

OUTCOME AND ASSESSMENT INFORMATION SET VERSION E (OASIS-E) PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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THE FULL VERSION STUDY GUIDE

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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. If a patient was constantly confused for the first 4 days and then off and on for 10 days, what is the best response for M1710. Confusion?**
 - A. In complex or new situations only.
 - B. Upon awakening or at night only.
 - C. During the day and evening, but not constantly.
 - D. Constantly.
- 2. What is one of the critical considerations while interpreting the PHQ-2 to PHQ-9 responses?**
 - A. Responses must be interpreted as absolute truths
 - B. Responses may vary based on the patient's understanding
 - C. Responses should only be considered from the medical chart
 - D. Responses can be assessed without context
- 3. For a patient with acute pancreatitis who is now resolved, what is the most accurate primary diagnosis according to M1021?**
 - A. Pancreatitis
 - B. Diabetes
 - C. Decondition
 - D. Weakness
- 4. What is a primary goal of OASIS-E in relation to chronic disease management?**
 - A. To limit patient data collection to essential information
 - B. To collect data that informs better management strategies for chronic conditions
 - C. To eliminate the need for interdisciplinary care
 - D. To track only hospital readmission rates
- 5. For a patient using Oxygen continuously and needing CPAP education, how should you respond to Respiratory Therapies in O0110?**
 - A. Check, C1. Oxygen therapy and C2. continuous AND G1. Non-invasive Mechanical Ventilator and G3. CPAP
 - B. Check, C1. Oxygen therapy and C2. Continuous only
 - C. Check, G1. Non-invasive Mechanical Ventilator and G3. CPAP only
 - D. Check, C1. Oxygen therapy and C2. Continuous AND F1. Invasive Mechanical Ventilator

- 6. What is the recommended order of obtaining assessment information regarding ethnicity, race, and language?**
- A. From the patient only.
 - B. From a proxy and then the medical record.
 - C. From whichever source is most credible.
 - D. From the patient first, then a proxy and finally the medical record.
- 7. If a patient denies dyspnea but exhibits signs when ambulating, what should you do with M1400 response code?**
- A. Keep M1400 response code 0
 - B. Change M1400 response code to 2
 - C. Change M1400 response code to 3
 - D. Refer the patient for further assessment
- 8. For coding purposes, a patient requires what kind of assistance level if they perform all daily hygiene tasks independently?**
- A. Minimal assistance for all tasks.
 - B. No assistance at all.
 - C. Total assistance in all tasks.
 - D. Only assistance for specific tasks.
- 9. What key component does OASIS-E data emphasize for performance improvement?**
- A. Patient attendance rates
 - B. Compliance with federal regulations
 - C. Systematic collection of patient data
 - D. Feedback from healthcare providers
- 10. When scoring C0200, which of the following is TRUE?**
- A. Score only after the first attempt.
 - B. Words must be recalled in the order given.
 - C. A patient can only list the words in order, not say them in a sentence.
 - D. If they get all three correct, they score a 2.

Answers

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

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Explanations

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1. If a patient was constantly confused for the first 4 days and then off and on for 10 days, what is the best response for M1710. Confusion?

- A. In complex or new situations only.
- B. Upon awakening or at night only.
- C. During the day and evening, but not constantly.**
- D. Constantly.

The correct response highlights that the patient's confusion is not present at all times but occurs intermittently throughout the day. In this scenario, the patient exhibits confusion for the first four days continuously and then experiences confusion intermittently for the next ten days, which suggests a pattern of confusion that does not meet the criteria for being defined as constant. Option C accurately reflects that the patient's confusion appeared during the day and evening but was not persistent. This captures the fluctuation in the patient's mental state, acknowledging that while confusion was a significant issue, it did not occur continuously. Recognizing this variability is important for correct coding in OASIS-E, as it provides a more accurate picture of the patient's condition and helps in planning appropriate care and interventions.

2. What is one of the critical considerations while interpreting the PHQ-2 to PHQ-9 responses?

- A. Responses must be interpreted as absolute truths
- B. Responses may vary based on the patient's understanding**
- C. Responses should only be considered from the medical chart
- D. Responses can be assessed without context

The interpretation of the PHQ-2 to PHQ-9 responses must take into account that the responses may vary based on the patient's understanding. This is critical because these instruments are self-reported measures of depression where patients are required to reflect on their feelings and experiences. Individual interpretation can significantly affect how questions are answered. For instance, a patient's mood and context at the time of completing the questionnaire can influence their responses, which may not fully capture their overall mental health status or experiences. This understanding is essential for healthcare providers to give proper consideration to the results, taking into account other clinical observations, medical history, and potential cultural or situational factors that could affect a patient's reporting of symptoms. Other options do not adequately recognize the variability and subjective nature of self-reported data, which is why they are less viable considerations.

3. For a patient with acute pancreatitis who is now resolved, what is the most accurate primary diagnosis according to M1021?

- A. Pancreatitis
- B. Diabetes**
- C. Decondition
- D. Weakness

In assessing a patient who has resolved acute pancreatitis, the most accurate primary diagnosis according to M1021 would be diabetes if the patient has developed this condition as a complication of their pancreatitis. The pancreas plays a crucial role in blood sugar regulation through insulin production, and damage or alteration in pancreatic function due to acute pancreatitis can lead to diabetes mellitus. When selecting the primary diagnosis in M1021, it is crucial to consider the patient's current health status and the most significant impact on their care. If the patient has developed diabetes as an ongoing issue following their episode of pancreatitis, it would reflect a chronic condition that is relevant to their overall health management. Being resolved from acute pancreatitis indicates that the immediate inflammatory condition is no longer present; however, the development of diabetes could pose new challenges for the patient regarding management of blood glucose levels, lifestyle adjustments, and medication needs, making it a significant diagnosis. The other options could represent symptoms or a state following the resolution of the pancreatitis but do not directly denote a significant diagnosis that requires specific treatment or management as diabetes would.

4. What is a primary goal of OASIS-E in relation to chronic disease management?

- A. To limit patient data collection to essential information
- B. To collect data that informs better management strategies for chronic conditions**
- C. To eliminate the need for interdisciplinary care
- D. To track only hospital readmission rates

The primary goal of OASIS-E in relation to chronic disease management is to collect data that informs better management strategies for chronic conditions. This systematic collection of information is critical because it enables healthcare providers to better understand the needs of patients with chronic diseases, leading to improved care planning and implementation. By identifying patient characteristics, healthcare needs, and outcomes through comprehensive data, providers can tailor interventions and resources effectively. This ultimately enhances the quality of care, promotes better outcomes for patients, and supports ongoing management of chronic conditions. The correct answer aligns directly with the aims of OASIS-E, which emphasizes comprehensive assessment to guide clinical decision-making and improve patient outcomes in chronic disease management.

5. For a patient using Oxygen continuously and needing CPAP education, how should you respond to Respiratory Therapies in O0110?

- A. Check, C1. Oxygen therapy and C2. continuous AND G1. Non-invasive Mechanical Ventilator and G3. CPAP**
- B. Check, C1. Oxygen therapy and C2. Continuous only
- C. Check, G1. Non-invasive Mechanical Ventilator and G3. CPAP only
- D. Check, C1. Oxygen therapy and C2. Continuous AND F1. Invasive Mechanical Ventilator

The correct response involves checking C1. Oxygen therapy, C2. continuous, as well as G1. Non-invasive Mechanical Ventilator and G3. CPAP. This comprehensive selection reflects the needs of a patient who requires oxygen continuously and is also undergoing CPAP education. In this scenario, the choice accurately captures that the patient is on continuous oxygen therapy, which is essential because oxygen therapy is indicated in conditions requiring supplemental oxygen. Additionally, noting the use of CPAP indicates that the patient utilizes a non-invasive mechanical ventilator, which is critical for providing appropriate respiratory support. Including both C and G categories ensures that all necessary aspects of the patient's respiratory care are properly documented according to OASIS-E requirements. This choice sets a thorough foundation, ensuring that the provider understands the full breadth of the patient's care, including both oxygen administration and the need for CPAP, which can significantly impact the patient's health outcomes.

6. What is the recommended order of obtaining assessment information regarding ethnicity, race, and language?

- A. From the patient only.
- B. From a proxy and then the medical record.
- C. From whichever source is most credible.
- D. From the patient first, then a proxy and finally the medical record.**

The recommended order of obtaining assessment information regarding ethnicity, race, and language is from the patient first, then a proxy, and finally the medical record. This approach is grounded in the principle that the patient is the most reliable and direct source of their personal information, including their cultural and linguistic background. Gathering this information directly from the patient allows healthcare providers to capture their self-identified ethnicity, race, and preferred language accurately, ensuring that the assessment reflects the patient's perspective. Following the patient, information from a proxy can be useful, especially in cases where the patient may be unable to provide complete or accurate information, such as in situations involving cognitive impairments or language barriers. Proxies can include family members or caregivers who know the patient well and can provide additional context. Finally, consulting the medical record can provide corroborative details but is generally considered less reliable because it may not reflect the most current information as reported by the patient. Medical records can sometimes contain outdated or inaccurate information, particularly if the data was recorded without the patient's direct input. This systematic approach prioritizes the patient's voice, ensuring that the assessment process is respectful of their identity and needs, which is crucial in delivering culturally competent care.

7. If a patient denies dyspnea but exhibits signs when ambulating, what should you do with M1400 response code?

- A. Keep M1400 response code 0
- B. Change M1400 response code to 2**
- C. Change M1400 response code to 3
- D. Refer the patient for further assessment

In this scenario, the patient may be denying awareness of dyspnea, but the observable signs of dyspnea during ambulation indicate a discrepancy between the patient's perceived experience and the actual clinical evidence. The M1400 response code pertains to the assessment of dyspnea, and when physical signs of dyspnea are evident upon exertion, it is appropriate to document this by changing the M1400 response code to a higher value that accurately reflects the patient's condition. By changing the M1400 response code to a 2, you are indicating that the patient experiences dyspnea with exertion, despite their own denial of symptoms at rest. This coding ensures that the patient's condition is correctly represented in the assessment data, which is crucial for both the clinical management of the patient and for accurate reporting and compliance with OASIS-E guidelines. Capturing this information is essential for providing appropriate care and planning further interventions, as it highlights potential needs for increased monitoring or therapy for the patient's respiratory status. In contrast, maintaining the code as 0 would misrepresent the patient's condition, while codes 3 and a referral for further assessment may indicate a level of severity or necessity that does not align with the findings presented in this scenario.

8. For coding purposes, a patient requires what kind of assistance level if they perform all daily hygiene tasks independently?

- A. Minimal assistance for all tasks.
- B. No assistance at all.
- C. Total assistance in all tasks.
- D. Only assistance for specific tasks.**

If a patient performs all daily hygiene tasks independently, they are classified as requiring no assistance at all. This indicates complete independence in performing personal care activities, meaning they do not need help or supervision for any of their daily hygiene needs. Understanding the coding system is crucial for accurately representing a patient's functional ability within the OASIS-E framework, which helps inform healthcare planning and resource allocation. In this context, 'total assistance' would indicate the patient cannot perform any tasks without help, while 'minimal assistance' suggests they can perform tasks but require some help. 'Only assistance for specific tasks' would imply that assistance is only needed for certain activities, which conflicts with the premise of complete independence. Thus, the correct understanding emphasizes that if a patient can manage all tasks independently, they do not require any assistance.

9. What key component does OASIS-E data emphasize for performance improvement?

- A. Patient attendance rates
- B. Compliance with federal regulations
- C. Systematic collection of patient data**
- D. Feedback from healthcare providers

The key component of OASIS-E data that emphasizes performance improvement is indeed the systematic collection of patient data. This approach allows healthcare providers to gather comprehensive and detailed information about patient conditions, treatment outcomes, and service delivery. By systematically collecting and analyzing data, organizations can identify trends, evaluate the effectiveness of interventions, and ultimately improve patient care and health outcomes. The focus on systematic data collection fosters a structured way to monitor patient progress, assess care quality, and ensure adherence to clinical guidelines. This data also plays a crucial role in benchmarking performance against best practices, leading to informed strategies for improvement. While other options like patient attendance rates, compliance with federal regulations, and feedback from healthcare providers may have their own relevance, they do not serve as the foundational element for performance improvement emphasized within the OASIS-E framework as effectively as the systematic collection of patient data does. Collecting data in a structured and consistent manner ensures that healthcare providers can make data-driven decisions that directly enhance patient outcomes and service quality.

10. When scoring C0200, which of the following is TRUE?

- A. Score only after the first attempt.**
- B. Words must be recalled in the order given.
- C. A patient can only list the words in order, not say them in a sentence.
- D. If they get all three correct, they score a 2.

When scoring C0200, the emphasis is on the specific criteria set forth in the OASIS-E guidelines for measuring a patient's cognitive function, particularly in regard to memory recall. The correct choice highlights that scoring should only be conducted after the initial attempt is made by the patient. This is important for ensuring that the assessment reflects the patient's immediate recall ability without being influenced by subsequent attempts or cues. This scoring rule allows healthcare professionals to capture the most genuine response from the patient, encouraging accurate assessment of cognitive functioning as it directly relates to the ability to recall information from memory. It reflects a consistent approach to evaluation in the context of cognitive assessments, ensuring that the patient's performance is not overly influenced by the testing environment or leading assistance. The context of how words are recalled, the necessity of listing them in a specific order, or whether they can formulate sentences with the words are statements that focus on the mechanics of the response rather than the intended measurement of cognitive ability assessed in C0200. These factors do not directly impact the essential purpose of the evaluation, which is to assess recall ability as it stands after the first unassisted attempt. Thus, focusing solely on the first attempt aligns with the principle of capturing accurate cognitive assessment results.

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://oasise.examzify.com>

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

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