

# PROPHECY HEALTH MEDICAL SURGICAL RN A PRACTICE TEST (SAMPLE)

## STUDY GUIDE



## SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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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 the Glasgow Coma Scale (GCS) assess?**
  - A. The quality of breathing
  - B. The level of consciousness and neurological function
  - C. The patient's physical mobility
  - D. The effectiveness of pain management
- 2. What is the ideal position for performing a lumbar puncture?**
  - A. Sitting upright with feet on the ground
  - B. Lateral recumbent position with knees drawn to the chest
  - C. Prone position with arms extended
  - D. Supine position with legs straight
- 3. A patient with peritonitis presents with tachycardia and hypotension. What additional finding should be anticipated during the assessment?**
  - A. Severe abdominal pain or rebound tenderness
  - B. Low-grade fever
  - C. Increased bowel sounds
  - D. Nausea without vomiting
- 4. In addition to pain, pallor, and pulselessness, what other assessments are included in a neurovascular check?**
  - A. Temperature and capillary refill
  - B. Parasthesia and paralysis
  - C. Range of motion and strength
  - D. Skin integrity and swelling
- 5. When managing a Jackson-Pratt drain in a post-operative patient, how do you ensure effective drain function?**
  - A. Leave the bulb uncapped for free drainage
  - B. Compress the drain, then plug the bulb to establish suction
  - C. Maintain the bulb in a dependent position without compression
  - D. Flush the drain regularly with saline solution

- 6. What is the equivalent of 1.2 milligrams in micrograms?**
- A. 120 mcg
  - B. 1200 mcg
  - C. 12,000 mcg
  - D. 1.2 mcg
- 7. When ordered to give Digoxin (lanoxin), what should the nurse do if the patient's heart rate is 52 bpm?**
- A. Administer the medication as prescribed
  - B. Double-check the prescription for errors
  - C. Hold Digoxin and call the provider
  - D. Assess the patient for other symptoms
- 8. What is the primary purpose of the preoperative assessment for surgical patients?**
- A. To evaluate the patient's medical history
  - B. To ensure safe anesthesia and surgical procedures
  - C. To determine the patient's willingness for surgery
  - D. To schedule postoperative appointments
- 9. Which lab value is most important to monitor in a patient with renal failure?**
- A. Blood urea nitrogen levels
  - B. Serum electrolytes
  - C. Serum creatinine levels
  - D. Complete blood count
- 10. What is an essential action to take if the patient presents with signs of a possible hemorrhagic stroke?**
- A. Perform a CT scan
  - B. Administer thrombolytics
  - C. Provide supportive care
  - D. Start anticoagulation therapy

## **Answers**

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

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## **Explanations**

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## 1. What does the Glasgow Coma Scale (GCS) assess?

- A. The quality of breathing
- B. The level of consciousness and neurological function**
- C. The patient's physical mobility
- D. The effectiveness of pain management

*The Glasgow Coma Scale (GCS) is specifically designed to assess a person's level of consciousness and neurological function. It evaluates three key areas: eye opening, verbal response, and motor response. Each area has a set of criteria, and the scores from these categories are summed to provide an overall GCS score, which ranges from 3 to 15. A higher score indicates a better level of consciousness and neurological function, while a lower score may suggest more severe impairment. The GCS is crucial in various clinical settings, particularly in emergency and critical care, because it helps healthcare providers quickly determine the severity of a patient's brain function and monitor changes over time. This assessment is vital for guiding treatment decisions and interventions. In contrast, other options do not align with the primary purpose of the GCS. While breathing quality, physical mobility, and pain management are important aspects of patient care, they are not directly assessed by the Glasgow Coma Scale. Therefore, the focus remains on evaluating consciousness levels and neurological status, consolidating the significance of the correct answer.*

## 2. What is the ideal position for performing a lumbar puncture?

- A. Sitting upright with feet on the ground
- B. Lateral recumbent position with knees drawn to the chest**
- C. Prone position with arms extended
- D. Supine position with legs straight

*The ideal position for performing a lumbar puncture is the lateral recumbent position with the knees drawn to the chest. This position facilitates optimal access to the lumbar spine by widening the intervertebral spaces. When a patient is in this position, it allows for the spinal canal to open slightly, making it easier for the healthcare provider to insert the needle into the subarachnoid space and obtain cerebrospinal fluid. Additionally, this position helps to stabilize the spine and minimizes discomfort for the patient during the procedure. In contrast, sitting upright may not provide the optimal space needed for the procedure and can lead to difficulties in accessing the lumbar area. The prone position, although it may stabilize the spine, does not allow for the same access to the lumbar region as the lateral position. Lastly, the supine position does not facilitate access to the lumbar spine and can create tension in the back, making it more challenging to perform the puncture accurately and safely. Thus, the lateral recumbent position with the knees drawn to the chest is preferred for a successful lumbar puncture.*

**3. A patient with peritonitis presents with tachycardia and hypotension. What additional finding should be anticipated during the assessment?**

**A. Severe abdominal pain or rebound tenderness**

B. Low-grade fever

C. Increased bowel sounds

D. Nausea without vomiting

*In the case of a patient with peritonitis, severe abdominal pain or rebound tenderness is a critical symptom that aligns with the expected clinical findings. Peritonitis, an inflammation of the peritoneum, typically presents with significant abdominal discomfort. This discomfort can often worsen with movement and is usually accompanied by tenderness upon palpation. Rebound tenderness, which occurs when pressure is released from the abdomen, may indicate irritation of the peritoneum, and thus, is a classic sign of this condition. The presence of tachycardia and hypotension suggests a systemic response, which can occur with infections and inflammation, therefore, abdominal pain and tenderness would be consistent with the physiologic stress response seen in these scenarios. Monitoring for these symptoms is crucial in assessing the severity of the peritonitis and guiding further diagnostic and therapeutic interventions. This emphasis on abdominal pain and tenderness is vital because it can lead healthcare providers to further investigate possible complications such as perforation or abscess formation, which can significantly impact patient outcomes.*

**4. In addition to pain, pallor, and pulselessness, what other assessments are included in a neurovascular check?**

A. Temperature and capillary refill

**B. Parasthesia and paralysis**

C. Range of motion and strength

D. Skin integrity and swelling

*A thorough neurovascular check is essential for assessing the condition of a limb and ensuring that there is good circulation and nerve function. While pain, pallor, and pulselessness are crucial indicators, the presence of paresthesia and paralysis provides direct information about nerve function and possible ischemia. Paresthesia refers to abnormal sensations such as tingling or numbness, which can indicate nerve compression or damage, often caused by lack of blood flow. The presence of paralysis signifies a lack of motor function and can also suggest serious impairment in nerve transmission, potentially indicating severe vascular compromise. Including these assessments—paresthesia and paralysis—in a neurovascular check helps healthcare providers identify whether the nerves are being appropriately perfused and functioned. This assessment can also lead to timely interventions to prevent permanent damage to the nerves or muscles associated with impaired blood flow.*

**5. When managing a Jackson-Pratt drain in a post-operative patient, how do you ensure effective drain function?**

- A. Leave the bulb uncapped for free drainage
- B. Compress the drain, then plug the bulb to establish suction**
- C. Maintain the bulb in a dependent position without compression
- D. Flush the drain regularly with saline solution

*To ensure effective function of a Jackson-Pratt drain, it is crucial to establish and maintain negative pressure within the bulb, which promotes continuous drainage of fluid from the surgical site. Compressing the drain and then plugging the bulb achieves this negative pressure, allowing the suction mechanism to actively draw fluids out, which is essential for preventing fluid accumulation and promoting healing. In contrast, leaving the bulb uncapped would prevent the suction from developing, impacting the drain's effectiveness. Maintaining the bulb in a dependent position without compression may not adequately create the suction necessary for optimal drainage. Flushing the drain regularly with saline solution is not a standard practice as it can introduce bacteria or disrupt the functional mechanism of the drain. Hence, the approach of compressing the drain and plugging the bulb is the most effective method to ensure its proper function.*

**6. What is the equivalent of 1.2 milligrams in micrograms?**

- A. 120 mcg
- B. 1200 mcg**
- C. 12,000 mcg
- D. 1.2 mcg

*To convert milligrams to micrograms, it is important to understand the relationship between the two units of measurement. One milligram is equal to 1,000 micrograms. Therefore, to convert 1.2 milligrams to micrograms, you multiply by 1,000. So, the calculation would be:  $1.2 \text{ mg} \times 1,000 \text{ mcg/mg} = 1,200 \text{ mcg}$ . This means that 1.2 milligrams is equivalent to 1,200 micrograms, which is why the correct answer is indeed 1,200 mcg. This conversion is essential in the medical field, where accurate dosing in different units is critical for patient safety and effective treatment.*

**7. When ordered to give Digoxin (lanoxin), what should the nurse do if the patient's heart rate is 52 bpm?**

- A. Administer the medication as prescribed
- B. Double-check the prescription for errors
- C. Hold Digoxin and call the provider**
- D. Assess the patient for other symptoms

*When a patient's heart rate is noted to be 52 beats per minute, which is considered bradycardic, the nurse's priority is to ensure the safety of the patient before administering Digoxin. Digoxin is a medication that can further decrease heart rate and is typically contraindicated or requires caution when given to patients with bradycardia. Holding the Digoxin and calling the provider is the appropriate course of action. This allows for a reassessment of the situation and consideration of the potential need for an alternative treatment or further evaluation to determine the underlying cause of the bradycardia. It is critical to follow the protocol for medication administration, especially for drugs that have a significant impact on cardiac function, to prevent any adverse effects that could arise from administering the drug while the patient is experiencing low heart rates. In this context, double-checking the prescription or assessing the patient for other symptoms, while potentially relevant actions, do not address the immediate concern of administering a medication that may worsen the patient's condition. Administering the medication without addressing the bradycardia could pose serious risks, underscoring the importance of prioritizing patient safety in nursing practice.*

**8. What is the primary purpose of the preoperative assessment for surgical patients?**

- A. To evaluate the patient's medical history
- B. To ensure safe anesthesia and surgical procedures**
- C. To determine the patient's willingness for surgery
- D. To schedule postoperative appointments

*The primary purpose of the preoperative assessment is to ensure safe anesthesia and surgical procedures. This assessment is crucial for identifying any potential risks or complications that could arise during surgery. By evaluating the patient's medical history, current medications, allergies, and any comorbid conditions, the healthcare team can develop a tailored anesthetic plan and surgical approach that minimizes the risk of adverse events. This assessment not only helps in understanding the patient's overall health status but also allows for the development of strategies to manage any identified risks, such as optimizing medical conditions prior to surgery or arranging for additional monitoring during the procedure. Ultimately, this comprehensive evaluation is vital for safeguarding the patient's well-being and enhancing the likelihood of a successful surgical outcome.*

**9. Which lab value is most important to monitor in a patient with renal failure?**

- A. Blood urea nitrogen levels
- B. Serum electrolytes
- C. Serum creatinine levels**
- D. Complete blood count

*Serum creatinine levels are crucial to monitor in a patient with renal failure because they serve as a key indicator of kidney function. Creatinine is a waste product produced from muscle metabolism and is typically filtered out of the blood by the kidneys. When kidney function declines, creatinine levels rise due to the kidneys' reduced ability to excrete it. Therefore, elevated serum creatinine levels can provide insight into the severity of renal impairment and help guide treatment decisions. Monitoring creatinine levels helps healthcare providers assess the progression of renal failure, determine the effectiveness of interventions, and make decisions regarding potential dialysis initiation or adjustments in medication dosages that are cleared by the kidneys. This makes it a critical lab value for ensuring appropriate management of patients with renal failure.*

**10. What is an essential action to take if the patient presents with signs of a possible hemorrhagic stroke?**

- A. Perform a CT scan**
- B. Administer thrombolytics
- C. Provide supportive care
- D. Start anticoagulation therapy

*Performing a CT scan is essential in cases where a patient presents with signs of a possible hemorrhagic stroke. The CT scan is crucial for quickly determining the presence of bleeding within the brain. Identifying whether the stroke is hemorrhagic (bleeding) or ischemic (blockage) is vital for guiding treatment, as these two types of strokes require very different management approaches. In the case of a hemorrhagic stroke, immediate intervention often includes controlling the bleeding and managing intracranial pressure, rather than administering thrombolytics or anticoagulation therapy, which would be contraindicated. This makes obtaining a CT scan the important first step in the assessment and management of a suspected stroke. The rapid identification of bleeding allows healthcare providers to make timely decisions regarding further diagnostics and therapy, potentially improving patient outcomes.*

## 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](mailto:hello@examzify.com).

Or visit your dedicated course page for more study tools and resources:

<https://prophecyhealthmedsurgrna.examzify.com>

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

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