

DHA Exam Questions for Nurses

1. A patient with chronic obstructive pulmonary disease (COPD) is admitted to the hospital. Which of the following interventions is most appropriate for this patient?

- A. Administering high-flow oxygen
- B. Encouraging deep breathing exercises
- C. Restricting fluid intake
- D. Providing a high-protein diet

Answer: B. Encouraging deep breathing exercises

2. Which of the following is the primary goal of palliative care?

- A. Cure the disease
- B. Provide comfort and improve the quality of life
- C. Prolong life at all costs
- D. Conduct experimental treatments

Answer: B. Provide comfort and improve the quality of life

3. A nurse is caring for a patient with diabetes mellitus. Which of the following is a priority nursing intervention?

- A. Administering insulin as prescribed
- B. Restricting fluid intake
- C. Encouraging bed rest
- D. Providing a high-fat diet

Answer: A. Administering insulin as prescribed

4. A 45-year-old patient is experiencing chest pain. What is the first action the nurse should take?

- A. Administering pain medication
- B. Assessing the patient's vital signs
- C. Performing a detailed medical history
- D. Preparing the patient for a chest X-ray

Answer: B. Assessing the patient's vital signs

5. A patient with a history of hypertension is admitted to the hospital. Which of the following medications is commonly prescribed to manage hypertension?

- A. Metformin
- B. Lisinopril
- C. Insulin
- D. Omeprazole

Answer: B. Lisinopril

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6. During a blood transfusion, a patient develops chills and fever. What should the nurse do first?

- A. Stop the transfusion
- B. Increase the infusion rate
- C. Administer antipyretics
- D. Notify the physician

Answer: A. Stop the transfusion

7. A nurse is teaching a patient with asthma about the use of a metered-dose inhaler (MDI). Which instruction should be included in the teaching?

- A. "Hold your breath for 10 seconds after inhaling the medication."
- B. "Exhale immediately after inhaling the medication."
- C. "Use the inhaler only when you have symptoms."
- D. "Shake the inhaler before each use."

Answer: A. "Hold your breath for 10 seconds after inhaling the medication."

8. A patient is receiving intravenous (IV) fluid therapy. Which sign indicates that the patient may be experiencing fluid overload?

- A. Dry mucous membranes
- B. Jugular vein distention
- C. Decreased urine output
- D. Hypotension

Answer: B. Jugular vein distention

9. A nurse is assessing a patient with a suspected urinary tract infection (UTI). Which symptom is most indicative of a UTI?

- A. Chest pain
- B. Shortness of breath
- C. Dysuria
- D. Blurred vision

Answer: C. Dysuria

10. A patient with heart failure is on a low-sodium diet. Which of the following foods should the nurse recommend the patient avoid?

- A. Fresh fruits
- B. Processed cheese
- C. Whole grains
- D. Lean meats

Answer: B. Processed cheese

11. A nurse is preparing a patient for surgery. Which of the following actions should the nurse take first?

- A. Administering preoperative medications
- B. Ensuring informed consent is signed
- C. Performing a physical assessment
- D. Teaching postoperative exercises

Answer: B. Ensuring informed consent is signed

12. A patient with a recent stroke is experiencing difficulty swallowing. What is the best action for the nurse to take?

- A. Offering thin liquids
- B. Providing a pureed diet
- C. Encouraging the patient to eat quickly
- D. Administering a high-fiber diet

Answer: B. Providing a pureed diet

13. A nurse is caring for a patient with acute renal failure. Which of the following laboratory values should the nurse monitor closely?

- A. Hemoglobin
- B. Blood urea nitrogen (BUN)
- C. Platelet count
- D. Serum glucose

Answer: B. Blood urea nitrogen (BUN)

14. A patient with a leg fracture is placed in a cast. What is the most important instruction the nurse should give to the patient?

- A. "Keep the cast clean and dry."
- B. "Exercise the affected limb regularly."
- C. "Elevate the limb to reduce swelling."
- D. "Report any unusual sensations or pain."

Answer: D. "Report any unusual sensations or pain."

15. A nurse is caring for a patient with chronic pain. Which of the following is an important aspect of managing chronic pain?

- A. Administering pain medication only when pain is severe
- B. Using a multidisciplinary approach
- C. Encouraging the patient to avoid all physical activity
- D. Limiting the patient's use of pain medication

Answer: B. Using a multidisciplinary approach

16. A patient with a wound infection is prescribed antibiotics. What is the most important nursing action when administering antibiotics?

- A. Administering the medication with food
- B. Monitoring the patient for signs of an allergic reaction

- C. Ensuring the patient drinks plenty of fluids
- D. Applying warm compresses to the wound site

Answer: B. Monitoring the patient for signs of an allergic reaction

17. A nurse is providing discharge teaching to a patient with hypertension. Which of the following lifestyle changes should the nurse recommend?

- A. Reducing salt intake
- B. Increasing caffeine consumption
- C. Avoiding physical activity
- D. Consuming more processed foods

Answer: A. Reducing salt intake

18. A patient with a urinary catheter develops a fever and chills. What is the most likely cause?

- A. Dehydration
- B. Urinary tract infection
- C. Allergic reaction
- D. Fluid overload

Answer: B. Urinary tract infection

19. A nurse is caring for a patient who has just undergone surgery. Which of the following is a priority assessment in the immediate postoperative period?

- A. Checking the patient's blood glucose level
- B. Assessing the patient's respiratory status
- C. Monitoring the patient's bowel sounds
- D. Evaluating the patient's skin turgor

Answer: B. Assessing the patient's respiratory status

20. A nurse is educating a patient about the management of chronic obstructive pulmonary disease (COPD). Which of the following instructions should the nurse include?

- A. "Avoid smoking and exposure to lung irritants."
- B. "Increase your intake of dairy products."
- C. "Limit your physical activity to prevent fatigue."
- D. "Use your rescue inhaler only when you feel short of breath."

Answer: A. "Avoid smoking and exposure to lung irritants."

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DHA Registered Nurse Sample Questions

1. What is the normal range for adult blood pressure?

- a) 90/60 mmHg

- b) 120/80 mmHg
- c) 140/90 mmHg
- d) 160/100 mmHg

Answer: b) 120/80 mmHg

2. What is the primary purpose of the nursing process?

- a) To administer medication
- b) To provide a systematic method for delivering patient care
- c) To diagnose diseases
- d) To manage hospital resources

Answer: b) To provide a systematic method for delivering patient care

3. Which medication is commonly used to treat bacterial infections?

- a) Antivirals
- b) Analgesics
- c) Antibiotics
- d) Antifungals

Answer: c) Antibiotics

4. How often should a nurse check vital signs for a stable postoperative patient?

- a) Every 15 minutes
- b) Every 30 minutes
- c) Every hour
- d) Every 4-6 hours

Answer: d) Every 4-6 hours

5. What is the most effective way to prevent the spread of infection in a healthcare setting?

- a) Wearing gloves
- b) Hand hygiene
- c) Using hand sanitizers
- d) Wearing masks

Answer: b) Hand hygiene

6. What should a nurse do first when a patient reports chest pain?

- a) Administer pain medication
- b) Call for help
- c) Assess the patient's vital signs and oxygen saturation
- d) Provide reassurance

Answer: c) Assess the patient's vital signs and oxygen saturation

7. What is an important consideration when administering medication to an elderly patient?

- a) Assess for potential drug interactions and adjust dosages accordingly
- b) Increase the dosage due to slower metabolism
- c) Avoid giving medication at night
- d) Administer medications with food

Answer: a) Assess for potential drug interactions and adjust dosages accordingly

8. How should a nurse position a patient experiencing dyspnea?

- a) Supine position
- b) Prone position
- c) In a semi-Fowler's or high-Fowler's position
- d) Trendelenburg position

Answer: c) In a semi-Fowler's or high-Fowler's position

9. What is the normal range for adult respiratory rate?

- a) 8-12 breaths per minute
- b) 12-20 breaths per minute
- c) 20-24 breaths per minute
- d) 24-30 breaths per minute

Answer: b) 12-20 breaths per minute

10. Which blood test is used to monitor long-term glucose control in diabetic patients?

- a) Fasting blood sugar
- b) Random blood sugar
- c) HbA1c test
- d) Oral glucose tolerance test

Answer: c) HbA1c test

11. What is the primary role of insulin in the body?

- a) To digest carbohydrates
- b) To regulate blood glucose levels
- c) To aid in protein synthesis
- d) To maintain fluid balance

Answer: b) To regulate blood glucose levels

12. Which type of isolation is required for a patient with tuberculosis?

- a) Contact isolation
- b) Droplet isolation
- c) Airborne isolation
- d) Protective isolation

Answer: c) Airborne isolation

13. How should a nurse assess a patient's pain level?

- a) By observing facial expressions
- b) Using a pain scale, such as 0-10 or the Wong-Baker FACES scale
- c) By asking the patient to describe their pain
- d) By measuring vital signs

Answer: b) Using a pain scale, such as 0-10 or the Wong-Baker FACES scale

14. What is a key sign of dehydration in a patient?

- a) Hypertension
- b) Dry mucous membranes and decreased urine output
- c) Bradycardia
- d) Hyperthermia

Answer: b) Dry mucous membranes and decreased urine output

15. Which intervention is most important for a patient with a fever?

- a) Administering antipyretics
- b) Encouraging fluid intake to prevent dehydration
- c) Providing a cold compress
- d) Monitoring heart rate

Answer: b) Encouraging fluid intake to prevent dehydration

16. How should a nurse handle a needle-stick injury?

- a) Ignore it if it doesn't hurt
- b) Report the incident immediately and follow post-exposure protocols
- c) Wait to see if symptoms develop
- d) Treat the wound with alcohol

Answer: b) Report the incident immediately and follow post-exposure protocols

17. What is the normal range for adult heart rate?

- a) 40-60 beats per minute
- b) 60-100 beats per minute
- c) 100-120 beats per minute
- d) 120-140 beats per minute

Answer: b) 60-100 beats per minute

18. What is the main symptom of a urinary tract infection?

- a) Fever
- b) Dysuria (painful urination)
- c) Cough
- d) Diarrhea

Answer: b) Dysuria (painful urination)

19. Which nursing intervention is important for a patient with hypertension?

- a) Administering antihypertensive medications
- b) Educate the patient about low-sodium diets and lifestyle changes
- c) Encouraging a high-sodium diet
- d) Restricting fluid intake

Answer: b) Educate the patient about low-sodium diets and lifestyle changes

20. What is a common side effect of opioid analgesics?

- a) Diarrhea
- b) Constipation
- c) Hyperactivity
- d) Weight loss

Answer: b) Constipation

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