

ONCOLOGY NURSING SOCIETY (ONS) CERTIFICATION PRACTICE EXAM (SAMPLE) STUDY GUIDE



Prepare with structure. Pass with confidence



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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 treatment is indicated for a patient with a potential delay in neutrophil engraftment following a stem cell transplant?**
 - A. Increased hydration
 - B. Patient isolation
 - C. Bone marrow biopsy
 - D. Observation for infection

- 2. What does the TNM staging system assess?**
 - A. Tumor, Node, Metastasis
 - B. Treatment, Neoplasm, Mortality
 - C. Time, Neoplasm, Measurement
 - D. Type, Node, Monitoring

- 3. What distinguishes a Phase III clinical trial in oncology research?**
 - A. It involves only animal testing
 - B. It compares the new treatment to the current standard treatment in a larger population
 - C. It is focused solely on the drug's safety
 - D. It tests multiple drugs at once

- 4. Which cancer is known for its high risk of metastasis?**
 - A. Breast cancer
 - B. Lung cancer
 - C. Melanoma
 - D. Prostate cancer

- 5. What is the role of a nurse in managing chemotherapy administration?**
 - A. To ensure the patient receives education on the treatment
 - B. To monitor for adverse reactions and ensure proper dosing
 - C. To prepare the chemotherapy drug
 - D. To conduct pre-chemotherapy assessments

- 6. Nursing interventions for the management of nausea include encouraging patients to:**
- A. Use spicy sauces and gravies.
 - B. Eat high-protein and high-potassium foods.
 - C. Consume more frequent meals with small portions.
 - D. Avoid brushing their teeth when they are nauseated.
- 7. What is the primary goal of palliative care in oncology?**
- A. To cure the cancer
 - B. To manage symptoms and improve quality of life
 - C. To provide chemotherapy
 - D. To facilitate clinical trials
- 8. Which cancer is most commonly diagnosed in women?**
- A. Lung cancer
 - B. Breast cancer
 - C. Cervical cancer
 - D. Ovarian cancer
- 9. When caring for a patient with a diagnosis of renal cell carcinoma, which manifestation should the nurse monitor for as a priority?**
- A. Fatigue and malaise.
 - B. High blood pressure.
 - C. Weight loss and changes in appetite.
 - D. Signs of metastasis.
- 10. How can oncology nurses contribute to advancing cancer research?**
- A. By participating in clinical trials and data collection
 - B. By limiting patient participation
 - C. By avoiding interactions with researchers
 - D. By focusing solely on patient care

Answers

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

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Explanations

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1. What treatment is indicated for a patient with a potential delay in neutrophil engraftment following a stem cell transplant?

- A. Increased hydration
- B. Patient isolation
- C. Bone marrow biopsy

D. Observation for infection

In cases where there is a potential delay in neutrophil engraftment following a stem cell transplant, the appropriate treatment is observation for infection. After a stem cell transplant, patients often experience significant neutropenia (low neutrophil count), which puts them at a higher risk for infections. Monitoring and observing the patient closely allows healthcare providers to identify any signs of infection early, which is critical since infections can escalate quickly in these patients. It is essential to watch for any signs of febrile neutropenia or other infection-related symptoms. While supportive measures such as increased hydration can be beneficial, they do not address the primary concern, which is the patient's immune status. Patient isolation is another important practice to minimize infection risk, but observation specifically allows for timely intervention if an infection is detected. A bone marrow biopsy may not be immediately necessary unless there is a concern for other complications or diseases, such as graft failure or recurrence of malignancy. Thus, systematic observation for infection is crucial in managing patients post-transplant, making this the most suitable approach in the scenario of delayed neutrophil engraftment.

2. What does the TNM staging system assess?

A. Tumor, Node, Metastasis

- B. Treatment, Neoplasm, Mortality
- C. Time, Neoplasm, Measurement
- D. Type, Node, Monitoring

*The TNM staging system is a widely recognized standard used in oncology to classify the extent of cancer spread in a standardized way, which is crucial for determining prognosis and treatment plans. The components of the TNM system are clearly defined: - **T** refers to the size and extent of the primary tumor. It assesses how large the tumor is and whether it has invaded nearby tissues, with higher numbers indicating larger size or more extensive invasion. - **N** designates whether there are regional lymph nodes involved. This aspect provides information on whether and how many lymph nodes are affected by cancer, which can influence treatment decisions and prognosis. - **M** indicates the presence of metastasis, meaning whether cancer has spread to distant parts of the body. The presence or absence of metastasis significantly impacts the stage of cancer and guides therapeutic choices. This systematic approach allows healthcare professionals to communicate effectively about cancer status and tailor management strategies accordingly. The other options do not accurately represent the components of the TNM system, missing the specific elements integral to cancer staging.*

3. What distinguishes a Phase III clinical trial in oncology research?

- A. It involves only animal testing
- B. It compares the new treatment to the current standard treatment in a larger population**
- C. It is focused solely on the drug's safety
- D. It tests multiple drugs at once

A Phase III clinical trial is a crucial stage in the development of new cancer treatments, distinguished primarily by its focus on comparing the efficacy of a new treatment against the current standard of care in a larger population of patients. This phase is designed to confirm the effectiveness of the treatment, monitor side effects, and collect more comprehensive data that will help to evaluate the overall benefit-risk ratio of the new therapy. In these trials, participants are typically randomized to receive either the new treatment or the standard treatment, allowing researchers to assess not just if the new treatment works, but how it compares to existing treatments in terms of effectiveness and safety. This phase often involves hundreds or thousands of participants and is essential for determining how the new therapy performs in a real-world setting before it can be approved for general use. The focus on a larger population is key, as it helps ensure that the results are applicable to the general patient population. This is markedly different from prior phases, such as Phase I, which primarily evaluates safety and dosing in a small group of patients, and Phase II, which focuses on the treatment's effectiveness and safety in a slightly larger group. The other options do not accurately reflect the characteristics of Phase III trials: testing in animals pertains to earlier developmental phases, safety

4. Which cancer is known for its high risk of metastasis?

- A. Breast cancer
- B. Lung cancer
- C. Melanoma**
- D. Prostate cancer

Melanoma is particularly known for its propensity to metastasize, which is a critical aspect of its clinical behavior and prognosis. The nature of melanoma, a form of skin cancer arising from melanocytes, leads to the potential for it to spread both locally and distantly at an early stage. Melanoma cells can invade the lymphatic system and blood vessels more readily compared to other types of cancer, allowing them to disseminate to distant organs such as the lungs, liver, brain, and bones. Additionally, the unique biological characteristics of melanoma, such as its mutation-driven pathways and the ability to evade immune surveillance, contribute to its aggressive nature and high metastatic potential. This makes early detection and treatment particularly important in managing melanoma effectively, as advanced stages with metastasis significantly impact patient outcomes. In contrast, while other cancers like breast, lung, and prostate can also metastasize, the risk and patterns of spread differ. For example, breast cancer typically metastasizes to lymph nodes, bones, liver, and brain, while lung cancer often spreads to the brain, adrenal glands, liver, and bones. Prostate cancer tends to spread to the bones before any other site. The aggressive nature of melanoma's metastatic behavior sets it apart, undersc

5. What is the role of a nurse in managing chemotherapy administration?

- A. To ensure the patient receives education on the treatment
- B. To monitor for adverse reactions and ensure proper dosing**
- C. To prepare the chemotherapy drug
- D. To conduct pre-chemotherapy assessments

The role of a nurse in managing chemotherapy administration is vital for ensuring patient safety and the effectiveness of treatment. Monitoring for adverse reactions is a crucial responsibility, as patients receiving chemotherapy can experience a range of side effects that may require immediate intervention. By closely observing the patient during and after administration, the nurse can identify any adverse reactions early, which is essential for timely management and mitigation of complications. In addition to monitoring for side effects, ensuring proper dosing is also a critical part of the nurse's role. This involves verifying the accuracy of dosing based on patient-specific factors such as weight, overall health, and previous responses to treatment. Administering the correct dose is fundamental to achieving the desired therapeutic outcomes while minimizing toxicity. While education on treatment and conducting pre-chemotherapy assessments are important components of the nursing role in oncology, the immediate focus during chemotherapy administration centers on safety and monitoring for adverse effects. Preparing chemotherapy drugs is typically the responsibility of a pharmacy or specialized trained personnel rather than the nurse administering the treatment.

6. Nursing interventions for the management of nausea include encouraging patients to:

- A. Use spicy sauces and gravies.
- B. Eat high-protein and high-potassium foods.
- C. Consume more frequent meals with small portions.**
- D. Avoid brushing their teeth when they are nauseated.

Encouraging patients to consume more frequent meals with small portions is an effective nursing intervention for managing nausea. This approach helps to prevent the stomach from becoming too full, which can exacerbate feelings of nausea. Smaller, more frequent meals can also facilitate easier digestion and reduce the sensation of overwhelming hunger or fullness that some patients might experience, especially those undergoing treatments that affect their appetite. Additionally, smaller portions can incorporate a variety of bland foods, which are often better tolerated during episodes of nausea. The goal is to provide nutrition while minimizing discomfort, thereby improving the patient's overall well-being. This method aligns with dietary recommendations for patients experiencing nausea related to treatments such as chemotherapy or post-surgery recovery. The other options may not effectively alleviate nausea or could potentially worsen it. For instance, spicy foods can activate nausea rather than mitigate it, and while high-protein and high-potassium foods have their nutritional benefits, they do not specifically address the discomfort of nausea. Finally, avoiding tooth brushing when nauseated may lead to poor oral hygiene, which can negatively impact a patient's overall health and comfort. Focusing on small, frequent meals is a practical and supportive way to manage nausea in patients.

7. What is the primary goal of palliative care in oncology?

- A. To cure the cancer
- B. To manage symptoms and improve quality of life**
- C. To provide chemotherapy
- D. To facilitate clinical trials

The primary goal of palliative care in oncology is to manage symptoms and improve quality of life. Palliative care focuses on providing relief from the symptoms, pain, and stress associated with serious illnesses, including cancer. It is an integral part of cancer treatment that can be provided alongside curative therapies or as the main focus of care when curative treatment is no longer an option. This approach emphasizes understanding the patient's experience, providing emotional and spiritual support, and enhancing the overall well-being of the individual and their family. By addressing issues such as pain, nausea, fatigue, anxiety, and interpersonal challenges, palliative care aims to improve the patient's quality of life, regardless of the stage of the disease or the need for other treatments. In contrast, the other options are not aligned with the core objective of palliative care. For example, curing cancer, providing chemotherapy, or facilitating clinical trials focus more on disease management and treatment rather than the holistic support of symptom relief and quality of life enhancement that palliative care emphasizes.

8. Which cancer is most commonly diagnosed in women?

- A. Lung cancer
- B. Breast cancer**
- C. Cervical cancer
- D. Ovarian cancer

Breast cancer holds the distinction of being the most commonly diagnosed cancer among women. This prevalence is attributed to numerous factors including biological, environmental, and lifestyle components that contribute to its high incidence. According to various health statistics, breast cancer accounts for a significant percentage of all female cancer diagnoses. Screening guidelines and increased awareness have also led to earlier detection, further solidifying breast cancer's status as the leading cancer diagnosis in women. Lung cancer, while a significant health concern, is more commonly diagnosed in men than in women overall, though the incidence rates in women have been increasing. Cervical cancer and ovarian cancer, although serious and impactful cancers, have lower incidence rates compared to breast cancer. Thus, breast cancer remains the leading type, highlighting the importance of awareness, screening, and research focused on this specific type of cancer.

9. When caring for a patient with a diagnosis of renal cell carcinoma, which manifestation should the nurse monitor for as a priority?

- A. Fatigue and malaise.
- B. High blood pressure.
- C. Weight loss and changes in appetite.

D. Signs of metastasis.

In the context of renal cell carcinoma, monitoring for signs of metastasis is particularly critical because this cancer is known for its tendency to spread beyond the kidneys to other parts of the body, such as the lungs, liver, bones, and brain. Metastasis can profoundly impact the patient's prognosis, treatment options, and overall health status. Early detection of metastatic disease is crucial as it can significantly influence management strategies and decision-making in oncologic care. In renal cell carcinoma, symptoms of metastasis may include new and unusual pain, persistent cough, neurological symptoms, or unexpected weight loss associated with systemic illness. By prioritizing the assessment for signs of metastasis, the nurse is taking a proactive approach in identifying complications that may require immediate intervention and therapeutic adjustments. While fatigue and malaise, high blood pressure, and weight loss with changes in appetite are also important manifestations to monitor, they are often part of the broader disease picture or may not indicate immediate health deterioration. Monitoring for metastasis allows for timely and potentially life-prolonging interventions that address the complexity and spread of the disease.

10. How can oncology nurses contribute to advancing cancer research?

A. By participating in clinical trials and data collection

- B. By limiting patient participation
- C. By avoiding interactions with researchers
- D. By focusing solely on patient care

Oncology nurses play a pivotal role in advancing cancer research through participation in clinical trials and data collection. Their direct involvement with patients enables them to observe treatment effects, gather patient-reported outcomes, and contribute to the overall data needed for clinical studies. When oncology nurses participate in clinical trials, they help to ensure that the research addresses the real-world implications of cancer treatment, including side effects, patient quality of life, and treatment adherence. By collecting and reporting accurate data, oncology nurses facilitate the development of new therapies and best practices, thereby contributing to evidence-based improvements in cancer care. Their insights can shape research questions and lead to innovative approaches that can enhance patient outcomes. In contrast, limiting patient participation, avoiding interactions with researchers, and focusing solely on patient care would all inhibit the progress of cancer research. Engaging actively in the research process is essential for oncology nurses to bridge the gap between clinical practice and research advancements.

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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