

WASHINGTON CNA PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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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 is a recommended practice when using assistive devices?**
 - A. Discouraging their use
 - B. Training the patient on how to use them
 - C. Using them only with supervision
 - D. Only employing them during emergencies
- 2. Generally speaking, how many ounces of water or other fluids should residents be encouraged to drink each day?**
 - A. 32 oz
 - B. 48 oz
 - C. 64 oz
 - D. 80 oz
- 3. Barriers to communication include which of the following?**
 - A. The NA uses medical terminology with the resident
 - B. The NA speaks slowly and clearly
 - C. The NA listens attentively
 - D. The NA encourages questions
- 4. To monitor a resident's pulse rate, the NA will most commonly check the _____ pulse.**
 - A. Femoral
 - B. Carotid
 - C. Radial
 - D. Apical
- 5. What is an important step to take when using a gait belt?**
 - A. Ensure it is tightly secured around the patient's waist
 - B. Make sure the belt is loose enough for comfort
 - C. Position it over the patient's joints
 - D. Always remove the belt after use

- 6. What are some signs of a stroke that a CNA should recognize?**
- A. Sudden weight loss, increased appetite, frequent headaches
 - B. Sudden numbness, confusion, trouble speaking, or severe headache
 - C. Excessive sweating, high fever, rapid pulse
 - D. Severe chest pain, difficulty breathing, extreme fatigue
- 7. What is a primary goal of palliative care?**
- A. To cure illness
 - B. To alleviate symptoms and improve quality of life
 - C. To prolong life at all costs
 - D. To provide hospice care only
- 8. Which behavior promotes Residents' Rights?**
- A. Ignoring resident preferences
 - B. Encouraging independence
 - C. Encouraging a resident to participate in care planning
 - D. Restricting discussions about care
- 9. Which of the following statements is true about preventing aspiration during eating?**
- A. The NA should place food in the stronger side of the mouth
 - B. The NA should provide food only on the weaker side of the mouth
 - C. The NA should encourage the resident to eat faster
 - D. The NA should avoid assisting residents during mealtime
- 10. To convert four ounces to milliliters, what number should the NA multiply four by?**
- A. 10
 - B. 20
 - C. 30
 - D. 40

Answers

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

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Explanations

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1. What is a recommended practice when using assistive devices?

- A. Discouraging their use
- B. Training the patient on how to use them**
- C. Using them only with supervision
- D. Only employing them during emergencies

Training the patient on how to use assistive devices is essential for ensuring their safety and independence. When patients are properly instructed on how to use devices such as walkers, canes, or wheelchairs, they can effectively enhance their mobility and reduce the risk of falls or injuries. This practice empowers patients and boosts their confidence, as they learn to navigate their environment safely. Moreover, adequate training helps patients understand their limits and develop proper techniques, promoting a sense of ownership and responsibility for their care. By allowing them to practice using these devices in a supportive environment, healthcare providers can assess their capabilities and make necessary adjustments to improve overall functionality and comfort. Other practices, like discouraging use, restricting use only to emergencies, or requiring constant supervision, hinder a patient's mobility and independence, which can be detrimental to their overall well-being and recovery.

2. Generally speaking, how many ounces of water or other fluids should residents be encouraged to drink each day?

- A. 32 oz
- B. 48 oz
- C. 64 oz**
- D. 80 oz

Encouraging residents to drink about 64 ounces of water or other fluids each day aligns with general health guidelines for daily hydration. This amount is consistent with recommendations for maintaining proper hydration, which is crucial for bodily functions such as digestion, circulation, temperature regulation, and overall health. Adequate fluid intake can prevent dehydration, which can lead to various health complications, particularly in older adults who may have a reduced sense of thirst or barriers to adequate fluid consumption. It's important to note that individual hydration needs may vary based on factors such as age, activity level, overall health, and environmental conditions. However, the 64-ounce guideline serves as a practical standard for encouraging residents in a care environment to remain hydrated and support their well-being. This hydration practice is especially vital for those in assisted living or nursing home settings where they may require assistance to meet their daily fluid intake goals.

3. Barriers to communication include which of the following?

- A. The NA uses medical terminology with the resident**
- B. The NA speaks slowly and clearly
- C. The NA listens attentively
- D. The NA encourages questions

Barriers to communication can significantly impact the effectiveness of interactions between healthcare workers and patients. Using medical terminology with a resident is a prime example of a barrier because these terms can be confusing or completely unknown to someone without a medical background. This can inhibit effective communication, making it difficult for the resident to understand their condition, treatment options, or care instructions. In contrast, speaking slowly and clearly, listening attentively, and encouraging questions foster an environment conducive to understanding. These practices help ensure that the resident feels engaged and comfortable to participate in the conversation, enhancing their comprehension and involvement in their own care. Thus, it's vital to avoid jargon and instead communicate in a clear, straightforward manner to promote effective interactions.

4. To monitor a resident's pulse rate, the NA will most commonly check the _____ pulse.

- A. Femoral
- B. Carotid
- C. Radial**
- D. Apical

The correct choice for monitoring a resident's pulse rate is the radial pulse. This pulse is located on the wrist, specifically on the thumb side, and is easily accessible and comfortable for both the resident and the nursing assistant. The radial pulse is commonly used in clinical settings due to its practicality; it allows for a quick and efficient assessment of the heart rate and is typically sufficient for routine monitoring. In contrast, other pulse points like the femoral pulse, which is located in the groin area, and the carotid pulse, found in the neck, may be more invasive and less comfortable for the resident. The apical pulse, taken at the apex of the heart using a stethoscope, provides a direct measure of heart activity but is more complicated and time-consuming compared to checking the radial pulse. Therefore, the radial pulse is the preferred choice for routine monitoring in most situations.

5. What is an important step to take when using a gait belt?

- A. Ensure it is tightly secured around the patient's waist**
- B. Make sure the belt is loose enough for comfort
- C. Position it over the patient's joints
- D. Always remove the belt after use

Using a gait belt involves ensuring it is securely fastened around the patient's waist to provide safety and support during mobility assistance. A firmly secured belt allows the caregiver to maintain a good grip and effectively assist the patient in standing, walking, or transferring while minimizing the risk of falls. If the belt is too loose, it can slip or disengage, leading to potential accidents and injury. While ensuring comfort is also important, it must not compromise safety; therefore, the belt should be snug but not overly tight. Positioning the belt correctly above the patient's hips and ensuring that it does not interfere with joints are crucial for both effectiveness and comfort. Removing the belt after use is a procedural step, but the priority during the use is to maintain stability and support. That makes securing the belt properly an essential part of its application.

6. What are some signs of a stroke that a CNA should recognize?

- A. Sudden weight loss, increased appetite, frequent headaches
- B. Sudden numbness, confusion, trouble speaking, or severe headache**
- C. Excessive sweating, high fever, rapid pulse
- D. Severe chest pain, difficulty breathing, extreme fatigue

Recognizing the signs of a stroke is critical for ensuring timely medical intervention, which can significantly affect outcomes for the patient. The correct response highlights key stroke symptoms commonly associated with this medical emergency. Sudden numbness or weakness, particularly on one side of the body, confusion, trouble speaking or understanding speech, and a severe headache with no known cause are all classic indicators of a stroke and align with the American Stroke Association's FAST acronym (Facial drooping, Arm weakness, Speech difficulties, and Time to call emergency services). Immediate awareness and action in response to these symptoms can lead to more effective treatment and better recovery prospects for the individual experiencing a stroke. The other listed symptoms, while important in different medical contexts, do not specifically pertain to a stroke. Sudden weight loss and frequent headaches are not typical immediate indicators of a stroke, and conditions like excessive sweating or severe chest pain pertain more towards other health issues such as heart problems or infections rather than stroke recognition. Recognizing the right signs is essential for a CNA's role in emergency situations, emphasizing the significance of immediate and correct identification of stroke symptoms.

7. What is a primary goal of palliative care?

- A. To cure illness
- B. To alleviate symptoms and improve quality of life**
- C. To prolong life at all costs
- D. To provide hospice care only

Palliative care focuses on alleviating symptoms and improving the quality of life for patients facing serious illnesses. The primary goal is to address physical, emotional, and spiritual needs, helping patients and their families manage the impact of the illness. This approach ensures comfort and support, allowing individuals to live as fully as possible despite their health challenges. While curing the illness is often a goal in other areas of medicine, palliative care recognizes that the aim is not necessarily to cure but to enhance life quality. It balances symptom management with psychosocial support, fostering a holistic approach to healthcare. Prolonging life at all costs is not aligned with the principles of palliative care, which prioritizes the patient's values and wishes. Lastly, while hospice care falls under the umbrella of palliative care, especially at the end of life, palliative care is not limited to hospice settings; it can be provided alongside curative treatments at any stage of illness. Therefore, alleviating symptoms and enhancing quality of life are central tenets of palliative care.

8. Which behavior promotes Residents' Rights?

- A. Ignoring resident preferences
- B. Encouraging independence
- C. Encouraging a resident to participate in care planning**
- D. Restricting discussions about care

Encouraging a resident to participate in care planning closely aligns with the fundamental principles of Residents' Rights. This behavior promotes autonomy and ensures that residents have a voice in decisions regarding their own care. By involving residents in the care planning process, caregivers acknowledge their preferences, wishes, and values, which is essential for fostering a respectful and person-centered environment. When residents actively participate in care planning, they are more likely to feel empowered and engaged in their own health outcomes. Furthermore, this practice upholds the right of residents to have control over their care, which is a crucial aspect of dignity and respect in health care settings. Encouraging participation not only reinforces the concept of self-determination but also enhances the therapeutic relationship between caregivers and residents, ultimately leading to better care delivery. In contrast, behaviors such as ignoring resident preferences, restricting discussions about care, or diminishing independence do not support Residents' Rights, as they infringe upon the ability of residents to express themselves and make informed choices regarding their care.

9. Which of the following statements is true about preventing aspiration during eating?

- A. The NA should place food in the stronger side of the mouth**
- B. The NA should provide food only on the weaker side of the mouth
- C. The NA should encourage the resident to eat faster
- D. The NA should avoid assisting residents during mealtime

Placing food in the stronger side of the mouth is a strategy used to help individuals with swallowing difficulties or those who have suffered a stroke. This approach takes advantage of the stronger side's capabilities to manage the food effectively, promoting better chewing, swallowing, and reducing the risk of aspiration, which can occur when food enters the airway instead of the esophagus. By positioning food on the stronger side, the nursing assistant can help ensure that the resident has a better chance of swallowing safely and comfortably. The other options would not promote safe eating practices. For instance, offering food only on the weaker side may increase the likelihood of aspiration, as that side may not be able to handle the food efficiently. Encouraging the resident to eat faster can lead to choking or aspiration, as it does not allow enough time for proper chewing and swallowing. Lastly, avoiding assistance during mealtime is contrary to providing safe and supportive care for individuals who need help to prevent aspiration and other swallowing issues.

10. To convert four ounces to milliliters, what number should the NA multiply four by?

- A. 10
- B. 20
- C. 30**
- D. 40

To convert ounces to milliliters, it's important to understand the conversion factor between these two units. One ounce is approximately equal to 29.57 milliliters. Therefore, to convert ounces to milliliters, you multiply the number of ounces by this conversion factor. In this case, to convert four ounces to milliliters, you would calculate: $4 \text{ ounces} \times 29.57 \text{ milliliters/ounce} = 118.28 \text{ milliliters}$. If you are looking for a simpler conversion factor that is often used for easier calculations, rounded to 30 milliliters per ounce is sometimes applied. This makes calculations easier, as it means you would multiply the ounces by 30. Thus, when looking for a multiplication factor based on this rounded approach, multiplying four by 30 will give a rough estimate. However, the actual number for more precise conversions is not directly given in the choices. The choice that approximates as closely as possible based on common rounding practices in nursing calculations is the correct approach to find a quick and usable figure for practical scenarios.

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://washingtoncna.examzify.com>

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

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