

PHYSICIAN ASSISTANT (PA) PROFESSIONALISM PRACTICE TEST (SAMPLE) STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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Table of Contents

Copyright	1
Table of Contents	2
Introduction	3
How to Use This Guide	4
Questions	5
Answers	8
Explanations	10
Next Steps	15

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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 does AMA stand for?

- A. Against Medical Authorization
- B. Against Medical Approval
- C. Against Medical Assistance
- D. Against Medical Advice

2. What does CME stand for?

- A. Continuing Medical Education
- B. Continuing Medical Examination
- C. Clinical Medical Education
- D. Certified Medical Education

3. Which role is not typically identified as part of the healthcare team within this context?

- A. Dietitians, PAs, doctors, nurses
- B. Radiologists, phlebotomists, and technologists
- C. Housekeepers and transporters
- D. Receptionists

4. Which of the following is NOT a typical PA duty?

- A. Take a medical history
- B. Maintain hospital dietary services
- C. Write prescriptions
- D. Make rounds in hospitals and nursing homes

5. Two parts of CME?

- A. Category 1 and Category 2
- B. Core CME and Specialty CME
- C. Self-Assessment and Performance Improvement CME
- D. Basic and Advanced CME

- 6. Which statement describes respect for others as an element of professionalism?**
- A. It involves treating patients and colleagues with dignity and consideration
 - B. Keeping all information to yourself
 - C. Respecting only the physician's decisions
 - D. Withholding information from patients
- 7. How does reflective practice support accountability in patient care?**
- A. By increasing workload.
 - B. By avoiding feedback.
 - C. By focusing only on clinical skills.
 - D. By regularly examining decisions, outcomes, and biases to improve future practice.
- 8. ICD-10 coding is used for billing purposes by insurance companies.**
- A. Used for billing purposes by insurance companies.
 - B. Used only for research.
 - C. Not used in billing.
 - D. Only used for patient scheduling.
- 9. What does professionalism mean?**
- A. The skill, good judgment, and polite behavior that is expected from a person who is trained to do a job well
 - B. Being patient, listening to your patient, commitment bedside manner, no personal feelings, no religious beliefs
 - C. Altruism
 - D. Medical ethics
- 10. What does PANCE stand for?**
- A. Physician Assistant National Certification Exam
 - B. Physician Assistant National Comprehensive Exam
 - C. Practical Assessment for New Clinicians in Education
 - D. Physician Assistant Core Exam

Answers

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

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Explanations

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1. What does AMA stand for?

- A. Against Medical Authorization
- B. Against Medical Approval
- C. Against Medical Assistance
- D. Against Medical Advice**

AMA stands for Against Medical Advice. In clinical practice, this term is used when a patient chooses to leave the hospital or declines recommended treatment despite the physician's advice. It signals patient autonomy while also highlighting potential risks, so the clinician should assess decision-making capacity, document the discussion and risks, and arrange appropriate follow-up or surrogate involvement if capacity is in doubt. While AMA can also refer to the American Medical Association in other settings, in patient-care notes it most commonly means Against Medical Advice.

2. What does CME stand for?

- A. Continuing Medical Education**
- B. Continuing Medical Examination
- C. Clinical Medical Education
- D. Certified Medical Education

This question tests the term clinicians use for ongoing professional learning. CME stands for Continuing Medical Education, which refers to the ongoing activities that help physicians and other clinicians maintain competence and stay up to date with advances in medicine. It isn't a single exam or a specific course, but a structured set of activities—such as lectures, conferences, online modules, and self-study—that typically award CME credits needed for licensure or board maintenance. The other options don't reflect the standard term: Continuing Medical Examination would imply a perpetual test rather than ongoing learning; Clinical Medical Education isn't the established label for this ongoing process; Certified Medical Education would suggest a credential for the education itself, not the ongoing learning required for practice.

3. Which role is not typically identified as part of the healthcare team within this context?

- A. Dietitians, PAs, doctors, nurses
- B. Radiologists, phlebotomists, and technologists
- C. Housekeepers and transporters
- D. Receptionists**

In a clinical sense, who makes up the healthcare team is defined by those who directly participate in patient care, diagnoses, treatment, and the delivery of medical services. Providers like physicians, physician assistants, nurses, and professionals who perform diagnostics or support treatment—such as dietitians, radiologists, phlebotomists, and technologists—are all directly involved in patient care and medical decision-making. Helpers like housekeepers and transporters support safety, cleanliness, and patient flow, which are essential to care but not part of the clinical decision-making or direct medical actions. Receptionists, on the other hand, handle scheduling, admissions, and administrative tasks; they support the patient experience but do not engage in medical care. Therefore, the role not typically identified as part of the healthcare team in this context is the receptionist.

4. Which of the following is NOT a typical PA duty?

- A. Take a medical history
- B. Maintain hospital dietary services**
- C. Write prescriptions
- D. Make rounds in hospitals and nursing homes

The essential idea is understanding what a physician assistant typically does in patient care. PAs are trained for direct clinical duties: interviewing patients and taking medical histories, performing exams, assisting in diagnosing and treating conditions, and prescribing medications under supervision. They also participate in rounds to monitor hospitalized or long-term-care patients and coordinate ongoing care. Maintaining hospital dietary services is not a clinical duty of PAs. That function falls under hospital nutrition and food-service operations (dietitians and food-service managers), not under the direct patient-care tasks PAs are responsible for. So, while a PA may discuss nutrition with a patient, managing or overseeing dietary services isn't within their typical scope. Therefore, the option describing maintaining hospital dietary services is not a typical PA duty, whereas taking a medical history, writing prescriptions, and making rounds are standard clinical responsibilities.

5. Two parts of CME?

- A. Category 1 and Category 2**
- B. Core CME and Specialty CME
- C. Self-Assessment and Performance Improvement CME
- D. Basic and Advanced CME

Two parts of CME refer to the historic split between Category 1 and Category 2 activities. Category 1 consists of formal, structured activities that are eligible for CME credit and typically include components like defined learning objectives, evaluation, and credit designation. Category 2 includes informal or non-credit-bearing activities that still support professional learning but do not count toward CME credit. This distinction is why naming Category 1 and Category 2 is the best answer. The other options describe different ways people talk about CME content or frameworks, but they do not reflect the traditional two-part division used for credit: Core vs Specialty, Self-Assessment and Performance Improvement, or Basic vs Advanced CME.

6. Which statement describes respect for others as an element of professionalism?

- A. It involves treating patients and colleagues with dignity and consideration**
- B. Keeping all information to yourself
- C. Respecting only the physician's decisions
- D. Withholding information from patients

Respect for others in professional practice means treating patients and colleagues with dignity and consideration. This involves listening actively, honoring patient autonomy, communicating with kindness and clarity, protecting confidentiality, and collaborating respectfully with the care team. For instance, discussing treatment options with a patient in plain language and acknowledging their preferences shows this respect in action. Keeping information to yourself undermines informed consent and trust, and it withholds necessary details from patients. Respecting only the physician's decisions ignores the value and contributions of the entire care team and the patient's own perspective. Withholding information from patients also breaches transparency and the patient's right to be involved in care. Therefore, describing patients and colleagues with dignity and consideration best illustrates respect for others as a professional standard.

7. How does reflective practice support accountability in patient care?

- A. By increasing workload.
- B. By avoiding feedback.
- C. By focusing only on clinical skills.
- D. By regularly examining decisions, outcomes, and biases to improve future practice.**

Reflective practice is a deliberate process where clinicians review their actions after patient encounters to learn and improve. This makes accountability real by bringing decisions, patient outcomes, and personal biases into the light, so they can be examined and addressed rather than ignored. When you reflect regularly, you ask questions like: Was the chosen plan appropriate for this patient's context? What outcomes followed, and did they align with goals of care? Could any biases have influenced the judgment or communication? By answering these questions, you identify concrete changes to implement in future practice—adjusting plans, improving patient communication, or altering how you gather information. This ongoing loop—decide, observe outcomes, recognize biases, adjust—demonstrates responsibility to patient safety, quality of care, and professional standards. For example, after a patient encounter, you might realize an assumption about symptom reporting led to an unnecessary test. Reflecting helps you recognize that bias, modify your approach next time, and document the rationale and learning, which benefits future patients and supports transparent accountability. The other options drift away from accountability: increasing workload doesn't inherently improve care or responsibility; avoiding feedback blocks learning and accountability; and focusing only on clinical skills misses the critical evaluation of decisions, results, and biases that actually anchors professional responsibility.

8. ICD-10 coding is used for billing purposes by insurance companies.

- A. Used for billing purposes by insurance companies.**
- B. Used only for research.
- C. Not used in billing.
- D. Only used for patient scheduling.

The main idea is that ICD-10 coding is used for billing and reimbursement by insurance companies. These standardized diagnostic codes translate a patient's health condition into a precise code that payers rely on to determine medical necessity, coverage, and payment levels. Because insurers review claims to decide what will be paid, accuracy and specificity in ICD-10 coding are essential to obtain proper reimbursement and to track health outcomes and population data. While ICD-10 data can also support research and statistical analysis, its primary practical purpose in daily practice is billing and claims processing. It's not mainly about research, and it isn't the primary tool for scheduling; scheduling relies more on encounter logistics and, for procedures, other coding like CPT.

9. What does professionalism mean?

- A. The skill, good judgment, and polite behavior that is expected from a person who is trained to do a job well
- B. Being patient, listening to your patient, commitment bedside manner, no personal feelings, no religious beliefs
- C. Altruism
- D. Medical ethics

Professionalism in healthcare means applying your training with competence and a professional demeanor to earn and maintain patient trust. The best choice captures this by describing professionalism as the combination of skill, good judgment, and polite behavior expected from someone who is trained to do a job well, which covers both how well you can care for patients and how you interact with them and colleagues. It isn't just technical ability; it also includes clear communication, respect for patients, confidentiality, accountability, and sensitivity to diverse beliefs. The other statements are too narrow for professionalism: one overemphasizes bedside manner and dismisses personal beliefs, another reduces professionalism to altruism alone, and another confines it to ethics rather than the broader mix of skills, judgment, and professional conduct.

10. What does PANCE stand for?

- A. Physician Assistant National Certification Exam
- B. Physician Assistant National Comprehensive Exam
- C. Practical Assessment for New Clinicians in Education
- D. Physician Assistant Core Exam

The key idea is knowing the official name of the PA certification exam. PANCE stands for Physician Assistant National Certification Exam. It's the initial certifying test given by the National Commission on Certification of Physician Assistants (NCCPA) after completing an accredited PA program. Passing this exam qualifies you to use the credential PA-C and is a common requirement for state licensure. The other phrases don't match the official title used by the certifying body. They sound plausible but are not the established name of the exam.

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://paprofessionalism.examzify.com>

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

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