

SAUNDERS GASTROINTESTINAL PRACTICE TEST (SAMPLE)

STUDY GUIDE



**SAMPLE STUDY GUIDE
WITH LIMITED QUESTIONS**

**VISIT US ONLINE FOR
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. What nursing intervention is appropriate for a client with viral hepatitis who experiences nausea and loss of appetite?**
 - A. Encourage foods that are high in protein.
 - B. Monitor for fluid and electrolyte imbalance.
 - C. Explain that high-fat diets usually are better tolerated.
 - D. Explain that most daily calories need to be consumed in the evening hours.
- 2. Which prescription should the nurse question for a client suspected of having appendicitis with an elevated WBC count?**
 - A. Maintain a semi Fowler's position.
 - B. Maintain on NPO status.
 - C. Apply a heating pad to the lower abdomen for comfort.
 - D. Initiate an intravenous (IV) line with the administration of IV fluids.
- 3. What is the expected initial dietary guideline for a client diagnosed with acute diverticulitis?**
 - A. NPO (nothing by mouth) status
 - B. Ambulation at least 4 times daily
 - C. Coughing and deep breathing every 2 hours
 - D. Cholinergic medications to reduce pain
- 4. What dietary change should a nurse recommend to an adult client experiencing chronic constipation?**
 - A. Increase potassium in the diet
 - B. Include rice and bananas in the diet
 - C. Increase fluid and dietary fiber intake
 - D. Increase the intake of sugar-free products
- 5. Which statement by a client indicates a need for further teaching about sulfasalazine prescribed for ulcerative colitis?**
 - A. "I need to take the medication with meals."
 - B. "I may have increased sensitivity to sunlight."
 - C. "This medication should be taken as prescribed."
 - D. "The medication will cause constipation."

- 6. What symptom is commonly associated with pernicious anemia?**
- A. Poor appetite
 - B. Increased thirst
 - C. Weight gain
 - D. Fatigue
- 7. Which food should a client with a new colostomy consume to help reduce odor from the ostomy drainage bag?**
- A. Eggs
 - B. Yogurt
 - C. Broccoli
 - D. Cucumbers
- 8. What laboratory result is most relevant for evaluating the effectiveness of a Sengstaken-Blakemore tube?**
- A. Sodium.
 - B. Creatinine.
 - C. Hemoglobin.
 - D. Ammonia.
- 9. Which statement by a client with Crohn's disease indicates a need for further teaching about pain relief measures?**
- A. "I know I can massage my abdomen."
 - B. "I will continue using antispasmodic medication."
 - C. "One of the best things I can do is use relaxation techniques."
 - D. "The best position for me is to lie supine with my legs straight."
- 10. What dietary approach should the nurse encourage in a client recovering from gastric bypass concerning meal frequency?**
- A. One large meal a day
 - B. Three regular meals a day
 - C. Six small high-protein meals a day
 - D. Two small meals with snacks

Answers

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

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Explanations

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1. What nursing intervention is appropriate for a client with viral hepatitis who experiences nausea and loss of appetite?

- A. Encourage foods that are high in protein.
- B. Monitor for fluid and electrolyte imbalance.**
- C. Explain that high-fat diets usually are better tolerated.
- D. Explain that most daily calories need to be consumed in the evening hours.

Monitoring for fluid and electrolyte imbalance is essential for a client with viral hepatitis who is experiencing nausea and loss of appetite. These symptoms can lead to decreased oral intake, which increases the risk of dehydration and electrolyte disturbances. Nausea can make it challenging for the client to eat enough food, and a reduced appetite often leads to a decrease in fluid intake as well. The liver's role in metabolizing nutrients and maintaining fluid balance can be compromised in hepatitis, making this monitoring even more critical. Signs of fluid and electrolyte imbalance may include thirst, dry mouth, fatigue, and changes in urine output. While other interventions may also be important in managing the client's overall care, they do not directly address the immediate risk of fluid and electrolyte imbalances that can arise from nausea and inadequate nutritional intake. Therefore, monitoring this aspect ensures that timely interventions can be implemented to prevent complications.

2. Which prescription should the nurse question for a client suspected of having appendicitis with an elevated WBC count?

- A. Maintain a semi Fowler's position.
- B. Maintain on NPO status.
- C. Apply a heating pad to the lower abdomen for comfort.**
- D. Initiate an intravenous (IV) line with the administration of IV fluids.

In cases of suspected appendicitis, particularly when there is an elevated white blood cell (WBC) count indicating possible inflammation or infection, applying a heating pad to the lower abdomen is concerning. Heat can increase blood flow to the area, potentially complicating the situation by promoting further inflammation or worsening an existing infection. Furthermore, if appendicitis is confirmed, applying heat may also mask symptoms or lead to complications during surgery if it becomes necessary. It's crucial in such cases to avoid any interventions that could exacerbate the condition or lead to detrimental outcomes. In contrast, maintaining the patient on NPO status is important to prevent complications related to surgery if needed, and maintaining a semi-Fowler's position can help in comfort and minimizing pressure on the abdomen. Initiating IV fluids is a standard practice to support the patient, particularly if there are concerns about hydration or electrolyte imbalances.

3. What is the expected initial dietary guideline for a client diagnosed with acute diverticulitis?

- A. NPO (nothing by mouth) status**
- B. Ambulation at least 4 times daily
- C. Coughing and deep breathing every 2 hours
- D. Cholinergic medications to reduce pain

The expected initial dietary guideline for a client diagnosed with acute diverticulitis is to maintain NPO (nothing by mouth) status. This approach is utilized to rest the gastrointestinal tract and reduce the workload on the intestines during an acute inflammation or infection. By not allowing any food or fluids, the digestive system can heal, and it minimizes the risk of exacerbating the condition. NPO status is typically followed until the symptoms improve, and then a gradual reintroduction of fluids and a low-fiber diet may be implemented under medical supervision. This initial phase is crucial in managing acute diverticulitis effectively. The other options focus on aspects such as mobility, respiratory care, and medication that aren't directly related to the immediate dietary management required during the acute phase of this condition. While ambulation and deep breathing exercises are important for overall recovery and preventing complications in hospitalized patients, they do not address the specific dietary needs at the onset of acute diverticulitis. Cholinergic medications, while potentially helpful for managing some gastrointestinal symptoms, are not a standard initial treatment for this condition.

4. What dietary change should a nurse recommend to an adult client experiencing chronic constipation?

- A. Increase potassium in the diet
- B. Include rice and bananas in the diet
- C. Increase fluid and dietary fiber intake**
- D. Increase the intake of sugar-free products

In managing chronic constipation, increasing fluid and dietary fiber intake is essential for promoting healthy bowel function. Fiber adds bulk to the stool and helps it pass more easily through the intestines, while adequate fluid intake keeps the stool soft and aids in its movement through the digestive tract. Consuming a diet rich in fruits, vegetables, whole grains, and legumes can significantly enhance fiber consumption. This dietary change not only supports regular bowel movements but may also help prevent the recurrence of constipation over time. Adequate hydration further complements these efforts by maintaining stool softness and overall gastrointestinal health. The other dietary changes, while they may have some benefits in certain contexts, do not address the primary issue of constipation as effectively. For instance, increasing potassium, while important for overall health, does not directly alleviate constipation. Including rice and bananas may contribute to dietary variety but can also be binding if consumed in excess. Likewise, sugar-free products may not have a significant impact on bowel function compared to a well-balanced increase in fiber and fluids.

5. Which statement by a client indicates a need for further teaching about sulfasalazine prescribed for ulcerative colitis?

- A. "I need to take the medication with meals."
- B. "I may have increased sensitivity to sunlight."
- C. "This medication should be taken as prescribed."
- D. "The medication will cause constipation."**

The statement indicating a need for further teaching about sulfasalazine prescribed for ulcerative colitis is the one regarding constipation. Sulfasalazine is primarily used to reduce inflammation in the intestines and is known to potentially cause gastrointestinal side effects, but it is more commonly associated with diarrhea rather than constipation. In fact, sulfasalazine can lead to side effects that include nausea, vomiting, and diarrhea due to its action on the intestines. Clients might need to be informed that while they should be aware of potential side effects, constipation is not typically one of them and that monitoring for changes in bowel habits is essential. Understanding the pharmacological effects and side effects of sulfasalazine is crucial for proper patient education and management of ulcerative colitis. The other statements about taking the medication with meals, increased sensitivity to sunlight, and following the prescribed dosage are correct and reflect important patient considerations regarding the use of this medication.

6. What symptom is commonly associated with pernicious anemia?

- A. Poor appetite
- B. Increased thirst
- C. Weight gain
- D. Fatigue**

Fatigue is commonly associated with pernicious anemia due to the condition's impact on the body's ability to absorb vitamin B12, which is essential for the production of red blood cells. When vitamin B12 levels are low, red blood cell production is impaired, leading to anemia. This decreased oxygen-carrying capacity of the blood can result in feelings of fatigue, weakness, and lethargy. Anemia signifies that the body is not getting enough oxygen to sustain energy levels, which directly correlates to the experience of fatigue in individuals with pernicious anemia. Other symptoms of pernicious anemia may include pallor, shortness of breath, and neurological issues, but fatigue is particularly prominent and often serves as an indicator that compels individuals to seek medical attention.

7. Which food should a client with a new colostomy consume to help reduce odor from the ostomy drainage bag?

- A. Eggs
- B. Yogurt**
- C. Broccoli
- D. Cucumbers

Yogurt is beneficial for individuals with a colostomy in managing odor from the ostomy drainage bag due to its probiotic content. Probiotics are beneficial bacteria that help to maintain a healthy balance in the gut microbiome. When consumed, yogurt can contribute to better digestion and a more favorable digestive environment, which can reduce the production of gas and odor. Additionally, yogurt is a gentle food that is easy for many people to digest, making it a suitable choice for those adjusting to colostomy care. It also provides important nutrients without being overly harsh on the digestive system. As a result, incorporating yogurt into the diet may help manage and minimize the odor associated with ostomy output effectively. In contrast, other options like eggs and broccoli can contribute to increased odor due to their sulfur-containing compounds, while cucumbers are often considered neutral but do not have the same beneficial probiotic effects as yogurt. Therefore, yogurt stands out as the most effective choice for addressing odor control in this context.

8. What laboratory result is most relevant for evaluating the effectiveness of a Sengstaken-Blakemore tube?

- A. Sodium.
- B. Creatinine.
- C. Hemoglobin.**
- D. Ammonia.

The effectiveness of a Sengstaken-Blakemore tube, which is often used to manage variceal bleeding in patients with esophageal varices, is primarily evaluated through its impact on the patient's hemoglobin levels. This is because the primary goal of this intervention is to control bleeding and prevent significant blood loss. Monitoring hemoglobin allows healthcare providers to assess whether the bleeding has stopped or decreased, reflected in stable or rising hemoglobin levels. While sodium, creatinine, and ammonia levels can provide useful information about a patient's overall clinical status, they are not as directly relevant for assessing the immediate effectiveness of the Sengstaken-Blakemore tube in managing variceal hemorrhage. Sodium levels may indicate fluid balance status, creatinine could reflect kidney function, and ammonia levels are typically associated with liver function or hepatic encephalopathy; none of these parameters specifically indicate the control of bleeding, making hemoglobin the most pertinent laboratory result in this context.

9. Which statement by a client with Crohn's disease indicates a need for further teaching about pain relief measures?

- A. "I know I can massage my abdomen."
- B. "I will continue using antispasmodic medication."
- C. "One of the best things I can do is use relaxation techniques."
- D. "The best position for me is to lie supine with my legs straight."**

The statement indicating a need for further teaching relates to the client expressing that the best position for relief is to lie supine with legs straight. In Crohn's disease, clients can experience abdominal pain and discomfort due to inflammation. Positioning plays an important role in managing pain; many individuals find relief when they elevate their legs, bend their knees, or assume a fetal position, which can help reduce tension in the abdominal area. Therefore, lying supine with legs straight is not typically recommended, as this position may not alleviate discomfort and could even contribute to more pain. The other mentioned methods, such as abdominal massage, using antispasmodic medication, and practicing relaxation techniques, are all valid and effective strategies for managing pain and discomfort associated with Crohn's disease.

10. What dietary approach should the nurse encourage in a client recovering from gastric bypass concerning meal frequency?

- A. One large meal a day
- B. Three regular meals a day
- C. Six small high-protein meals a day**
- D. Two small meals with snacks

In the context of a client recovering from gastric bypass surgery, encouraging six small high-protein meals a day is essential for several reasons. After such a procedure, the stomach's capacity is significantly reduced, which means the individual cannot consume large meals without risking discomfort or complications. High-protein meals are particularly important in this scenario because they support healing, muscle repair, and satiety, which can help prevent overeating. Additionally, spreading meals throughout the day can help maintain steady blood sugar levels and provide consistent energy, which is valuable during recovery. By consuming smaller, more frequent meals, the client is less likely to experience nausea or dumping syndrome, which is a common side effect after gastric bypass. This approach also facilitates better nutrient absorption and satisfaction, promoting adherence to dietary guidelines necessary for successful long-term weight management and health outcomes. In contrast, options that suggest fewer meals, like one large meal, or just three regular meals, do not align with the best practices for post-gastric bypass nutrition and may lead to negative physiological responses or inadequate nutritional intake.

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://saundersgastrointestinal.examzify.com>

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

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