

Name:	:	Date:
1.	The functions of the kidney includes (choose a a. The production of erythropoietin b. The production of estrogen and testos c. The activation of Vitamin D d. Regulates blood pressure through the	sterone
2.		
3.	Almost all patients with kidney failure experie contribute to anemia. a. Deficiencies of certain vitamins and b. Deficiency of erythropoietin product c. Continuing blood losses and accomp. d. Insufficient dietary intake of calcium	on in the kidney any dialysis
4.	8 7 7	ize these solutes by pulling fluid from both sides of the e membrane by diffusion tabolism are expected to do
5.	After a patient has an AV graft placed for dial to wait for use? a. 2 days b. 2 weeks c. 2 months d. 3 months	ysis is must heal before use. What is the usual period of time
6.	Ideally, how far apart should the fistula needle a. ¼ inch b. ½ inch c. 1 inches d. 2 inches	tips be in the AV fistula or AV graft?

7. What is the maximum level of hardness that can exit a water softener?

a. 17.0 ppm b. 10.0 ppm c. 50.0 ppm d. 25.0ppm



Name:	Date:

- 8. If you notice air in the venous blood line below the air detector clamp, the patient should immediately be placed in the following position:
 - a. Do not move patient
 - b. Keep patient flat
 - c. Left side in Trendelenburg position
 - d. Right side with head lowered
- 9. Elevated potassium is a problem because it can cause:
 - a. Fatal cardiac arrhythmia
 - b. Weakness and lightheadedness
 - c. Nausea and vomiting
 - d. Headache
- 10. Why is water purified before it is used for dialysis?
 - a. Water does not need to be purified for dialysis
 - b. Untreated water would damage the dialysis machine
 - c. Untreated tap water is too acidic for use by dialysis machines
 - d. Patients are exposed to very large volumes of water weekly and contaminates from water can cross the semi-permeable membrane
- 11. The water used for dialysis must be tested for chlorine:
 - a. Daily
 - b. Weekly
 - c. Before the first treatment of the day
 - d. Before the first treatment on every patient shift
- 12. How many staff must verify the dialyzer before starting treatment?
 - a. One
 - b. Two
 - c. Three
- 13. Determining the patient's Kt/V is important because it tells us:
 - a. If the patient is receiving adequate dialysis
 - b. The patient's dry weight
 - c. What type of diet the patient should eat
 - d. If the patient is taking blood pressure medications as prescribed
- 14. You notice that the venous pressure begins to rise during the treatment. Please circle all that could be responsible.
 - a. Venous infiltration
 - b. Blood leak
 - c. Clotting in the venous bloodline
 - d. Arterial infiltration



Name:		Date:
15.	The mo	st common causes for kidney failure are:
	a.	Glomerulonephritis, Polycystic Kidney Disease
		Lupus, Hypertension
		Diabetes, Hypertension
	d.	Diabetes, Glomerulonephritis
16.	A defin	ition of uremia is:
	a.	A build up of waste in the blood that occurs in the last stages of kidney failure.
		A life threatening infection in the blood cased by bacteria in the blood stream
	c.	A fluid build up in the lungs
	d.	A lack of sufficient oxygen to the kidneys due to decreased blood flow.
17.		ond most common cause of death from kidney failure patients is infection.
		True
	b.	False
18.	From th	ne following list, chose the infections for which we use Universal Precautions in the dialysis clinic.
	a.	Hepatitis B or C
	b.	HIV
	c.	Tuberculosis
	d.	MRSA and VRE
	e.	Influenza
	f.	Common Core
	g.	All patients regardless of presence of infection
19.		y dialysis treatment, the blood pressure should be checked on the access arm at least once.
		True
	b.	False
20.	Which s	size fistula needle would you choose for a well-developed AV fistula that has been used for 2 years
	a.	17G
	b.	16G
	c.	15G
21.	Which s	size fistula needle would you choose for a new fistula that is being used today for the first time?
	a.	17G
	b.	16G
	c.	15G

- 22. The purpose for priming a reuse dialyzer and blood lines with saline during the set up procedure is to:
 - a. Assess the ultrafiltration capacity of the dialyzer
 - b. Check for leaks in the dialyzer
 - c. E sure the semi-permeable fibers are filled with Renalin before starting treatment
 - d. Remove Renalin and air before starting treatment



b. Glucosec. Potassiumd. Phosphorus

Name:		Date:
23.		of the following observations should be reported to the Charge Nurse during a treatment?
	(choose	e all that apply)
	a.	
	b.	
	c.	J 1
		Rapidly rising venous pressure during treatment
	e.	Pulse rate of 130
	f.	Blood pressure change of 164/90 to 150/86
24.	The pro	ocess of setting the ultrafiltration during dialysis treatment refers to:
	a.	Waste product removal during treatment
		Food digestion during treatment
		Fluid removal during treatment
	d.	Water treatment
25.	Before	connecting a patient to a reprocessed dialyzer, the final residual test must be:
	a.	Negative and documented b two staff members
		Positive and documented by a licensed nurse
		Negative and documented by one PCT
	d.	Negative within the last two hours
26.	Which	of the following patients would NOT be a good candidate for peritoneal dialysis?
	a.	A child
	b.	A patient who likes to travel
	c.	A patient with cardiac problems
	d.	A patient with a physical disability and no partner
27.	How m	such kidney function may be lost before tests indicate impairment?
		25-30%
		40-50%
		70-75%
	d.	90% or more
28.	BUN is	s a waste product of metabolism.
	a.	Muscle
	b.	Protein
	c.	Sugar
	d.	Fat
29.	Dialysa	ate includes all of the following EXCEPT:
		Sodium



Name:	Date:

- 30. What function does bicarbonate in the dialysate serve?
 - a. To maintain electrolytes in normal range
 - b. To correct metabolic acidosis
 - c. To measure the conductivity
 - d. To eliminate precipitate
- 31. Reuse dialyzers are discarded when the volume is less than:
 - a. 75% of original volume
 - b. 80% of original volume
 - c. 85% of original volume
 - d. 90% of original volume
- 32. What are the minimum and maximum dwell times for Renalin in reprocessed dialyzers?
 - a. No time limits as long as sterilant is present
 - b. Two days minimum and 30 days maximum
 - c. 14 hours minimum and 11 days maximum
 - d. 11 hours minimum and 14 days maximum
- 33. A blood leak alarm on one of our machines sounds. Where would you obtain a sample from to confirm that there is an actual blood leak?
 - a. From the dialysate outflow line
 - b. From the dialysate inflow line
 - c. From the venous blood line
 - d. From the arterial blood line
- 34. What water test is done at the end of each day?
 - a. % rejection
 - b. total chlorine
 - c. water hardness
 - d. chloramines
- 35. If total chlorine results from the first testing site are above acceptable limits and test results from the secondary site are within acceptable limits, additional testing must be done:
 - a. Every four hours
 - b. Every hour
 - c. Every shift
 - d. Every 30 minutes
- 36. Which of the following symptoms would indicate a need to increase a patient's dry weight?
 - a. Hypotension and cramping
 - b. Muscle weakness and anorexia
 - c. Jugular vein distension and edema
 - d. Shortness of breath and crackles in the lungs



Name:	Date:	
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- 37. Gross blood spills are cleaned up with:
 - a. 1:10 bleach solution
 - b. 1:100 bleach solution
 - c. Soap and water
 - d. Alcohol swabs
- 38. A patient's dry weight is:
 - a. Standard for all patients
 - b. Constant once it is established
 - c. Individualized for each patient
 - d. Established based on patient height
- 39. Causes for pre-dialysis hypertension include all of the following EXCEPT:
 - a. Fluid overload
 - b. Some street drugs
 - c. Nitroglycerin patches
 - d. Non-adherence to medications
- 40. The bruit in an AV fistula or graft is detected by:
 - a. The dialysis machine pressure monitors
 - b. Feeling (palpating) the access
 - c. Listening with a stethoscope
 - d. Taking a blood pressure
- 41. Epogen is given to dialysis patients to increase:
 - a. Serum albumin
 - b. Serum iron levels
 - c. Vitamin D activation
 - d. Red blood cell production
- 42. All of the following statements are true about constant site cannulation EXCEPT:
 - a. It is done on fistulas only
 - b. It requires a physician order
 - c. One teammate should establish the tract
 - d. Sharp or blunt needles may be used after the tract is established
- 43. When cannulating an AV fistula, the angel of needle inserting should be approximately:
 - a. 15 degrees
 - b. 25 degrees
 - c. 45 degrees
 - d. 60 degrees
- 44. Stenosis within the vascular access may lead to:
 - a. Infection
 - b. Infiltration
 - c. Steal syndrome
 - d. Clotting of the access



Name:			Date:
45.	What is	s the usual fluid allowance per day for dialysis patients?	
	a.	72 11001	
		1-1 ½ liters	
		$2-2\frac{1}{2}$ liters	
	d.	There is no set limit	
46.	Which	of the following might be an indication of inadequate dialysis?	
	a.	, , , ,	
	b.	1 1	
		Hemoglobin of 12 g/dL	
	d.	Pericarditis	
47.	Sodium	n modeling helps to move excess body fluid into the:	
	a.	Intravascular space	
	b.	Interstitial space	
	c.	Dialyzer	
	d.	Cells	
48.	Air in t	the extracorporeal circuit could lead to all of the following EXC	EPT:
	a.	Air embolism	
	b.	Clotted dialyzers	
		Dialyzer reactions	
	d.	Disinfectant infusion	
49.	Chlorin	ne exposure in hemodialysis may cause:	
	a.	Hemolysis	
	b.	Pericarditis	
	c.	Hypernatremia	
	d.	Excessive bleeding	
50.	Nocturi	nal hemodialysis treatments typically run:	
	a.	* ** *	
	b.	4-6 hours	
	c.	6-8 hours	

52. Transplanted kidneys are placed:

d. 10-12 hours

51. What is normal serum potassium level?

a. 0.4 - 1.0 mEq/L

b. 2.0 - 3.0 mEq/L

c. 3.5 - 5.5 mEq/L

d. 4.0 - 7.5 mEq/L

- a. Where the old kidney is removed
- b. In the pelvic area
- c. Beside the liver
- d. In the stomach



Name:	Date:
53. What is a common characteristic of acute	renal failure?
a Cuddan angat	

- a. Sudden onset
- b. Not reversible
- c. Lasts 6 months to a year
- d. Leading cause of death in renal patients
- 54. All of the following factors influence the rate of diffusion EXCEPT:
 - a. Solution temperature
 - b. Hydrostatic pressure
 - c. Membrane surface area
 - d. Membrane permeability
- 55. Hyperkalemia can lead to:
 - a. Constipation
 - b. Cardiac arrest
 - c. Excessive thirst
 - d. Abdominal cramping
- 56. What are the typical signs of fluid overload?
 - a. Edema and shortness of breath
 - b. Hypotension and cramping
 - c. Nausea and vomiting
 - d. Numbness and tingling of the lips
- 57. Safe range for conductivity is:
 - a. 12.8 13.6
 - b. 12.5 14.5
 - c. 13.0 15.5
 - d. 13.5 15.0
- 58. In reuse facilities, all of the following are checked before every treatment EXCEPT:
 - a. Conductivity
 - b. Residual bleach
 - c. Residual sterilant
 - d. Pressure holding test
- 59. The purpose of using counter-current flow is to:
 - a. Increase the rate of fluid removal
 - b. Increase the rate of waste removal
 - c. Decrease the amount of dialysate used
 - d. Decrease the surface area of the membrane
- 60. Where do you get the water sample for routine testing for total chlorines?
 - a. After the primary carbon tank
 - b. After the secondary carbon tank
 - c. After the water softener
 - d. After the RO



Name:	Date:

- 61. We dialyze patients at an isolation station if they have:
 - a. Hepatitis B antibodies
 - b. Hepatitis B antigen
 - c. Positive HIV
 - d. MRSA
- 62. Your patient comes in 1 kg below dry weight. What suggestion would you make to your charge nurse regarding the plan for treatment?
 - a. Turn the UF off in the last hour of treatment
 - b. Replace fluid for that treatment
 - c. Set the machine to remove 1 kg
 - d. Increase their dry weight
- 63. Which of the following is true about site preparation for an AV fistula or graft?
 - a. Betadine is only effective when it is wet
 - b. When using alcohol only, it is necessary to clean for 30 seconds
 - c. Clean the access with Betadine and then remove the Betadine with alcohol
 - d. The access should be cleaned using concentric circles from inside to out
- 64. Patients at greatest risk for Dialysis Disequilibrium Syndrome include:
 - a. Those with diabetes
 - b. Fluid overloaded patients
 - c. Those with Polycystic Kidney Disease
 - d. First time patients or those who have skipped treatments
- 65. One of the best measures we can take to prevent accidental blood los for our patients is to:
 - a. Tape blood lines to the chair
 - b. Make sure access is clearly visible
 - c. Give the patient less heparin during treatment
 - d. Document venous pressures hourly during treatment
- 66. What is the principle operation of a Carbon tank?
 - a. Deionization
 - b. Adsorption
 - c. Diffusion
 - d. Ion Exchange
- 67. The patient and caregiver must wear a facemask with a dialysis catheter when initiating and terminating a treatment and when the dressing change is performed.
 - a. True
 - b. False
- 68. The bruit is:
 - a. The sound you hear while listening to the access with a stethoscope
 - b. The vibration feeling you get when palpating the access



Name:	Date:
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- 69. The thrill is:
 - a. The sound you hear while listening to the access with a stethoscope
 - b. The vibration feeling you get when palpating the access
- 70. What is the principle operation of a Water Softener tank?
 - a. Deionization
 - b. Adsorption
 - c. Diffusion
 - d. Ion Exchange
- 71. All of the following are advantages of peritoneal dialysis EXCEPT:
 - a. Storage space needed
 - b. More flexible lifestyle
 - c. Fewer dietary restrictions
 - d. Constant BP and fluid control
- 72. All of the following substances are produced by the kidney EXCEPT:
 - a. Rennin
 - b. Aldosterone
 - c. Erythropoietin
 - d. Calcitriol
- 73. The most likely cause of post-renal failure is:
 - a. Severe dehydration
 - b. Nephrotoxic drug
 - c. Glomerulonephritis
 - d. Benign prostatic hypertrophy
- 74. Uremia may cause which of the following conditions?
 - a. Itching
 - b. Edema (swelling) of the extremities
 - c. Anemia
 - d. All of the above
- 75. Peritoneal dialysis (PD) differs from hemodialysis in which of the following ways?
 - a. PD requires both vascular access and abdominal access
 - b. PD cannot be done at home
 - c. PD access is by an intra-abdominal catheter
 - d. Sterile dialysate is not required for PD
- 76. The main difference between an arteriovenous shunt (AVS) and an arteriovenous fistula (AVF) is an:
 - a. AVS is entirely within the arm
 - b. AVF is entirely within the arm
 - c. AVF is more likely to become clotted or infected
 - d. AVF requires an external tube



Date: _____

77. Which	of the following dialyzers is used currently?
	Kiil
	Flat plate
	Coil
	Hollow tube
78. Which	of the following kidney structures connects with and delivers urine directly to the ureter?
a.	Pelvis
	Calyx
c.	Glomerulus
d.	Cortex
	merular filtration rate is an important index of renal function and in the normal adult is
approxi	
	50 mL/min/1.73 m2
	75 mL/min/1.73 m2
	125 mL/min/1.73 m2
d.	200 mL/min/1.73 m2
80. The cor	aductivity solution once dated and opened has a shelf-life of
	15 Days
b.	14.0 Omhos.
c.	1 Day
	30 Days
81. A fema	le patient's predialysis weight is 149.6 lb (68 kg) and the prescribed target weight is 138.6 lb (63
kg). For	her four-hour treatment, the priming saline amount is 240 ml and the rinseback amount is 200 ml.
	ot allowed any oral fluids during her treatment. The patient's hourly ultrafiltration rate should be
	any mL per hour?
	2720
b.	2040
c.	1360
d.	680
82. A male	patient who has diabetes and receives hemodialysis treatments sometimes drinks juice when his
blood s	agar is low. Which of the following types of juice would be best for this patient, since it is lowest in
potassii	
a.	Prune juice
b.	Grapefruit juice

c. Vegetable juice cocktail (V-8)d. Cranberry juice cocktail



ame:			Date:
83.	weight. extremi a.	Near the end of her treatn ities. Which of these action Discontinue the dialysis	
	c.	Elevate the patient's legs Administer a bolus of no Increase the patient's ult	ormal saline per protocol
84.	medica a. b. c.	tions are sometimes admit tion in this way is: Excessive turbulence of Low blood flow rate Visible blood clots Large volume of medica	
85.	a. b. c.		with the administration of intravenous iron medication is:
86.	a. b. c.	e of standard pH solution of 90 Days 14.0 Omhos. 1 Day 30 Days	once dated and opened has a shelf-life of
87.	a. b. c.	do red needle containers ne Full to the top One half full Three quarters full Once a week	eed to be replaced?
88.	- 95. M	atch the following medica	tions with their function.
	V H V C	pogen ancomycin eparin emplar enofer alcium Carbonate Iannitol	 Vitamin D to prevent bone disease Anticoagulant to prevent blood clotting Phosphate binder Sugar solution that increases BP Salt solution that increases BP Antibiotic to treat infection Iron medication
		ypertonic Saline	8. Hormone to treat anemia



me:			Date:	
96. V	Who is	the most important member of the renal team?		
	a.	Nephrologist, Nurse		
	b.	Nurse, Renal Dietitian, Renal Social Worker		
	c.	Nurse, Patient Care Technician, Reuse Technician		
	d.	All members of the team		
97. (Chlorar	mines are derived from two chemical elements that are		&
	a.	Chloride and Aluminum		
	b.	Chlorine and Ammonia		
	c.	Fluoride and Sodium		
	d.	Nitrates and Mercury		
98. A	Advers	e Occurrence Reports (AOR's) should be completed:		
	a.	No later than at the end of shift when adverse occurrence happen	ned	
	b.	No later than 30 days after the occurrence		
	c.	Within 24 hours of the adverse occurrence		
	d.	Within 72 hours of the adverse occurrence		
99. (Choose	the most appropriate charting example.		
	a.	The exit site is inflamed		
	b.	The patient has an infection		
	c.	The patient is having pyrogenic reaction		
	d.	The exit site is red and tender to touch		
100.	Which	n of the following statements is true about documentation?		
	a.	It is okay to have blank spaces between entries		
	b.	Titles should be included with each signature on the record		

c. It is acceptable practice to share your password with other teammatesd. You should make a note in the record that an AOR has been completed