentiate them from lung cancer. For instance, respiratory infections usually come with fever and malaise, allergies often involve sneezing or itchy eyes, and reflux typically exhibits heartburn or regurgitation symptoms. Thus, a nagging cough stands out as a potential alarm for lung cancer, highlighting the importance of thorough evaluation in patients with this symptom.

5. What is a common long-term side effect of hematopoietic stem cell transplantation (HSCT)?

- A. Weight gain**
- B. Fatigue**
- C. Increased energy**
- D. Improved sexual function**

Fatigue is indeed recognized as a common long-term side effect of hematopoietic stem cell transplantation (HSCT). Following HSCT, patients may experience enduring fatigue due to several factors, including the physical and emotional stress of the procedure, the effects of high-dose chemotherapy or radiation therapy leading up to the transplant, and the recovery process that follows. The overall impact of HSCT on the body's blood and immune systems can contribute to feelings of tiredness and reduced stamina, making fatigue a significant concern that often persists long after the transplant has occurred. In contrast, weight gain, increased energy, and improved sexual function are not commonly associated with the long-term aftermath of HSCT. While individual experiences can vary, these options do not typically represent the general trends observed in patients following this type of treatment. Many individuals undergoing HSCT face challenges like fatigue that require management and support as they continue their recovery.

6. In which position is pain usually aggravated during spinal cord compression?

- A. Sitting upright**
- B. Standing**
- C. Lying down supine**
- D. Walking**

Pain associated with spinal cord compression tends to be aggravated when the patient is in a supine position (lying down). This is primarily due to the fact that lying flat can increase pressure on the affected area of the spine and may exacerbate inflammation or nerve involvement related to the compression. When a person is supine, the alignment of the spine and the gravitational effects can lead to increased discomfort as the spine may not be able to adequately relieve pressure on the compressed structures. In contrast, other positions such as sitting upright or walking might be less painful for some patients because they can adjust their posture dynamically, allowing for variations in spinal alignment that can sometimes alleviate pain. Standing could also reduce some pressure on the spinal cord compared to lying supine, depending on the individual's condition and the location of the compression. Therefore, lying down supine is recognized as a position that commonly aggravates pain in the context of spinal cord compression.

7. What condition is treated with ATRA?

- A. Acute Lymphoblastic Leukemia
- B. Acute Promyelocytic Leukemia**
- C. Chronic Myelogenous Leukemia
- D. Chronic Lymphocytic Leukemia

Acute Promyelocytic Leukemia (APL) is specifically treated with All-Trans Retinoic Acid (ATRA). ATRA is a derivative of vitamin A that plays a crucial role in the differentiation of immature cells, particularly in the case of the promyelocyte subtype of acute myeloid leukemia. In APL, the pathophysiology involves a specific chromosomal translocation that leads to the fusion of the promyelocyte gene with the retinoic acid receptor gene, which disrupts normal cell differentiation. ATRA works by promoting the maturation of these abnormal promyelocytes into mature granulocytes, effectively reducing the blast percentage and allowing for recovery of normal hematopoiesis. This targeted therapy has significantly improved outcomes for patients with APL, demonstrating its role as a cornerstone in the treatment protocol for this specific type of leukemia. Its effectiveness is underscored by its ability to not only induce remission but also to improve overall survival rates, marking ATRA as a critical therapeutic agent in managing Acute Promyelocytic Leukemia.

8. What is selective screening designed to do?

- A. Identify individuals needing immunization
- B. Screen every demographic equally
- C. Look for specific issues in high-risk groups**
- D. Provide treatment plans for all patients

Selective screening is specifically aimed at looking for particular health issues or conditions within high-risk groups rather than the entire population. This approach is based on the understanding that certain populations may be more susceptible to certain diseases due to factors such as genetics, lifestyle, or environmental exposures. By focusing screening efforts on these at-risk groups, healthcare providers can enhance the efficiency and effectiveness of early detection, leading to timely interventions and improved outcomes. The emphasis on high-risk populations allows for better allocation of resources in healthcare and can lead to more tailored preventive strategies. Identifying specific conditions in these populations helps to manage disease risks more effectively than a blanket approach, which may not be as effective in identifying issues where they are most likely to occur.

9. Which of the following is NOT a cancer warning sign?

A. Change in bowel or bladder

B. Thinning hair

C. Unusual bleeding

D. Nagging cough

Identifying the signs of cancer is critical for early detection and treatment. A change in bowel or bladder habits, unusual bleeding, and a nagging cough are commonly recognized as potential warning signs of cancer. These symptoms can indicate various types of malignancies, such as colorectal cancer, blood disorders, or lung cancer, respectively. In contrast, thinning hair is generally not considered a cancer warning sign. While hair loss can occur due to various reasons, including certain medical conditions or the side effects of some cancer treatments, it is not a specific symptom that indicates the presence of cancer. Therefore, recognizing thinning hair as a benign condition rather than a direct symptom of cancer helps differentiate it from the more critical warning signs associated with the disease.

10. Which of the following is a late effect of radiation therapy on the urinary system?

A. Necrosis

B. Strictures

C. Oligospermia

D. Hyperpigmentation

Selecting strictures as the correct answer highlights an important aspect of late effects from radiation therapy. Strictures in the urinary system occur due to damage to the tissues of the bladder, urethra, or other parts of the urinary tract during radiation treatment. These tissues can become fibrotic and narrow as a result, leading to obstruction and difficulties with urinary function. This is particularly pertinent in patients who have undergone pelvic irradiation, where the urinary tract is directly affected. Strictures can lead to significant complications, including urinary retention, infections, and the need for surgical intervention. Other choices represent adverse effects but are not classified as typical late effects of radiation therapy concerning the urinary system. Necrosis can occur, but it is usually associated with acute complications rather than as a delayed effect. Oligospermia is more related to radiation effects on the male reproductive system, and while hyperpigmentation can occur in irradiated skin, it does not pertain directly to urinary system effects. Thus, the choice of strictures aligns more closely with the expected late effects of radiation therapy on the urinary 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://ocn-oncc.examzify.com>

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

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