Tissue Integrity Test 6 Practice (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

1. When removing tape from the skin during wound care, which step should be performed first?

A. Loosen the ends

B. Pull the tape in the direction of hair growth

C. Use adhesive remover to loosen the tape

D. Gently lift the outer end perpendicular to the skin surface

2. Which characteristic is expected when using a hydrogel dressing?

A. Provides a moist environment

B. Dehydrates the wound

C. Prevents viewing of wound

D. Increases skin trauma

3. Which surface type should be used to reduce pressure injuries in immobile patients?

A. Low-air-loss, alternating pressure, or air-fluidized surfaces should be used to reduce pressure injuries.

B. A standard hospital bed is best for immobile patients.

C. A pillow under calves is the best solution for heel injury.

D. A wooden chair pad prevents injuries.

4. Which dressing is commonly used to absorb exudate from a pressure ulcer while protecting surrounding tissue?

A. Gauze

B. Calcium alginate

C. Hydrogel

D. Adherent film

5. Which nutrient deficiency may impair the inflammatory response in wound healing?

A. Zinc

B. Proteins

C. Vitamin A

D. Vitamin C

6. Maceration of the skin is most closely associated with which wound care factor?

A. Excess moisture exposure

B. Excessive dryness

C. Insufficient cleansing

D. High temperatures

7. Which action provides comfort for a patient with a coccyx pressure ulcer?

A. Repositioning every 90 minutes

B. Cleaning around the area

C. Elevating the head of the bed to 60 degrees

D. Applying a moisture barrier ointment over the ulcer

8. During the proliferative phase, which process occurs last?

A. Synthesis of collagen

B. Mixing of collagen with granulation tissue

C. Contraction of the wound

D. Migration of the epithelial cells from the wound edges

9. A patient who had debriding enzymes applied to an ulcer region reports a burning sensation. Which nursing action most likely caused this?

A. The nurse applied gauze dressing directly over the ulcer

B. The nurse applied ointment to the surrounding skin

C. The nurse applied foam directly over the ulcer

D. The nurse applied a thin ointment layer over the necrotic area of ulcer

10. To help maintain an airtight seal for negative-pressure wound therapy, which action is recommended?

A. Retaining hair around the wound

B. Using a skin barrier around the wound

C. Drying around the wound thoroughly

D. Applying adhesive remover to the wound edges

Answers

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

Explanations

1. When removing tape from the skin during wound care, which step should be performed first?

A. Loosen the ends

B. Pull the tape in the direction of hair growth

C. Use adhesive remover to loosen the tape

D. Gently lift the outer end perpendicular to the skin surface

When removing tape, the first move is to create slack in the tape by loosening the ends. This reduces the grip of the adhesive on the skin, making the peel gentler and smoother and helping prevent skin tearing or painful pulling. Once the ends are loosened, you can begin lifting the outer edge carefully and peel the tape away slowly, ideally in a direction that minimizes discomfort and skin trauma. Using adhesive remover or pulling along hair growth can help in other situations, but they're not the first step.

2. Which characteristic is expected when using a hydrogel dressing?

A. Provides a moist environment

B. Dehydrates the wound

C. Prevents viewing of wound

D. Increases skin trauma

Hydrogel dressings are designed to maintain a moist wound environment. Their water-rich gel keeps the wound bed hydrated, which supports epithelial cell migration and autolytic debridement, and often provides a cooling, soothing feel that makes dressing changes gentler. Because the goal is to preserve moisture, they do not dehydrate the wound, and many hydrogels are transparent enough to allow observation of the wound. They also tend to be non-adherent, reducing trauma on removal. In contrast, a dressing that dries out the wound, obscures the wound, or increases skin trauma wouldn't match how a hydrogel works.

3. Which surface type should be used to reduce pressure injuries in immobile patients?

A. Low-air-loss, alternating pressure, or air-fluidized surfaces should be used to reduce pressure injuries.

B. A standard hospital bed is best for immobile patients.

C. A pillow under calves is the best solution for heel injury.

D. A wooden chair pad prevents injuries.

Preventing pressure injuries in immobile patients hinges on redistributing and offloading pressure at the skin-mattress interface. Specialized support surfaces—such as low-air-loss mattresses, alternating-pressure surfaces, or air-fluidized beds—work by continuously shifting and spreading body weight, reducing the time tissue spends under high pressure and helping maintain tissue perfusion. They also help minimize shear and manage heat and moisture, all of which protect the skin. A standard hospital bed by itself doesn't provide adequate pressure relief. A pillow under the calves only partially shifts pressure away from heels and other vulnerable areas and isn't sufficient for preventing injuries in immobile patients. A wooden chair pad is rigid and creates high-pressure points, increasing risk. Therefore, the best choice to reduce pressure injuries is a surface designed to actively redistribute pressure.

4. Which dressing is commonly used to absorb exudate from a pressure ulcer while protecting surrounding tissue?

A. Gauze

B. Calcium alginate

C. Hydrogel

D. Adherent film

The key idea is choosing a dressing that can take up wound fluid without letting the surrounding skin become macerated. Calcium alginate dressings are highly absorbent and, when they contact exudate, they form a soft gel. This gel keeps the wound environment moist enough to promote healing while containing the exudate and protecting the surrounding skin from moisture damage. They're particularly well suited for pressure ulcers with moderate to heavy drainage and irregular wound shapes, and they can be easily removed with minimal trauma because they don't stick to the wound bed. Gauze, while absorbent, can dry out the wound and may leave fibers or require frequent changes, increasing disruption to the periwound tissue. Hydrogels add moisture rather than absorb significant drainage. Adherent films act as non-absorbent barriers and can trap exudate, increasing risk of maceration around the wound.

5. Which nutrient deficiency may impair the inflammatory response in wound healing?

A. Zinc

B. Proteins

C. Vitamin A

D. Vitamin C

Nutritional status shapes the inflammatory phase of wound healing, and vitamin A plays a key role in immune function and barrier integrity. Adequate vitamin A supports the normal activity of immune cells like neutrophils and macrophages and helps maintain healthy epithelia. When vitamin A is deficient, immune cell function can falter and epithelial barriers may be compromised, leading to a weaker inflammatory response and slower healing. Other nutrients are important for healing in different ways—zinc supports immune function and tissue remodeling, vitamin C drives collagen synthesis, and proteins provide the building blocks for new tissue. But the inflammatory response specifically hinges more directly on vitamin A's influence on immune cell performance and epithelial maintenance, making its deficiency the most impactful for this aspect of wound healing.

6. Maceration of the skin is most closely associated with which wound care factor?

A. Excess moisture exposure

B. Excessive dryness

C. Insufficient cleansing

D. High temperatures

Maceration happens when skin stays wet for a prolonged period, causing the outer layers to soften, swell, and pale. In wound care, this softening occurs when there's excess moisture or exudate around the wound, which weakens the protective barrier of the surrounding skin and increases the risk of skin breakdown. That's why excess moisture exposure is the factor most closely linked to maceration. Excessive dryness makes skin brittle and cracked rather than softened, insufficient cleansing isn't the direct cause of maceration, and high temperatures aren't the primary driver (though heat can increase sweating, the core issue remains sustained moisture).

7. Which action provides comfort for a patient with a coccyx pressure ulcer?

A. Repositioning every 90 minutes

B. Cleaning around the area

C. Elevating the head of the bed to 60 degrees

D. Applying a moisture barrier ointment over the ulcer

Protecting the skin from moisture and irritation around a coccyx pressure ulcer directly contributes to comfort. A moisture barrier ointment creates a protective layer on the skin, shielding it from urine, stool, sweating, and other secretions that can macerate tissue and cause pain. It also helps reduce friction during movement and sitting, making the patient more comfortable and less irritated by contact with the bed or chair. While repositioning and good hygiene are important parts of overall care, the barrier that seals out moisture and protects the delicate periwound skin addresses the immediate source of discomfort in this scenario. Elevating the head of the bed can increase pressure on the coccyx, potentially worsening pain, and cleaning around the area, though necessary, does not provide the same level of comfort protection as a moisture barrier.

8. During the proliferative phase, which process occurs last?

A. Synthesis of collagen

B. Mixing of collagen with granulation tissue

C. Contraction of the wound

D. Migration of the epithelial cells from the wound edges

In the proliferative phase, the wound bed is rebuilt with a collagen-rich matrix, granulation tissue forms with new blood vessels, and the wound begins to contract to shrink the opening. These steps are about laying down structure and reducing the gap, so the tissue is ready to be sealed. Re-epithelialization, the migration of epithelial cells from the wound edges to cover the surface, comes after the bed has been prepared and is the final step in closing the surface barrier. Therefore, migrating epithelial cells from the wound edges occur last among these processes.

9. A patient who had debriding enzymes applied to an ulcer region reports a burning sensation. Which nursing action most likely caused this?

A. The nurse applied gauze dressing directly over the ulcer

B. The nurse applied ointment to the surrounding skin

C. The nurse applied foam directly over the ulcer

D. The nurse applied a thin ointment layer over the necrotic area of ulcer

Enzymatic debridement works best when it contacts only the necrotic tissue in the wound bed; viable skin around the ulcer must be protected. If a nurse applies ointment to the surrounding (periwound) skin, that healthy tissue becomes exposed to the enzyme or to the medication, which can irritate it and cause a burning sensation. The periwound skin is sensitive and supports healing, so keeping it protected prevents this kind of irritation. The other actions focus the product on the wound bed or help keep the area contained without exposing healthy skin to the enzymatic agent, making burning less likely.

10. To help maintain an airtight seal for negative-pressure wound therapy, which action is recommended?

A. Retaining hair around the wound

B. Using a skin barrier around the wound

C. Drying around the wound thoroughly

D. Applying adhesive remover to the wound edges

Creating and maintaining an airtight seal in negative-pressure wound therapy hinges on preparing the periwound area so the adhesive drape can stick securely. Using a skin barrier around the wound provides a smooth, protective surface that helps the drape adhere to irregular contours and moist skin, reducing leakage and protecting the skin from adhesive irritation. Leaving hair around the wound would interfere with a tight seal, making leaks more likely. Drying the area, while helpful, isn't the main method for ensuring an airtight seal in NPWT. Applying adhesive remover to the wound edges would weaken the bond between skin and drape, compromising the seal.

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://tissueintegrity6.examzify.com

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