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37	A	B	C	D	E
38	A	B	C	D	E
39	A	B	C	D	E

PRACTICE QUESTIONS

CA Dialysis Council

HRX6U5TN

CA Hemodialysis Technician Examination

EDITION

Demo

QUESTIONS

9

ISSUED

September 3, 2026

Before you begin

What this is

9 practice questions for CA Dialysis Council **HRX6U5TN**, each with its answer key and an explanation. Answer a question before you read its key — the explanation is worth more once you have committed.

If something looks wrong

Send us three things and we will check it:

- the exam code, **HRX6U5TN**
- the question number
- the email address on your order

Write to **support@mometrix.net**. We reply within one business day.

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QUESTION 1

SINGLE CHOICE

Which type of vascular access is considered the preferred long-term access for hemodialysis because of its lower rate of infection and longer durability?

- ☐ A Tunneled central venous catheter (CVC)
- ☐ B Arteriovenous graft (AVG)
- ☒ C Arteriovenous fistula (AVF)
- ☐ D Non-tunneled femoral catheter

ANSWER C

WHY The arteriovenous fistula (AVF) is the preferred long-term vascular access because it is created from the patient's own native vessels, has the lowest infection rate, the longest patency, and the fewest complications when compared with grafts and catheters. CVCs (A) and femoral catheters (D) carry the highest infection risk, and grafts (B) have higher infection and thrombosis rates than fistulas.

QUESTION 2

SINGLE CHOICE

During dialysis, the patient begins to experience nausea, vomiting, headache, and muscle cramps, and the blood pressure has dropped from 140/80 mmHg to 90/55 mmHg. This presentation is most consistent with which intradialytic complication?

- ☐ A Air embolism
- ☒ B Hypotension
- ☐ C Hypernatremia
- ☐ D Disequilibrium syndrome

ANSWER B

WHY Intradialytic hypotension is the most common complication of hemodialysis and presents with the classic triad of a drop in systolic blood pressure (often >20 mmHg), nausea/vomiting, cramping, and dizziness. Air embolism (A) typically presents with chest pain, dyspnea, and neurologic symptoms. Hypernatremia (C) would not be expected during standard dialysis. Disequilibrium syndrome (D) presents with neurologic symptoms (headache, seizures) usually after rapid initiation of dialysis.

QUESTION 3

SINGLE CHOICE

Before initiating dialysis with a reprocessed (reused) dialyzer, the technician must verify the dialyzer label information matches the patient. Which of the following items is required to be on the dialyzer label?

- ☐ A The patient's insurance identification number
- ☒ B The number of times the dialyzer has been reprocessed
- ☐ C The patient's home address
- ☐ D The name of the manufacturer of the dialyzer membrane only

ANSWER B

WHY Per CMS Conditions for Coverage and AAMI standards, a reused dialyzer must be labeled with the patient's name, the number of times the dialyzer has been reprocessed, and other identifying information such as the date of last reprocessing. The patient's insurance ID (A), home address (C), or only the manufacturer's name (D) are not required on the dialyzer label.

QUESTION 4

SINGLE CHOICE

According to standard hand hygiene guidelines, how long should hand washing with soap and water be performed?

- ☐ A At least 5 seconds
- ☐ B At least 10 seconds
- ☒ C At least 20 seconds
- ☐ D At least 60 seconds

ANSWER C

WHY CDC and WHO hand hygiene guidelines recommend washing hands with soap and water for at least 20 seconds, covering all surfaces of the hands and fingers. 5 or 10 seconds is inadequate, and 60 seconds is longer than the standard recommendation for routine hand washing.

QUESTION 5

SINGLE CHOICE

A patient reports new-onset tingling around the mouth and in the fingers during the second hour of dialysis. Which electrolyte imbalance is most likely responsible for these symptoms?

- ☐ A Hyperkalemia
- ☐ B Hypermagnesemia
- ☒ C Hypocalcemia
- ☐ D Hypernatremia

ANSWER C

WHY Perioral tingling (paresthesias) and tingling in the fingers are classic signs of hypocalcemia. In dialysis, hypocalcemia can be precipitated by rapid drops in serum ionized calcium, especially when the dialysate calcium concentration is low. Hyperkalemia (A) typically presents with muscle weakness and cardiac arrhythmias. Hypermagnesemia (B) presents with decreased reflexes and lethargy. Hypernatremia (D) presents with thirst, restlessness, and altered mental status.

QUESTION 6

SINGLE CHOICE

Which component of the hemodialysis water treatment system is responsible for removing chlorine and chloramines from the incoming water supply?

- ☐ A Reverse osmosis (RO) system
- ☒ B Carbon (charcoal) filter
- ☐ C Softener
- ☐ D Deionizer

ANSWER B

WHY Carbon (activated charcoal) filters are specifically used to remove chlorine and chloramines from feed water, which can damage the RO membranes and are toxic to dialysis patients. Softeners (C) remove calcium and magnesium. Reverse osmosis (A) removes dissolved solutes. Deionizers (D) remove ions as a final polish.

QUESTION 7

SINGLE CHOICE

During hemodialysis, the movement of small solutes such as urea and creatinine from the blood into the dialysate across the semipermeable membrane is best described by which principle?

- ☐ A Osmosis
- ☒ B Diffusion
- ☐ C Active transport
- ☐ D Ultrafiltration

ANSWER B

WHY Diffusion is the movement of solutes across a semipermeable membrane from an area of higher concentration to an area of lower concentration; this is how urea and creatinine are removed during dialysis. Osmosis (A) refers to water movement. Active transport (C) requires energy and is not the mechanism in dialysis. Ultrafiltration (D) is the movement of water driven by a pressure gradient.

QUESTION 8

SINGLE CHOICE

Which of the following is the most important action a hemodialysis technician can take to prevent hepatitis B virus (HBV) transmission among dialysis patients?

- ☐ A Sharing dialyzers between two HBV-immune patients
- ☒ B Performing hand hygiene and changing gloves between patients and stations
- ☐ C Dialyzing all HBV-positive patients on the same machine used for HBV-negative patients without cleaning
- ☐ D Using a common medication cart for all patients without cleaning it between uses

ANSWER B

WHY Strict hand hygiene and glove changing between patients and stations is the single most important measure to prevent HBV (and other bloodborne pathogen) transmission in the dialysis unit. Dialyzers must never be shared between patients (A is wrong). Dedicated machines should be used for HBV-positive patients, and the machine must be thoroughly cleaned and disinfected before use on HBV-negative patients (C is wrong). Medication carts and supplies must be dedicated to a single patient or cleaned between uses (D is wrong).

QUESTION 9

SINGLE CHOICE

A patient becomes acutely short of breath during dialysis, with frothy pink sputum and a drop in oxygen saturation. Which complication is the patient most likely experiencing?

- ☐ A Air embolism
- ☐ B Pulmonary embolism
- ☒ C Pulmonary edema / fluid overload
- ☐ D Hemolysis

ANSWER C

WHY Frothy pink-tinged sputum, dyspnea, and hypoxemia during dialysis are classic signs of pulmonary edema caused by fluid overload or rapid fluid removal beyond the patient's tolerance. Air embolism typically causes chest pain, coughing, and neurologic changes; pulmonary embolism causes sudden pleuritic chest pain and hypoxia without frothy sputum; hemolysis causes back pain, dark/red port blood, and dyspnea but not frothy sputum.