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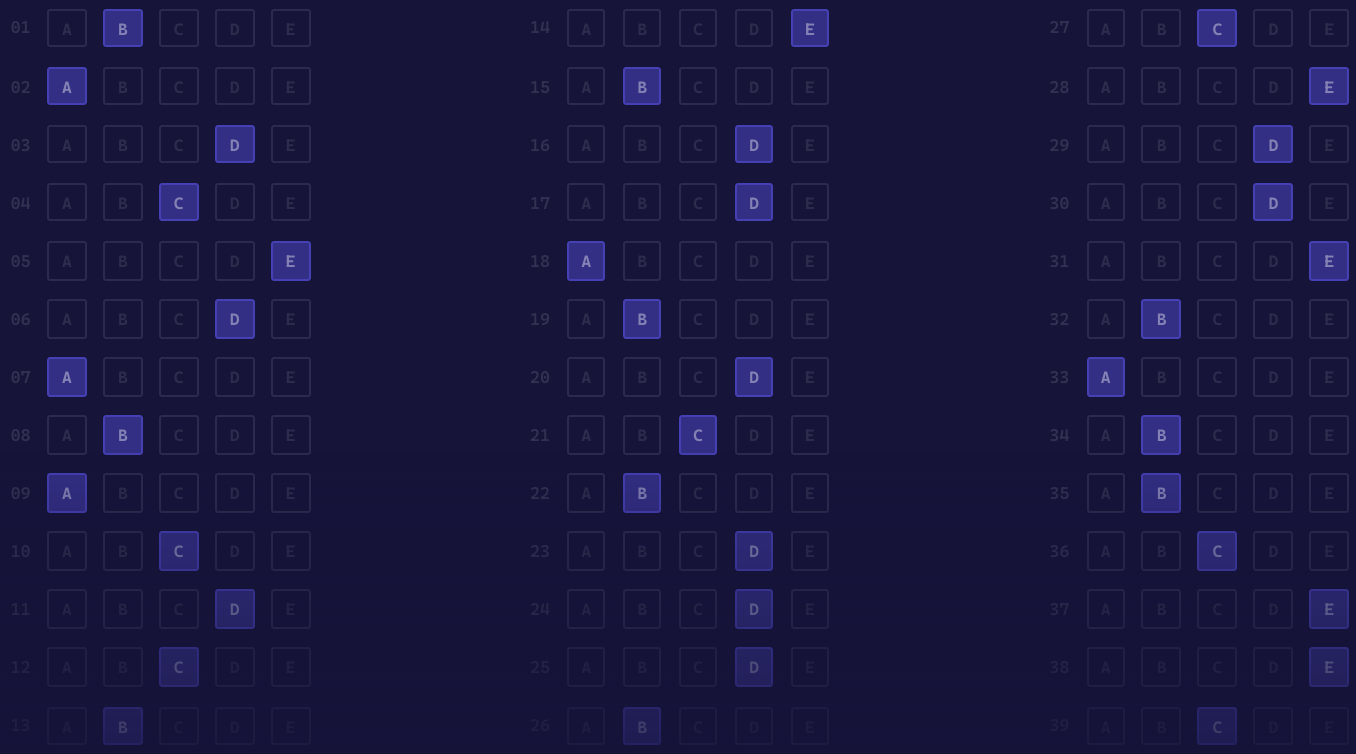

PRACTICE QUESTIONS

Centre for Nursing Education and Testing (CNET)

X65XZYDJ

NNCC Certified Clinical Hemodialysis Technician (CCHT) Examination - 9317

EDITION	QUESTIONS	FORMAT
Demo	9	Limited Edition PDF

Before you begin

What this is

9 practice questions for Centre for Nursing Education and Testing (CNET) `X65XZYDJ`, 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, `X65XZYDJ`
- 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 MULTIPLE CHOICE

Which of the following substances are typically removed from the blood during a routine hemodialysis treatment? (Choose two.)

- **A** **Urea**
- **B** Glucose
- **C** **Creatinine**
- **D** Insulin
- **E** Albumin

ANSWER **A** · **C**

WHY Hemodialysis removes small water-soluble uremic solutes such as urea and creatinine from the blood. Glucose and insulin are not effectively cleared during routine dialysis, and albumin is a large protein that is retained by the dialyzer membrane.

QUESTION 2 MULTIPLE CHOICE

Which of the following actions by the dialysis technician are required components of standard precautions in the dialysis unit? (Choose two.)

- **A** **Wearing disposable gloves when touching the patient's vascular access**
- **B** Recapping used needles before disposal
- **C** **B. Using a clean, dry, dedicated area for supplies that will be on top of the machine**
- **D** C. Cleaning the external surface of the dialysis machine between patients per facility protocol
- **E** D. Reusing dialyzers labeled for reuse without following reprocessing protocol

ANSWER **A** · **C**

WHY Standard precautions require gloves whenever contact with blood or the vascular access is anticipated, and facilities require cleaning the external surfaces of the dialysis machine between patients. The other listed actions are prohibited or not required.

QUESTION 3 SINGLE CHOICE

A hemodialysis technician is preparing the dialyzer for a treatment. Which component of the dialyzer is the semipermeable membrane that allows solutes and water to pass while retaining larger molecules?

A The header

B The potting compound

C The hollow fibers

D The dialysate port

ANSWER C

WHY The hollow fibers inside the dialyzer are made of a semipermeable membrane. Diffusion of solutes and ultrafiltration of water occur across the walls of these fibers, while larger molecules such as proteins are retained.

QUESTION 4 SINGLE CHOICE

Which vascular access type is preferred for long-term hemodialysis because of its lower complication rate and longer patency compared with grafts and catheters?

A Arteriovenous fistula (AVF)

B Tunneled central venous catheter

C Non-tunneled femoral catheter

D Straight arteriovenous graft (AVG)

ANSWER A

WHY An arteriovenous fistula is the preferred permanent vascular access for long-term hemodialysis. When properly matured and well cared for, an AVF provides superior patency and lower infection and thrombosis rates than grafts or catheters.

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QUESTION 5 SINGLE CHOICE

During the first 15 minutes of a patient's hemodialysis treatment, the patient reports nausea, mild headache, and feels cold. The technician notes a drop in blood pressure. What is the most appropriate first action?

A Administer a prescribed vasoconstrictor intramuscularly

B **Stop ultrafiltration and place the patient in a supine, legs-elevated position**

C Increase the dialysate temperature to warm the patient

D Saline rinse back and end the treatment immediately

ANSWER **B**

WHY These signs suggest intradialytic hypotension, the most common complication during the early phase of treatment. The appropriate first response is to stop ultrafiltration and trendelenburg-position the patient; saline rinse-back is reserved for persistent or severe hypotension after this initial maneuver.

QUESTION 6 SINGLE CHOICE

Which laboratory value is most commonly used in combination with treatment time and dialyzer clearance to calculate hemodialysis adequacy as Kt/V?

A **Pre-dialysis and post-dialysis blood urea nitrogen (BUN)**

B Serum potassium

C Serum creatinine alone

D Hematocrit

ANSWER **A**

WHY Single-pool Kt/V is calculated using pre- and post-dialysis BUN values together with treatment duration and dialyzer clearance. The pre- and post-BUN values reflect the reduction in urea over the treatment.

QUESTION 7 SINGLE CHOICE

A dialysate solution contains sodium 138 mEq/L, potassium 2.0 mEq/L, calcium 2.5 mEq/L, magnesium 1.0 mEq/L, chloride 105 mEq/L, bicarbonate 35 mEq/L, and dextrose 100 mg/dL. What is the role of the dextrose in this dialysate?

A **To provide energy and reduce the risk of intradialytic hypoglycemia**

B To increase the osmolality of the dialysate for ultrafiltration

C To bind free calcium in the bath

D To act as a buffer against metabolic alkalosis

ANSWER **A**

WHY A small amount of dextrose (typically 100–200 mg/dL) is included in the dialysate to provide caloric substrate and to help prevent intradialytic hypoglycemia. It does not significantly drive ultrafiltration and is not a buffer or a calcium binder.

QUESTION 8 SINGLE CHOICE

A loading dose of heparin is given at the start of a routine hemodialysis treatment to prevent clotting in the extracorporeal circuit. The loading dose is most commonly administered into which port of the extracorporeal circuit?

A The venous pressure port

B The effluent dialysate port

C **The arterial bloodline (pre-pump) prior to connecting to the patient**

D The dialyzer dialysate inlet

ANSWER **C**

WHY The heparin loading dose is typically administered into the arterial bloodline, often before the blood pump, so the anticoagulant mixes with the blood and is delivered to the dialyzer to prevent clotting in the circuit and dialyzer fibers.

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QUESTION 9 SINGLE CHOICE

Why is the use of deionization and reverse osmosis important in the production of water used to make dialysate?

A **To remove microorganisms and chemical contaminants that could harm the patient**

B To increase the conductivity of the source water

C To convert source water into a sterile solution suitable for injection

D To replace the function of the dialyzer membrane

ANSWER **A**

WHY Dialysis patients are exposed to large volumes of water across the dialyzer membrane, so contaminants such as bacteria, endotoxin, chlorine, chloramines, and dissolved metals must be removed. Reverse osmosis and deionization reduce chemical and microbial contaminants to levels safe for hemodialysis.

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