

Oncology Nursing Society (ONS) Certification 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. What potential complication can severe mucositis cause in cancer patients?**
 - A. Increased fatigue**
 - B. Difficulty swallowing**
 - C. Nutritional deficiency**
 - D. Weight gain**
- 2. Which aspect is crucial when developing a care plan for a cancer patient?**
 - A. Patient's financial status**
 - B. Patient's preference and values**
 - C. Availability of clinical trials**
 - D. Hospital policy on treatment**
- 3. How should a nurse effectively address cultural differences in oncology care?**
 - A. By insisting on standardized treatment protocols**
 - B. By providing culturally competent care and respecting patient preferences**
 - C. By minimizing patient involvement in treatment decisions**
 - D. By educating patients on Western medical practices**
- 4. During chemotherapy, what dietary change might help minimize nausea for patients?**
 - A. Increased intake of fried foods.**
 - B. Frequent small meals.**
 - C. High fiber snacks.**
 - D. Limit fluid intake.**
- 5. When should a nurse perform a head-to-toe assessment on an oncology patient?**
 - A. Upon initial patient admission only**
 - B. Once at the start of treatment**
 - C. Upon initial assessment and periodically throughout treatment**
 - D. Only when a new symptom arises**

6. What is a common pain management strategy for cancer patients?

- A. Using heat packs only**
- B. Administering scheduled opioids**
- C. Encouraging exercise above all**
- D. Focusing solely on psychological therapies**

7. What is a primary goal of using the ECOG performance status scale?

- A. To prioritize treatment options**
- B. To evaluate pain management strategies**
- C. To measure quality of life**
- D. To categorize patient mobility and daily activity**

8. What is the primary role of an oncology nurse navigator?

- A. To lead treatment sessions**
- B. To coordinate patient care within the healthcare system**
- C. To conduct research on cancer treatments**
- D. To provide nutritional counseling**

9. What access method has the highest risk for venous irritation during a continuous infusion of fluorouracil?

- A. A new 18-gauge peripheral IV requiring multiple attempts**
- B. An implanted vascular access device placed three years ago**
- C. A recently inserted midline catheter using ultrasound technology**
- D. A peripherally inserted central catheter inserted three days ago**

10. Why is providing psychosocial support essential for oncology patients?

- A. It reduces the need for medications**
- B. It addresses emotional distress and improves coping strategies**
- C. It guarantees a better treatment outcome**
- D. It enhances knowledge about the disease**

Answers

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

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Explanations

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1. What potential complication can severe mucositis cause in cancer patients?

- A. Increased fatigue
- B. Difficulty swallowing**
- C. Nutritional deficiency
- D. Weight gain

Severe mucositis, which is inflammation and ulceration of the mucous membranes in the mouth and digestive tract often caused by cancer treatments like chemotherapy and radiation, can lead to significant complications, one of which is difficulty swallowing. When mucositis occurs, it can cause pain, burning sensations, and ulcerations in the mouth and throat, making it difficult for patients to swallow food and liquids safely. This impairment can lead to a range of issues, such as avoiding eating due to pain, which can exacerbate nutritional deficiencies. Consequently, while there are several associated complications of mucositis, the immediate and direct impact on swallowing represents a critical concern that can affect a patient's overall well-being and quality of life. It is important to note that while nutritional deficiencies and weight loss can arise as secondary consequences of mucositis, the primary and immediate symptom to address is the difficulty in swallowing. Other options, such as increased fatigue and weight gain, are not directly associated with mucositis as primary complications. Thus, difficulty swallowing stands out as a pertinent and immediate concern for cancer patients experiencing severe mucositis.

2. Which aspect is crucial when developing a care plan for a cancer patient?

- A. Patient's financial status
- B. Patient's preference and values**
- C. Availability of clinical trials
- D. Hospital policy on treatment

In developing a care plan for a cancer patient, considering the patient's preferences and values is essential because it ensures that the care provided aligns with what the patient seeks for their own health and well-being. Each individual has unique perspectives shaped by their experiences, beliefs, and culture, which can influence their treatment choices and responses to care. By acknowledging and integrating these preferences into the care plan, healthcare providers can enhance patient satisfaction, adherence to treatment, and overall quality of life. This approach aligns with person-centered care, where the patient's voice is central in making health decisions, fostering a collaborative relationship between the patient and the healthcare team. Understanding what matters most to the patient—such as quality of life, treatment goals, and personal beliefs about health—allows for a more tailored and effective care strategy. While factors like financial status, clinical trial availability, and hospital policies may impact the overall care framework, they should be secondary to the patient's own preferences and values. Addressing these can lead to more compliant and engaged patients, ultimately improving health outcomes.

3. How should a nurse effectively address cultural differences in oncology care?

- A. By insisting on standardized treatment protocols**
- B. By providing culturally competent care and respecting patient preferences**
- C. By minimizing patient involvement in treatment decisions**
- D. By educating patients on Western medical practices**

Providing culturally competent care and respecting patient preferences is essential in addressing cultural differences in oncology care. This approach acknowledges the diverse backgrounds, values, beliefs, and languages that patients bring to their healthcare experience, which can significantly influence their understanding of and engagement with their treatment. Culturally competent care involves actively listening to patients, understanding their specific needs, and incorporating their cultural beliefs into their treatment plans. This can enhance trust and improve communication between the nurse and the patient, leading to better health outcomes. When patients feel respected and understood, they are more likely to participate in their care, adhere to treatment protocols, and express their concerns and hopes regarding their health journey. For instance, some patients might have specific dietary restrictions or healing practices based on their cultural background that must be understood and respected. By incorporating these preferences into the care plan, nurses can ensure that the treatment provided is not only medically effective but also culturally sensitive. Furthermore, fostering an environment where patients feel comfortable discussing their cultural beliefs can lead to improved clinician-patient relationships and ultimately enhance patient satisfaction and outcomes in oncology care.

4. During chemotherapy, what dietary change might help minimize nausea for patients?

- A. Increased intake of fried foods.**
- B. Frequent small meals.**
- C. High fiber snacks.**
- D. Limit fluid intake.**

Frequent small meals can be an effective dietary change to help minimize nausea during chemotherapy. This approach helps maintain a steady level of food in the stomach, which can be beneficial in preventing the build-up of nausea that often occurs with large meals. Smaller portions are typically easier for patients to tolerate and can prevent the sensations of fullness that may contribute to discomfort. Additionally, frequent eating can help regulate blood sugar levels, which may also play a role in managing nausea. In comparison, increasing the intake of fried foods is generally discouraged as they can be greasy and heavy, often exacerbating nausea instead of alleviating it. High fiber snacks may not be immediately helpful for someone experiencing nausea because they can sometimes lead to gastrointestinal discomfort or fullness. Limiting fluid intake may lead to dehydration, which could further exacerbate nausea and impact overall health during chemotherapy. Therefore, frequent small meals emerge as a supportive strategy specifically aimed at reducing symptoms of nausea in these patients.

5. When should a nurse perform a head-to-toe assessment on an oncology patient?

- A. Upon initial patient admission only
- B. Once at the start of treatment
- C. Upon initial assessment and periodically throughout treatment**
- D. Only when a new symptom arises

Performing a head-to-toe assessment upon initial assessment and periodically throughout treatment is essential for oncology patients due to the complex nature of their care. This comprehensive assessment allows the nurse to establish a baseline for the patient's physical status, identify any changes or new symptoms that may arise, and monitor the effects of treatment over time. Oncology patients often experience various symptoms from cancer itself and from the side effects of treatments such as chemotherapy and radiation. By conducting these assessments regularly, the nurse can ensure that any new or worsening symptoms are addressed promptly, facilitating timely interventions that can improve patient outcomes. This continuous evaluation helps in planning and adjusting care, managing symptoms, and providing effective support throughout the patient's journey. In contrast, limiting assessments to initial admission or only when new symptoms appear could lead to missed opportunities for early intervention and holistic patient management. Regular assessments are crucial in oncology nursing to adapt care plans according to the changing clinical picture.

6. What is a common pain management strategy for cancer patients?

- A. Using heat packs only
- B. Administering scheduled opioids**
- C. Encouraging exercise above all
- D. Focusing solely on psychological therapies

Administering scheduled opioids is a common pain management strategy for cancer patients due to the significant and often persistent pain experienced as a result of the disease and its treatment. Opioids are effective in managing moderate to severe pain, providing relief that is crucial for maintaining the quality of life for patients undergoing rigorous treatments. Scheduled dosing allows for consistent and preventative management of pain, as opposed to on-demand dosing, which may lead to periods of inadequate pain relief. Furthermore, the use of scheduled opioids is aligned with the principles of pain management that emphasize the need for a proactive approach to pain control, especially in palliative care settings. This approach also takes into consideration the pharmacokinetics of opioids, which may require regular administration to maintain effective pain control and avoid the peaks and troughs associated with pain exacerbations. In contrast, the other options presented do not represent comprehensive pain management strategies on their own. For instance, using heat packs may provide temporary relief for certain types of pain but is not a standalone solution for managing severe cancer pain. Encouraging exercise can be beneficial for overall health and may assist in pain management, but it should not be considered the primary strategy, particularly for patients experiencing significant pain. Focusing solely on psychological therapies may

7. What is a primary goal of using the ECOG performance status scale?

- A. To prioritize treatment options**
- B. To evaluate pain management strategies**
- C. To measure quality of life**
- D. To categorize patient mobility and daily activity**

The primary goal of using the ECOG (Eastern Cooperative Oncology Group) performance status scale is to categorize patient mobility and daily activity. This scale provides a standardized way to assess a patient's level of functioning and ability to perform daily activities, which is crucial for determining how cancer or its treatments impact their quality of life and overall health status. By categorizing patients from fully active to being completely disabled, healthcare providers can make informed decisions about treatment plans and interventions tailored to the patient's functional level. This functional assessment aids in predicting treatment tolerance, potential outcomes, and overall prognosis. Ultimately, understanding a patient's mobility and daily activity is essential in oncology nursing, as it informs care plans and resource allocation for supportive services.

8. What is the primary role of an oncology nurse navigator?

- A. To lead treatment sessions**
- B. To coordinate patient care within the healthcare system**
- C. To conduct research on cancer treatments**
- D. To provide nutritional counseling**

The primary role of an oncology nurse navigator is to coordinate patient care within the healthcare system. This includes assisting patients in navigating the complexities of cancer diagnosis, treatment options, and coordinating between various healthcare providers to ensure comprehensive and continuous care. Nurse navigators play an essential role in addressing barriers to care, facilitating communication among the care team, and ensuring that patients receive the necessary support and resources throughout their treatment journey. While leading treatment sessions is a critical role for some healthcare providers, such as physicians or nurse practitioners, it is not the main focus of a nurse navigator. Conducting research on cancer treatments is typically reserved for clinical researchers or oncology nurses in advanced practice roles, rather than for navigators whose primary focus is on patient care. Nutritional counseling could be beneficial for cancer patients, yet it is usually performed by dietitians or nutritionists, not specifically by nurse navigators, whose role is more comprehensive in terms of overall care coordination. Thus, the role of the nurse navigator is distinct and centered on ensuring that patients effectively navigate their cancer care pathways.

9. What access method has the highest risk for venous irritation during a continuous infusion of fluorouracil?

- A. A new 18-gauge peripheral IV requiring multiple attempts**
- B. An implanted vascular access device placed three years ago**
- C. A recently inserted midline catheter using ultrasound technology**
- D. A peripherally inserted central catheter inserted three days ago**

The access method identified as having the highest risk for venous irritation during a continuous infusion of fluorouracil is the new 18-gauge peripheral IV requiring multiple attempts. When administering chemotherapeutic agents like fluorouracil, peripheral IVs are most susceptible to complications such as phlebitis, infiltration, or extravasation, particularly when the IV placement is not optimal. The repeated attempts to establish an IV can cause trauma to the surrounding veins, leading to local irritation and inflammation. An 18-gauge catheter is larger in diameter, which can enhance the risk of venous irritation compared to smaller gauges, particularly if the vein is not healthy or if there is a significant volume of blood flow. Continuous infusion further increases the risk of chemical irritation of the vein lining since fluorouracil is a potent cytotoxic agent. Other access methods, while they do present some risks, are generally associated with lower rates of venous irritation. An implanted vascular access device placed three years ago is designed for long-term use and usually presents minimal irritation as it is positioned centrally, effectively reducing exposure of the vein to irritants. A recently inserted midline catheter and a peripherally inserted central catheter (PICC) are also designed to minimize

10. Why is providing psychosocial support essential for oncology patients?

- A. It reduces the need for medications**
- B. It addresses emotional distress and improves coping strategies**
- C. It guarantees a better treatment outcome**
- D. It enhances knowledge about the disease**

Providing psychosocial support is essential for oncology patients primarily because it addresses emotional distress and improves coping strategies. Cancer diagnosis and treatment can lead to significant challenges, including feelings of fear, anxiety, and depression. By offering psychosocial support, healthcare professionals can help patients navigate these emotional challenges, fostering resilience and improving their ability to cope with the complex experiences associated with cancer. This support often includes counseling, support groups, and resources tailored to meet the emotional and social needs of patients. Not only does this aid in emotional healing, but it also encourages compliance with medical treatment and can enhance the overall quality of life. Improved coping strategies can lead to better psychological outcomes, which are crucial for patients facing the often daunting realities of cancer. Addressing emotional distress through psychosocial support does not guarantee better treatment outcomes or reduce the need for medications directly, though it may indirectly contribute to improved adherence to treatment plans. Furthermore, while enhancing knowledge about the disease is important, it primarily relates to informational support rather than the emotional and psychosocial dimensions critical to patient care.

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://oncologynursing.examzify.com>

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

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