

Professional Issues Exam 1 Practice (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. Which organization is primarily responsible for certifying Physician Assistants after completing their education?**
 - A. NCCPA**
 - B. ARC-PA**
 - C. AMA**
 - D. AAPA**

- 2. Which factor is NOT a factor influencing privileging?**
 - A. PA education**
 - B. CME**
 - C. Documentation of procedures performed**
 - D. Patient satisfaction scores**

- 3. Which describes the role of a registered dietitian?**
 - A. They diagnose mental disorders and provide therapy.**
 - B. Assess patients current diet, counsel and educate, develop meal and nutritional plans based on individual needs, track patient progress and adjust accordingly, and help patients navigate food access through free resources in the community.**
 - C. They manage hospital IT systems.**
 - D. They perform surgical procedures on the digestive tract.**

- 4. When did the AAPA start?**
 - A. 1967**
 - B. 1968**
 - C. 1959**
 - D. 1960**

- 5. Which statement describes the mission of NCPHP?**
 - A. To provide financial aid to patients**
 - B. NC professionals in health programs: Aid providers dealing with mental health conditions, substance use, and burnout**
 - C. To regulate professional licensing**
 - D. To conduct patient surveys**

- 6. What is an agency relationship?**
- A. A contract where the PA independently owns medical devices.**
 - B. Legal and professional arrangement where the PA acts on behalf of a supervising physician with their consent, acting under the physician's control and authority.**
 - C. A casual teamwork arrangement with no formal oversight.**
 - D. A patient-PA relationship with patient consent.**
- 7. Which of the following is Not speaking up when concerned about provider impairment, misconduct, or patient care?**
- A. Not speaking up when concerned about provider impairment, misconduct, or patient care**
 - B. Always warn colleagues about patient safety issues**
 - C. Report every minor mistake to patients**
 - D. None of the above**
- 8. What is the primary role of a healthcare office manager in a medical practice?**
- A. They manage finances for medical offices, supervise patient and staff schedules, and improve customer service and patient satisfaction.**
 - B. They diagnose medical conditions and perform procedures.**
 - C. They design hospital information systems and supervise clinic operations.**
 - D. They provide clinical therapy to patients.**
- 9. In what year was the name officially changed to Physician Associate?**
- A. 1999**
 - B. 2021**
 - C. 2015**
 - D. 2000**
- 10. What is NCPHP?**
- A. National Council for Physician Health Programs**
 - B. North Carolina Clinical Health Professionals Association**
 - C. NC professionals in health programs: Aid providers dealing with mental health conditions, substance use, and burnout**
 - D. National Consultants for Professional Health Programs**

Answers

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

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Explanations

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1. Which organization is primarily responsible for certifying Physician Assistants after completing their education?

A. NCCPA

B. ARC-PA

C. AMA

D. AAPA

Certification for Physician Assistants after completing their education is provided by the National Commission on Certification of Physician Assistants. This organization creates and administers the certification exams—the PANCE and the PANRE—that verify a PA’s knowledge and clinical competence. Obtaining this certification is typically required to practice and is often a prerequisite for state licensure. After initial certification, PAs maintain their credential through ongoing CME and periodic recertification as defined by NCCPA. ARC-PA, by contrast, accredits PA education programs to ensure quality, rather than certifying individual clinicians. The American Medical Association is a broad professional association for physicians and does not issue PA certification. The American Academy of Physician Assistants is a professional organization that supports PAs with resources and advocacy but does not certify.

2. Which factor is NOT a factor influencing privileging?

A. PA education

B. CME

C. Documentation of procedures performed

D. Patient satisfaction scores

Privileging is about confirming that a clinician has demonstrated the knowledge, skills, and experience to perform specific procedures safely and effectively. Formal PA education sets the foundational qualifications, continuing medical education shows the clinician stays current with best practices, and documentation of procedures performed provides objective evidence of hands-on competence and clinical experience. Patient satisfaction scores, while important for overall quality and patient experience, do not directly verify technical ability or safety in performing procedures, so they are not a direct basis for granting privileges.

3. Which describes the role of a registered dietitian?

- A. They diagnose mental disorders and provide therapy.
- B. Assess patients current diet, counsel and educate, develop meal and nutritional plans based on individual needs, track patient progress and adjust accordingly, and help patients navigate food access through free resources in the community.**
- C. They manage hospital IT systems.
- D. They perform surgical procedures on the digestive tract.

Understanding what a registered dietitian does centers on nutrition care: they assess what a person is eating, provide counseling and education about nutrition, and develop meal and nutrition plans tailored to the individual's needs. They also monitor progress, adjust the plan as needed, and help connect people with food access resources in the community, reflecting the patient-centered, evidence-based approach of dietetics. The other descriptions belong to different fields: diagnosing mental disorders and providing therapy is typical of mental health professionals; managing hospital IT systems is an IT role; performing surgical procedures on the digestive tract is a surgical specialty.

4. When did the AAPA start?

- A. 1967
- B. 1968**
- C. 1959
- D. 1960

This question is about the founding year of the AAPA, the national professional body for physician assistants. The PA field itself began in the mid-1960s, with the first PA program launched in 1965. To unite the profession, set standards, and advocate for credentialing, the American Academy of Physician Assistants was formed a few years later, in 1968. So 1968 is the official start of the organization. Dates like 1967, 1959, or 1960 don't reflect the actual founding of the national body, even though 1965 marks the start of PA programs.

5. Which statement describes the mission of NCPHP?

- A. To provide financial aid to patients
- B. NC professionals in health programs: Aid providers dealing with mental health conditions, substance use, and burnout**
- C. To regulate professional licensing
- D. To conduct patient surveys

The mission is to support healthcare professionals in North Carolina, focusing on mental health, substance use, and burnout. This centers on the wellbeing of the workforce, recognizing that when providers are healthy and supported, patient care quality and safety improve. The other options describe activities that aren't about supporting professionals: financial aid to patients targets patients themselves, regulating licensing is a regulatory/administrative function, and conducting patient surveys focuses on patient data rather than provider support. So the statement about aiding NC professionals in health programs and addressing providers' mental health, substance use, and burnout best captures the mission.

6. What is an agency relationship?

- A. A contract where the PA independently owns medical devices.
- B. Legal and professional arrangement where the PA acts on behalf of a supervising physician with their consent, acting under the physician's control and authority.**
- C. A casual teamwork arrangement with no formal oversight.
- D. A patient-PA relationship with patient consent.

An agency relationship in healthcare is when a physician assistant acts on behalf of a supervising physician with the physician's consent and under the physician's control and authority. This means the physician delegates certain tasks and responsibilities to the PA, who then carries them out within defined protocols and scope. The supervising physician remains ultimately responsible for the patient's care and provides direction, oversight, and accountability for the PA's actions. Ownership of medical devices or a casual, oversight-free teamwork arrangement aren't what define this relationship. Likewise, simply having patient consent does not establish agency; the defining feature is that the PA's actions are conducted under the supervising physician's control and authority with proper consent to that delegation.

7. Which of the following is Not speaking up when concerned about provider impairment, misconduct, or patient care?

- A. Not speaking up when concerned about provider impairment, misconduct, or patient care**
- B. Always warn colleagues about patient safety issues
- C. Report every minor mistake to patients
- D. None of the above

Speaking up when you have concerns about provider impairment, misconduct, or patient care is a professional duty aimed at protecting patients and maintaining trust. The choice that describes not speaking up identifies the behavior to avoid, since failing to voice concerns undermines patient safety and the responsibility to intervene when risk is present. The other options describe actions that promote safety—warning colleagues to prevent harm and reporting concerns through appropriate channels—demonstrating proactive steps to safeguard patients. None of the above isn't correct here because there is an option that clearly reflects not speaking up, which is the behavior the question asks you to identify as not acceptable. In practice, you should speak up and escalate concerns to protect patients and uphold ethical standards.

8. What is the primary role of a healthcare office manager in a medical practice?

- A. They manage finances for medical offices, supervise patient and staff schedules, and improve customer service and patient satisfaction.**
- B. They diagnose medical conditions and perform procedures.**
- C. They design hospital information systems and supervise clinic operations.**
- D. They provide clinical therapy to patients.**

The main idea being tested is that the primary function of a healthcare office manager is to handle the administrative and operational side of a medical practice. This includes managing finances (like budgeting and revenue cycle activities), coordinating finances for the office, supervising patient and staff schedules, and focusing on customer service and patient satisfaction. When these administrative aspects run smoothly, clinicians can concentrate on patient care, and the practice functions efficiently. These tasks are distinct from clinical duties such as diagnosing conditions or performing procedures, which are the realm of physicians and other clinicians. They also differ from design or systems work, like creating hospital information systems, which is typically the domain of IT or health informatics professionals. Providing clinical therapy is a clinician's role as well. The office manager's strength lies in keeping the practice financially healthy, well-run, and patient-friendly.

9. In what year was the name officially changed to Physician Associate?

- A. 1999**
- B. 2021**
- C. 2015**
- D. 2000**

The main idea here is how professional titles reflect role, scope, and recognition within healthcare teams. The term "Physician Associate" was adopted to emphasize that clinicians in this role work closely with physicians, with increasing autonomy in patient assessment, diagnosis, and management, rather than simply assisting. The change to the official title was formalized around 2021 in many regulatory and professional bodies, making it the recognized designation in those settings. Earlier years mark earlier milestones—when the profession existed under other names or when discussions about a name change started—but 2021 is the year the title "Physician Associate" became the official designation in widespread use.

10. What is NCPHP?

- A. National Council for Physician Health Programs
- B. North Carolina Clinical Health Professionals Association
- C. NC professionals in health programs: Aid providers dealing with mental health conditions, substance use, and burnout**
- D. National Consultants for Professional Health Programs

NCPHP is best read as North Carolina Professionals in Health Programs. The phrase describes a regional group (NC) of professionals who work within health programs and whose mission is to aid providers dealing with mental health conditions, substance use, and burnout. This directly matches the initials and the implied focus on clinician well-being within a North Carolina context. The other options shift the scope or wording in ways that don't align as neatly with the acronym. For example, expanding to a national council suggests a nationwide reach rather than a state-level group, which changes the meaning conveyed by the NC prefix. Using different terms like clinical health professionals or a different organizational type changes the specific wording so that the initials no longer map as cleanly to NCPHP. The key idea is that the acronym points to a North Carolina-based group of health professionals focused on supporting colleagues with mental health, substance use, and burnout concerns.

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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://professionalissues1.examzify.com>

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

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