

Tennessee CNA Skills 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. How should the weight be recorded?**
 - A. Record Weight**
 - B. Record only if exact**
 - C. Record without writing**
 - D. Record weight aloud only**

- 2. After the scale is balanced, what is the next step?**
 - A. Read and mentally note of weight and return resident to wheelchair**
 - B. Announce the weight aloud**
 - C. Leave the resident standing**
 - D. Reset the scale**

- 3. After finishing feeding and leaving the room, what should you do?**
 - A. Leave call light and wash hands**
 - B. Take the call light with you**
 - C. Ignore the call light**
 - D. Turn off the light and leave**

- 4. How many times should the shoulder ROM be performed?**
 - A. 3 times**
 - B. 1 time**
 - C. 2 times**
 - D. 4 times**

- 5. After completing Perineal Care, what is the immediate action regarding the resident's position?**
 - A. Position resident on their back in proper alignment**
 - B. Leave in side-lying position**
 - C. Sit resident up in bed**
 - D. Stand the resident up**

- 6. Before performing a back rub, which privacy-related step should be done first?**
- A. Pull privacy curtain**
 - B. Raise side rail**
 - C. Move resident to chair**
 - D. Warm lotion in hands**
- 7. After the resident has walked at least 10 steps during gait-belt ambulation, what is the next step?**
- A. Assist resident to pivot/sit in wheelchair and remove gait belt**
 - B. Return resident to bed and start again**
 - C. Leave the resident standing**
 - D. Remove slippers and return to chair**
- 8. What should be done to the scale before weighing the resident?**
- A. Balance/zero out scale before weighing resident**
 - B. Lock wheelchair brakes**
 - C. Assist resident to stand**
 - D. Read weight and record**
- 9. What accuracy criteria must be used when recording solids intake?**
- A. Must be within 25% of solids consumed**
 - B. Must be within 50%**
 - C. Must be exact**
 - D. No recording needed**
- 10. What is the acceptable difference between the measured urinary output and the observer's measurement when emptying a urinary drainage bag?**
- A. 10 cc**
 - B. 25 cc**
 - C. 50 cc**
 - D. 100 cc**

Answers

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

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Explanations

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1. How should the weight be recorded?

- A. Record Weight**
- B. Record only if exact**
- C. Record without writing**
- D. Record weight aloud only**

Weight is a measurement that must be put into the resident's medical record. When you measure someone's weight, you record the exact value in the chart right away, including the date, time, and the unit (pounds or kilograms). This creates a permanent, shareable record that the rest of the care team can rely on to track changes, notice trends, and make informed decisions. Relying on memory or speaking the number aloud without updating the chart can lead to miscommunication or lost data, which is why writing the weight down in the chart is essential. Follow the facility's standard charting format and units to keep records clear and consistent. So, you should record weight.

2. After the scale is balanced, what is the next step?

- A. Read and mentally note of weight and return resident to wheelchair**
- B. Announce the weight aloud**
- C. Leave the resident standing**
- D. Reset the scale**

When weighing a resident, the important step after the scale balances is to read the measurement and record it, then return the resident to a safe, seated position such as their wheelchair. Reading and documenting the weight gives an accurate health record and ensures the resident isn't left standing or exposed to unnecessary risk. Announcing the weight aloud can breach privacy, leaving the resident standing is unsafe, and resetting the scale is something you'd do after you've captured and logged the measurement and helped the resident back to safety.

3. After finishing feeding and leaving the room, what should you do?

- A. Leave call light and wash hands**
- B. Take the call light with you**
- C. Ignore the call light**
- D. Turn off the light and leave**

Maintaining safety and infection control after you finish caring for a resident means both washing your hands and keeping the means to call for help within the resident's reach. Washing hands protects everyone from germs, and leaving the call light where the resident can reach it ensures they can ask for help if they need more assistance after you've left the room. Taking the call light, ignoring the call light, or turning it off would remove or hide their ability to request help, which isn't safe.

4. How many times should the shoulder ROM be performed?

- A. 3 times**
- B. 1 time**
- C. 2 times**
- D. 4 times**

When checking a shoulder's range of motion, you perform the movement three times. This repetition provides a reliable, consistent check of the joint's available range and helps you notice any pain, stiffness, or resistance that might indicate a problem. Do the movements slowly and smoothly, and if the patient can tolerate it, support the limb and move through the full range without forcing beyond pain or end range. Repeating three times helps confirm findings and avoids missing issues that could show up only on a subsequent pass. Doing fewer than three may miss subtle limitations or pain, while more than three isn't typically necessary and can cause fatigue or discomfort.

5. After completing Perineal Care, what is the immediate action regarding the resident's position?

- A. Position resident on their back in proper alignment**
- B. Leave in side-lying position**
- C. Sit resident up in bed**
- D. Stand the resident up**

After finishing perineal care, the priority is to return the resident to a safe, comfortable, and neutral position. Placing the resident on their back in proper alignment ensures the spine is straight, the head and neck are supported, and the body is balanced, which helps with breathing, circulation, and reducing the risk of falls or discomfort. Proper alignment means the head, neck, and spine are in a straight line with shoulders and hips aligned, arms comfortably at the sides, and the resident covered and draped as appropriate. Leaving the resident in a side-lying position or moving them into a sitting or standing position right after care can be unsafe or unnecessary at this moment, since it may compromise balance, breathing, or comfort.

6. Before performing a back rub, which privacy-related step should be done first?

- A. Pull privacy curtain**
- B. Raise side rail**
- C. Move resident to chair**
- D. Warm lotion in hands**

Protecting privacy is essential before any personal care. The first privacy-related step when giving a back rub is to pull the privacy curtain (or close the door, if applicable) so the resident is shielded from others. This respect for dignity helps the resident feel safe and comfortable and upholds their rights in a shared care setting. Raising a side rail is a safety measure, not a privacy action. Moving the resident to a chair isn't appropriate for a back rub in bed, and warming lotion in the hands is about comfort and technique, not privacy.

7. After the resident has walked at least 10 steps during gait-belt ambulation, what is the next step?

- A. Assist resident to pivot/sit in wheelchair and remove gait belt**
- B. Return resident to bed and start again**
- C. Leave the resident standing**
- D. Remove slippers and return to chair**

After completing the walking portion, the priority is to transition the resident to a safe seated position and remove the gait belt once stability is confirmed. Bring the wheelchair into position (typically at a comfortable angle with wheels locked and footrests ready), guide the resident to pivot and sit with support, then ensure they are resting securely before removing the gait belt. This keeps the resident protected from falls and ensures a stable, calm end to the ambulation session. Staying standing or returning to bed before seated would leave the resident in a vulnerable position, increasing the risk of imbalance or injury. Removing slippers or leaving the resident standing without a chair also doesn't provide a safe finish to the activity. The gait belt is kept on during ambulation for support, then removed after the resident is seated and stable.

8. What should be done to the scale before weighing the resident?

- A. Balance/zero out scale before weighing resident**
- B. Lock wheelchair brakes**
- C. Assist resident to stand**
- D. Read weight and record**

Zeroing the scale before weighing ensures the measurement reflects only the resident's weight. When the scale is balanced to zero with no load, any previous weight, tare, or drift is removed, so the reading you get is the resident's true mass. If you skip this step, the result can be biased high or low, leading to an inaccurate weight. After the scale is zeroed, you can have the resident stand or be supported as needed to obtain the correct measurement, then read and record it. Safety steps like ensuring the brakes are applied or assisting the resident to stand are important, but they come after you've prepared the scale with a zero reading.

9. What accuracy criteria must be used when recording solids intake?

- A. Must be within 25% of solids consumed**
- B. Must be within 50%**
- C. Must be exact**
- D. No recording needed**

You assess solids intake by how close your record is to what the resident actually ate, and the standard is to be within 25 percent of the amount consumed. This recognizes that exact weighing at the bedside isn't practical, so you estimate portions but with a consistent tolerance. The idea is to capture a reliable pattern over time rather than a precise measurement for every meal. For example, if the resident consumed about 40 grams of solids, you'd document roughly between 30 and 50 grams. This level of accuracy helps track nutrition trends and informs care decisions, without demanding impossible exactness. Recording exact amounts or not recording at all would distort the picture, and a 50% tolerance would reduce reliability.

10. What is the acceptable difference between the measured urinary output and the observer's measurement when emptying a urinary drainage bag?

A. 10 cc

B. 25 cc

C. 50 cc

D. 100 cc

When measuring urinary output, a small amount of variation between your measurement and the observer's is expected due to things like reading the bag at different angles, slight clock timing differences, or how the bag is positioned. The acceptable difference is 25 milliliters, meaning your recorded output may be up to 25 mL higher or lower than the observer's measurement and still be considered accurate. This tolerance helps reflect real-world measurement challenges while keeping documentation reliable. If the difference were larger than 25 mL, you would need to recheck the measurement and adjust accordingly. The other options are either too strict or too lenient compared to this standard tolerance.

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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://tncnaskills.examzify.com>

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

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