

SAUNDERS GASTROINTESTINAL PRACTICE TEST (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. Which finding would be consistent with a diagnosis of ulcerative colitis?**
 - A. Hypercalcemia
 - B. Hyponatremia
 - C. Frothy, fatty stools
 - D. Decreased hemoglobin

- 2. What laboratory result is most relevant for evaluating the effectiveness of a Sengstaken-Blakemore tube?**
 - A. Sodium.
 - B. Creatinine.
 - C. Hemoglobin.
 - D. Ammonia.

- 3. 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

- 4. What nursing intervention is typically prescribed for a client with acute pancreatitis?**
 - A. Encourage coughing and deep breathing
 - B. Maintain NPO status
 - C. Maintain the client in a supine position
 - D. Give small frequent high-calorie feedings

- 5. What dietary modification should a nurse recommend for a client with inflammatory bowel syndrome (IBS)?**
 - A. Increase intake of dietary fiber
 - B. Avoid high-fat foods
 - C. Eliminate all lactose-containing products
 - D. Incorporate probiotics into their diet

- 6. Which observation related to a newly created transverse colostomy requires immediate notification of the health care provider?**
- A. Stoma is beefy red and shiny
 - B. Purple discoloration of the stoma
 - C. Skin excoriation around the stoma
 - D. Semi-formed stool noted in the ostomy pouch
- 7. What symptom is commonly associated with pernicious anemia?**
- A. Poor appetite
 - B. Increased thirst
 - C. Weight gain
 - D. Fatigue
- 8. For a patient with liver disease, what finding would suggest a consequence of low protein?**
- A. Increased muscle mass
 - B. Peripheral edema
 - C. Improved wound healing
 - D. No change in weight
- 9. For a client with common bile duct obstruction, what type of diet should the healthcare provider prescribe?**
- A. High protein
 - B. Low fat
 - C. High carbohydrate
 - D. Low in water-soluble vitamins
- 10. What coping mechanism is being used by a client who refuses to participate in care and avoids eye contact?**
- A. Self-control
 - B. Accepting responsibility
 - C. Problem solving
 - D. Distancing

Answers

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

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Explanations

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1. Which finding would be consistent with a diagnosis of ulcerative colitis?

- A. Hypercalcemia
- B. Hyponatremia
- C. Frothy, fatty stools
- D. Decreased hemoglobin**

A diagnosis of ulcerative colitis is associated with inflammation of the colon and can lead to several systemic effects, one of which is a decrease in hemoglobin levels. This decrease can occur due to chronic blood loss from the inflamed mucosa of the colon, as ulcerative colitis can lead to ulceration and bleeding. Patients may experience symptoms of anemia as a result, which relates directly to the finding of decreased hemoglobin. In contrast, hypercalcemia and hyponatremia are not typical findings associated with ulcerative colitis; they pertain to other metabolic disorders. Frothy, fatty stools are indicative of steatorrhea, which is more characteristic of malabsorption syndromes rather than ulcerative colitis. Therefore, decreased hemoglobin effectively captures a key complication of ulcerative colitis, making it the correct answer in this context.

2. 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.

3. 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.

4. What nursing intervention is typically prescribed for a client with acute pancreatitis?

- A. Encourage coughing and deep breathing
- B. Maintain NPO status**
- C. Maintain the client in a supine position
- D. Give small frequent high-calorie feedings

Maintaining NPO (nothing by mouth) status is a critical nursing intervention for clients with acute pancreatitis. This approach is essential as it helps to rest the pancreas and minimize stimulation. When the pancreas is inflamed, any food intake can lead to increased pancreatic secretions, which can exacerbate inflammation and potentially worsen the patient's condition. By keeping the patient NPO, healthcare providers aim to reduce pain and prevent further complications associated with the disease. Furthermore, while other options may play roles in different types of care, they do not specifically align with the management of acute pancreatitis. For instance, encouraging coughing and deep breathing is beneficial post-surgery or for respiratory conditions but does not directly address the needs of a patient with acute pancreatitis. Similarly, maintaining a supine position is not optimal for patients who need to manage their abdominal pain effectively, and while small frequent high-calorie feedings may be appropriate in the recovery phase after acute pancreatitis has resolved, it is not a recommendation during the acute phase. Therefore, maintaining NPO status is the appropriate and standard practice in such cases.

5. What dietary modification should a nurse recommend for a client with inflammatory bowel syndrome (IBS)?

- A. Increase intake of dietary fiber**
- B. Avoid high-fat foods
- C. Eliminate all lactose-containing products
- D. Incorporate probiotics into their diet

Increasing the intake of dietary fiber is a beneficial recommendation for clients with irritable bowel syndrome (IBS). Fiber plays a crucial role in promoting healthy bowel function; it can help regulate bowel movements by adding bulk to the stool, which can alleviate symptoms such as constipation commonly associated with IBS. In some cases, soluble fiber can also aid in managing diarrhea by absorbing excess fluid and forming a gel-like substance in the intestines. It is important for individuals to increase their fiber intake gradually to prevent exacerbation of symptoms, as a sudden increase can lead to bloating and discomfort. While avoiding high-fat foods can be helpful for some individuals, it is not as universally applicable as increasing dietary fiber. High-fat foods can potentially worsen IBS symptoms, but not all patients will have the same reactions. The recommendation to eliminate all lactose-containing products may be appropriate for those who have a specific sensitivity to lactose, but not all IBS patients are lactose intolerant. Lastly, incorporating probiotics may be beneficial for gut health, yet scientific evidence on their efficacy for IBS symptoms continues to evolve, and they are not as universally recommended as dietary fiber.

6. Which observation related to a newly created transverse colostomy requires immediate notification of the health care provider?

- A. Stoma is beefy red and shiny
- B. Purple discoloration of the stoma**
- C. Skin excoriation around the stoma
- D. Semi-formed stool noted in the ostomy pouch

Purple discoloration of the stoma is concerning as it indicates compromised blood supply to the area, which could lead to necrosis of the stoma tissue. A healthy stoma should appear beefy red and shiny, reflecting good blood flow and health of the tissue. When a stoma appears purple or dusky, it signifies that the tissue may not be receiving adequate oxygenation, raising the risk of tissue death. This situation demands immediate attention from a healthcare provider to assess the potential need for intervention to restore blood flow or to consider further management of the stoma to prevent serious complications. In contrast, a beefy red and shiny stoma is an expected finding indicating good perfusion, while skin excoriation around the stoma, though problematic, can often be managed through proper skin care practices. Semi-formed stool in the ostomy pouch is also normal for a transverse colostomy, which typically produces more formed stools than other types of colostomies.

7. 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.

8. For a patient with liver disease, what finding would suggest a consequence of low protein?

- A. Increased muscle mass
- B. Peripheral edema**
- C. Improved wound healing
- D. No change in weight

In patients with liver disease, a finding that suggests a consequence of low protein levels is peripheral edema. This occurs due to the liver's decreased ability to synthesize albumin, which is a protein that plays a critical role in maintaining oncotic pressure in the blood vessels. When albumin levels drop, it causes fluid to leak out of the vascular system and into the surrounding tissues, leading to swelling, or edema. Peripheral edema is a common manifestation of hypoalbuminemia, which can arise in liver disease due to decreased hepatic function. In contrast, increased muscle mass, improved wound healing, and no change in weight do not correlate with low protein levels. Low protein would typically lead to muscle wasting rather than increased muscle mass. Wound healing could be impaired due to protein deficiency, not improved, and a significant drop in protein levels is usually associated with changes in weight, typically leading to weight loss rather than no change. Thus, the presence of peripheral edema is a key indicator of low protein consequences in the context of liver disease.

9. For a client with common bile duct obstruction, what type of diet should the healthcare provider prescribe?

- A. High protein
- B. Low fat**
- C. High carbohydrate
- D. Low in water-soluble vitamins

A low-fat diet is recommended for a client with common bile duct obstruction. This is because the obstruction impairs the flow of bile, which is essential for the digestion and absorption of fats. When bile is not properly secreted into the intestines, the body struggles to digest fatty foods, which can lead to discomfort and malabsorption issues. By reducing fat intake, the client can minimize symptoms such as nausea and abdominal pain, and ensure that the digestive system does not become overwhelmed by fats that cannot be effectively processed. Additionally, while a high-protein diet might be suitable in certain conditions, it is not specifically beneficial for bile duct obstruction. A high carbohydrate diet could lead to an imbalance in nutrient intake and does not address the specific digestive concerns posed by the obstruction. Finally, a diet low in water-soluble vitamins would generally be inappropriate as these vitamins are crucial for overall health, and their intake should be maintained in a balanced diet.

10. What coping mechanism is being used by a client who refuses to participate in care and avoids eye contact?

- A. Self-control
- B. Accepting responsibility
- C. Problem solving
- D. Distancing**

The choice indicating that the client is using distancing as a coping mechanism is accurate because distancing refers to a behavior where an individual emotionally or physically withdraws from a situation or interaction. In this context, the client's refusal to participate in care and avoidance of eye contact signifies a clear attempt to detach from the care process and avoid confronting the issues at hand. This behavior can often be a protective strategy to minimize emotional discomfort or anxiety associated with their condition or the necessity for treatment. Distancing can manifest in various forms, including denial, avoidance, or disengagement, making it a common response to stress or trauma. By not engaging with caregivers or the situation, the client likely feels a sense of control over their emotional response, albeit in an unhealthy or unproductive manner. This allows them to cope with feelings of fear, vulnerability, or helplessness that can arise in medical settings.

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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