

Sherpath Clinical Judgement Practice Test (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. SMART goals stand for which of the following acronyms?**
 - A. Specific, Measurable, Attainable, Realistic, Timed**
 - B. Simple, Measurable, Achievable, Relevant, Timely**
 - C. Specific, Measurable, Actionable, Realistic, Timed**
 - D. Strategic, Measurable, Attainable, Realistic, Timed**

- 2. Which question would help the nurse generate solutions during the CJMM?**
 - A. What are the desired outcomes for the patient?**
 - B. What is the patient's favorite color?**
 - C. What is the patient's hair color?**
 - D. What is the weather forecast?**

- 3. Which two foundational quality improvement concepts does the nurse apply during the evaluation step?**
 - A. Focus on patients; Use of data**
 - B. Focus on budget; Use of data**
 - C. Focus on staff; Focus on policy**
 - D. Focus on patients; Focus on staff**

- 4. Which factor influences a patient's ability to communicate cues during an interview?**
 - A. Age and developmental level**
 - B. Time of day**
 - C. Weather**
 - D. Family support**

- 5. Which information would you include in an evaluation statement?**
 - A. Level of goal attainment**
 - B. Date of Admission**
 - C. Nurse's Initials**
 - D. Medication List**

- 6. In the weight loss goal example, what evaluative measure should be used to gauge patient expectations of care?**
- A. Conduct a patient interview**
 - B. Perform a stress test**
 - C. Order a lipid panel**
 - D. Administer a diet shake**
- 7. Which statement about the scope of nursing practice is true?**
- A. The scope of practice describes the actions a licensed nurse should be qualified and competent to perform.**
 - B. It describes physician duties**
 - C. It describes hospital administrative tasks**
 - D. It prescribes medications**
- 8. Which action can a nurse initiate without a physician's prescription?**
- A. Hand hygiene**
 - B. Administering an intravenous antibiotic**
 - C. Starting a new medication**
 - D. Performing a surgical procedure**
- 9. Which cue would be categorized as 'important' for a patient with a femur fracture?**
- A. Temperature 102.4°F (39°C)**
 - B. Headache**
 - C. Itching at the site**
 - D. Normal blood pressure**
- 10. Which criterion describes the hypothesis that is most important and should be managed first?**
- A. The hypothesis with the greatest potential threat to patient safety**
 - B. The hypothesis with the fewest data**
 - C. The easiest to treat hypothesis**
 - D. The one the patient mentions first**

Answers

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

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Explanations

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1. SMART goals stand for which of the following acronyms?

- A. Specific, Measurable, Attainable, Realistic, Timed**
- B. Simple, Measurable, Achievable, Relevant, Timely**
- C. Specific, Measurable, Actionable, Realistic, Timed**
- D. Strategic, Measurable, Attainable, Realistic, Timed**

The main idea here is to describe goals that are clear, assessable, feasible, and time-bound so you can plan, track progress, and know when you've succeeded. Specific means the goal states exactly what will be accomplished, leaving no guesswork about what you're aiming for. Measurable adds an objective criterion for progress, so you can quantify improvement or completion. Attainable ensures the goal is realistically achievable given available resources and constraints. Realistic (aligned with practical feasibility) keeps the target within reach and relevant to what can actually be done. Timed sets a concrete deadline, creating a sense of urgency and a point to measure against. So the version that uses Specific, Measurable, Attainable, Realistic, Timed best fits this structure. The other options tweak or swap terms (for example, Simple vs Specific, Timely vs Timed, or swap Attainable with Achievable and Realistic with Relevant), which changes the emphasis or clarity in ways that make them less consistent with the standard SMART framework.

2. Which question would help the nurse generate solutions during the CJMM?

- A. What are the desired outcomes for the patient?**
- B. What is the patient's favorite color?**
- C. What is the patient's hair color?**
- D. What is the weather forecast?**

In clinical judgment, generating effective solutions starts by clarifying what success looks like for the patient. Asking about the desired outcomes helps you define clear, patient-centered goals, which then guide which interventions to choose and how to prioritize them. When you know the targets you're aiming for, you can brainstorm appropriate actions, decide which are most likely to help, and set criteria to measure progress and adjust the plan as needed. The other questions don't support this process—knowing a patient's favorite color or hair color doesn't influence clinical decisions, and the weather forecast has no bearing on patient care goals.

3. Which two foundational quality improvement concepts does the nurse apply during the evaluation step?

- A. Focus on patients; Use of data**
- B. Focus on budget; Use of data**
- C. Focus on staff; Focus on policy**
- D. Focus on patients; Focus on staff**

Evaluation in quality improvement centers on measuring whether patient outcomes actually improve and using data to judge whether those improvements meet goals. The nurse combines a patient-centered focus with data use: attention to how the care changes affect patients, safety, and experience, along with systematic collection and analysis of metrics to determine impact. This data-driven, patient-focused approach provides objective evidence about effectiveness and guides decisions to sustain, adjust, or discard the changes. While budget, staff, or policy considerations can influence projects, they don't define the core evaluation focus, which is on patient outcomes assessed through data.

4. Which factor influences a patient's ability to communicate cues during an interview?

- A. Age and developmental level**
- B. Time of day**
- C. Weather**
- D. Family support**

Understanding how a patient communicates during an interview hinges on the person's age and developmental level. This determines language use, vocabulary, the ability to think abstractly, attention span, and comfort with sharing information. Younger children express cues through behavior, actions, or caregiver interpretation, while older children and adolescents begin to articulate symptoms but may still need tailored questions to encourage honest disclosure. Adults and older adults bring their own communication styles, potential memory or hearing considerations, and health literacy needs, so the clinician must adapt to how this development stage shapes expression and cue signaling. Time of day or weather might affect mood briefly, but they don't fundamentally change a person's capacity to convey cues. Family support can influence what gets shared and how comfortable a patient feels, but the intrinsic ability to communicate cues is most strongly determined by age and development. For example, a toddler requires caregiver input to interpret cues, whereas an adult patient can typically describe symptoms directly, with adjustments for hearing, vision, or literacy as needed.

5. Which information would you include in an evaluation statement?

- A. Level of goal attainment**
- B. Date of Admission**
- C. Nurse's Initials**
- D. Medication List**

The main concept is that an evaluation statement captures how well the patient progressed toward the goals set in the care plan. It should clearly state the level of goal attainment—whether goals were fully met, partially met, or not met—and include evidence or data that support that judgment. This framing shows the effectiveness of the plan and informs what to do next, such as continuing, adjusting, or redefining goals and interventions. The date of admission belongs in the initial assessment or admission notes and does not reflect ongoing progress toward goals. The nurse's initials concern documentation authenticity and accountability but aren't the focus of evaluating progress. The medication list is essential for current treatment and safety, but an evaluation statement emphasizes progress toward goals rather than listing every medication; med details belong in medication reconciliation and the plan section.

6. In the weight loss goal example, what evaluative measure should be used to gauge patient expectations of care?

- A. Conduct a patient interview**
- B. Perform a stress test**
- C. Order a lipid panel**
- D. Administer a diet shake**

Direct, patient-centered communication through a thorough interview is the best way to gauge what the patient expects from care. By asking about their goals for weight loss, the timeline they have in mind, what outcomes matter most to them, and any barriers or sacrifices they're willing to make, the clinician gathers essential insight into the patient's expectations. This information helps tailor the plan to fit the patient's values, enhances motivation, and supports realistic, shared decision making. The other options don't measure expectations. A stress test assesses cardiovascular fitness, not what the patient hopes to achieve or value in their care. A lipid panel checks lipid levels, which informs risk but not the patient's care expectations. Administering a diet shake is an intervention, not a method for evaluating what the patient expects from the care process.

7. Which statement about the scope of nursing practice is true?

- A. The scope of practice describes the actions a licensed nurse should be qualified and competent to perform.**
- B. It describes physician duties**
- C. It describes hospital administrative tasks**
- D. It prescribes medications**

The scope of nursing practice defines the actions a licensed nurse is qualified and competent to perform. It sets the boundaries for what nurses can do based on their education, licensure, and regulatory standards, ensuring safe and legal patient care. This concept fits the statement because it emphasizes the nurse's own responsibilities and capabilities, not the duties of physicians, administrative tasks, or activities like prescribing medications (which may be restricted to certain advanced practice roles under specific regulations). In practice, a nurse can perform assessments, implement care plans, monitor patients, and provide education within the allowed scope, while prescriptive authority is typically limited to authorized roles and governed by state laws and professional standards.

8. Which action can a nurse initiate without a physician's prescription?

- A. Hand hygiene**
- B. Administering an intravenous antibiotic**
- C. Starting a new medication**
- D. Performing a surgical procedure**

Hand hygiene is the action a nurse can initiate without a physician's prescription. It's an independent, foundational nursing practice and a standard precaution to prevent infection, performed routinely before and after patient contact regardless of orders. The other options involve medications or procedures that require a physician's prescription or specialized authorization: administering an intravenous antibiotic needs an order and IV access, starting a new medication requires a prescriber's directive, and performing a surgical procedure is within the surgeon's scope.

9. Which cue would be categorized as 'important' for a patient with a femur fracture?

- A. Temperature 102.4°F (39°C)**
- B. Headache**
- C. Itching at the site**
- D. Normal blood pressure**

In this context, focus on cues that signal a potential complication requiring action. A high fever is the most important cue to monitor for a patient with a femur fracture because it can indicate infection at the fracture site, a systemic infection, or fat embolism syndrome—conditions that demand prompt assessment and intervention. A temperature of 102.4°F is a clear red flag that warrants immediate evaluation and communication with the clinician. Headache is a nonspecific symptom that can arise from pain, dehydration, or medication effects and does not by itself point to a fracture-related complication. Itching at the fracture site is typically related to healing processes or opioid use and is not an urgent indicator of deterioration. Normal blood pressure is reassuring and does not suggest an acute complication in this immediate context.

10. Which criterion describes the hypothesis that is most important and should be managed first?

- A. The hypothesis with the greatest potential threat to patient safety**
- B. The hypothesis with the fewest data**
- C. The easiest to treat hypothesis**
- D. The one the patient mentions first**

The main idea is to prioritize patient safety by the level of risk each possible diagnosis poses. When you're faced with multiple competing hypotheses, the one that could cause the most harm if not addressed quickly should be managed first. This ensures you prevent rapid deterioration or a life-threatening event while you gather more information and confirm the diagnosis. So, the hypothesis described as posing the greatest potential threat to patient safety is the best choice because it directs you to intervene where the danger to the patient is highest, even if other hypotheses have less data or are easier to treat, or even if the patient mentions something first. Safety and the potential for rapid harm trump other factors.

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://sherpathclinicaljudgement.examzify.com>

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

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