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Question: 1

When bathing a patient, the water should always be checked prior to the patient getting into the tub to prevent:

- A. Hydrophobia (fear of water)
- B. Drowning
- C. Chilling the client if the water is too cold
- D. Scalding the patient's skin if the water is too hot

Answer: D

Explanation:

It is crucial to check tub temperature before allowing a patient to bathe by themselves or before assisting patients with bathing. You will need to adjust water temperature and pressure to prevent chilling or, most importantly, burns. Scald burn injuries can result in death in the elderly. Be sure to check the facility's protocol for taking and recording tub temperatures. Many tubs in hospitals and other facilities come equipped with a built-in thermometer.

Question: 2

Your patient's home is so full of belongings that you feel your patient's safety is at risk. What should you do?

- A. Call a collection agency to come and remove some of the clutter
- B. Phone the patient's family and tell them about the state of the patient's home
- C. Inform your supervisor
- D. Throw out anything you think the patient doesn't need

Answer: C

Explanation:

If you feel that a patient's home is dangerous for any reason, you should inform your supervisor, who may decide to visit the patient's home. You should never call family members without permission as this does not respect the patient's right to privacy. You should never remove anything from the patient's home.

Question: 3

Which of the following is not a function of the skin?

- A. Regulates body temperature
- B. Provides the framework for the body, allowing it to move
- C. Prevents the loss of excessive amounts of water
- D. Prevents microorganisms and other substances from entering the body

Answer: B

Explanation:

The skin is the largest system and covers our body. It has many functions, such as protecting us from invading bacteria and other organisms, helping us to regulate our body temperature and keeping water inside our bodies.

The musculoskeletal system provides the framework for the body. It lets the body move and gives the body shape.

Question: 4

Which measure may soothe a patient with severe dementia who screams loudly and repetitively?

- A. Playing soft music
- B. Taking the patient to a noisier setting as the patient may become quieter in a loud setting
- C. Asking family members to leave
- D. Removing hearing aids and glasses

Answer: A

Explanation:

Patients with severe dementia may scream in order to communicate. Pain, vision or hearing problems, fatigue, fear or too much/too little stimulation may provoke screaming. Quiet music may soothe the patient.

Family members may be able to calm the patient. Wearing hearing aids and glasses may also help. Controlling distractions and noise such as TV, radio, and loud music may also be helpful.

Question: 5

Which of the following are symptoms of hepatitis?

- A. Cough and fever
- B. Anemia and chest pain
- C. Abdominal pain and jaundice
- D. Fever and bradycardia

Answer: C

Explanation:

Hepatitis is inflammation and infection of the liver caused by a virus. Symptoms of hepatitis may include abdominal pain, fatigue, nausea, dark urine, jaundice, and itching of the skin (pruritus). Some patients have no symptoms. About a third of patients will experience transient, flu-like symptoms. Health care workers should be vaccinated against hepatitis.

Question: 6

Mr. C states that he is feeling sad because none of his family members ever come to visit him. You reply, "It sounds as though you are feeling lonely." This is an example of:

- A. Clarifying
- B. Paraphrasing
- C. Failing to listen
- D. Active listening

Answer: B

Explanation:

Paraphrasing means to restate a person's statement in your own words, usually using fewer words than the person did. It shows that you understood the message conveyed and that you are listening. It also prompts further communication.

Active listening involves certain body language, eye contact and focusing on verbal and nonverbal communication. Clarifying allows you to make sure that you understand the message. You can ask the person to repeat the message, say you do not understand, or re-state the message.

Question: 7

A patient with dementia carries a doll with her and refers to it as her daughter. One day, the patient's doll is missing, and the patient is crying inconsolably and wandering around looking for her daughter. Her behavior is distressing to other patients. What should you do?

- A. Ask the RN assigned to the patient to administer a sedative to calm the patient
- B. Attempt to comfort the patient and accompany her to look for her "daughter"
- C. Restrain the patient in her bed so that she can no longer upset the other patients
- D. Reorient the patient to time and place and remind her that her daughter has not visited her in months

Answer: B

Explanation:

It can be difficult to manage the behavior of patients with dementia. If a patient is upset and wandering, attempt to offer comfort. Attempts to reorient the patient with dementia are likely to fail and may upset the patient even more. Restraining the patient, either chemically or physically, is not an acceptable choice unless the patient poses a risk to herself or others.

Question: 8

How should you approach an agitated, elderly male patient?

- A. Do not rush the client or show impatience
- B. Demand that he sit down and relax
- C. Restrain him
- D. Ask the nurse to sedate him

Answer: A

Explanation:

When working with agitated patients, you should speak softly and calmly. Do not rush the agitated patient. Do not overstimulate the patient. Do not make demands or force the patient to do anything. Allow the patient choices regarding their care and do your best to reign in any impatience on your end. Restraining and/or sedating the patient is unnecessary in this situation.

Question: 9

You have been asked to obtain a rectal temperature of your patient. Which of the following statements is true?

- A. You should insert the rectal thermometer as far as it will go into the patient's rectum.
- B. A rectal temperature is taken when the patient is unconscious.
- C. A rectal temperature is a less accurate indicator of core temperature than an axillary temperature.
- D. There is no need to lubricate the thermometer prior to inserting it into the rectum.

Answer: B

Explanation:

The rectal site is commonly used for infants and children under 3 years old, or when the oral site cannot be used. The unconscious patient would be an appropriate candidate for a rectal temperature. Rectal temperatures are often considered to be the most accurate representation of core temperature. The thermometer should be lubricated prior to insertion, and only the tip of the thermometer is inserted (1/2 inch into the rectum). A rectal temperature will be higher than an axillary temperature. It is important to consider patient privacy when obtaining a rectal temperature.

Question: 10

Interdisciplinary team members may include all of the following except:

- A. Respiratory therapists
- B. Social workers
- C. Physicians

D. Patients

Answer: D

Explanation:

Interdisciplinary health care team members may be regulated or unregulated and involves the many health care professionals whose skills and knowledge focus on the patient's total care. The patient is the focus of care. Spiritual advisors, social workers, occupational therapists, pharmacists, dieticians, and activities directors all work together to provide care to patients in a variety of settings.

Question: 11

When you are checking to determine whether an unresponsive patient has a pulse, you should check for a carotid pulse for no longer than what period of time?

- A. 15 seconds
- B. 30 seconds
- C. 20 seconds
- D. 10 seconds

Answer: D

Explanation:

When checking the pulse of a patient who is determined to be unresponsive, check the adult patient's carotid pulse for no longer than 10 seconds. If the patient is unresponsive, is not breathing, or is only gasping and has no pulse, you should proceed with chest compressions immediately.

Question: 12

Which of the following should you report immediately after giving an enema?

- A. A large formed stool
- B. Large amount of flatus
- C. Expulsion of watery brown fluid
- D. Retention of the enema

Answer: D

Explanation:

Should the patient retain the contents of the enema, this may indicate an obstruction. Retention will likely cause abdominal distention and pain and should be reported immediately.

Large formed stools, flatus and expulsion of watery brown fluid are all common findings after administering an enema.

Question: 13

A patient you are caring for has recently lost a spouse. She confides to you that she is feeling ill and expects that she will die soon. This is an example of:

- A. Repression
- B. Displacement
- C. Conversion
- D. Projection

Answer: C

Explanation:

This is an example of conversion. It is a type of defense mechanism. The patient is changing her emotions towards the loss of her spouse into physical symptoms.

Displacement means to move or take the place of. A person moves behaviors or emotions from one person, place or thing to a safe person, place or thing. Projection means to blame another for unacceptable behaviors, emotions, ideas or wishes. Repression means to hold down or keep back unpleasant or painful thoughts or experiences from the conscious mind.

Question: 14

Your patient's leg has been splinted after the patient fell and suffered a sprain. The patient states that the splint is hurting his leg and asks you to remove it. What should you do?

- A. Remove the splint and massage the painful area
- B. Remove the splint and assess the skin for redness, swelling, or irritation
- C. Report the patient's complaint of pain to the patient's nurse
- D. Call the patient's physician

Answer: C

Explanation:

Report the patient's complaint of pain to the nurse. Do not remove the splint yourself. You should not massage an area that is painful unless instructed that it is safe to do so. The nurse will assess the site and determine if she needs to notify the physician.

Question: 15

Your patient has suffered a massive CVA and is unable to move without assistance. Upon entering the patient's room, the patient begins to vomit fresh blood. What should be your first action?

- A. Get an emesis basin
- B. Clean up the patient and change any soiled linens
- C. Turn the patient onto his side in the side-lying position
- D. Call for help

Answer: C

Explanation:

You should immediately turn the patient onto his or her side. Patients who are unable to mobilize independently can choke when lying on their backs, and may aspirate (inhale vomitus/blood into the lungs), which may cause pneumonia or respiratory distress. Once you have turned the patient, call for help. There is no need to call a code if the patient is breathing and has a pulse. Cleaning up the patient and changing the patient's linens can wait until the patient is stable.

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