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**Question: 1053**

Which of the following is a fat-soluble vitamin that acts as an antioxidant, protecting cells from damage caused by free radicals?

- A. Vitamin A
- B. Vitamin E
- C. Vitamin C
- D. Vitamin K

Answer: B

Explanation: Vitamin E is a fat-soluble vitamin that acts as an antioxidant, protecting cells from damage caused by free radicals. It helps maintain the integrity of cell membranes and is involved in immune function, DNA repair, and other vital processes.

**Question: 1054**

A patient with celiac disease is advised to follow a gluten-free diet. Which of the following grains is safe for consumption?

- A. Wheat
- B. Barley
- C. Rye
- D. Quinoa

Answer: D

Explanation: Quinoa is safe for consumption in a gluten-free diet for individuals with celiac disease. It is a gluten-free grain that can be used as a substitute for wheat, barley, and rye, which contain gluten.

**Question: 1055**

When examining the ethical considerations in nutrition support therapy, which scenario best illustrates a conflict between beneficence and autonomy?

- A. A patient declines enteral nutrition despite a recommendation from the healthcare team.
- B. A patient receives parenteral nutrition without informed consent.
- C. A healthcare provider prescribes a nutrition regimen based on personal bias.
- D. A family insists on aggressive nutrition support for a terminally ill patient.

Answer: D

Explanation: This scenario illustrates a conflict between beneficence (acting in the patient's best interest) and autonomy (respecting the patient's wishes), especially when the patient's quality of life is at stake.

**Question: 1056**

During discharge planning, a nutrition support clinician is preparing a patient for home enteral nutrition. What is the most crucial aspect of education to ensure the patient can manage their therapy safely?

- A. Recognizing signs of potential complications
- B. Importance of maintaining proper hydration
- C. Techniques for administering feeds
- D. Understanding the nutritional content of their formula

Answer: A

Explanation: Educating the patient on recognizing signs of potential complications ensures they can seek timely intervention and manage their home enteral nutrition safely.

**Question: 1057**

In evaluating a patient's dietary intake, which assessment tool is most effective for identifying micronutrient deficiencies over a long-term period?

- A. 24-hour dietary recall
- B. Food frequency questionnaire
- C. Diet history
- D. Direct observation

Answer: B

Explanation: A food frequency questionnaire provides a broader view of long-term dietary patterns and potential micronutrient deficiencies compared to short-term recalls.

**Question: 1058**

Which of the following best describes the role of ethics in the provision of nutrition support therapy?

- A. Ethics is irrelevant in clinical practice as all decisions are based on science
- B. Ethical considerations guide the decision-making process to balance patient needs and clinical judgment
- C. Ethics only applies to end-of-life decisions in nutrition support
- D. Ethical principles can be ignored if they conflict with clinical protocols

Answer: B

Explanation: Ethical considerations are integral to guiding decision-making in nutrition support therapy, ensuring that patient needs are balanced with clinical judgment.

**Question: 1059**

You are tasked with updating the nutrition support guidelines for patients with liver disease. What should be the primary focus when revising these guidelines based on emerging evidence?

- A. Ensuring that the guidelines are strictly followed without exception
- B. Avoiding changes to prevent confusion among staff
- C. Limiting the guidelines to only the most severe cases of liver disease
- D. Integrating new research findings while considering individual patient needs

Answer: D

Explanation: Integrating new research while considering individual patient needs allows for a more personalized and effective approach to nutrition support.

**Question: 1060**

Which of the following is a potential complication of excessive protein intake in patients with compromised kidney function?

- A. Hypotension
- B. Hyponatremia
- C. Worsening of renal function
- D. Hypercalcemia

Answer: C

Explanation: Worsening of renal function is a potential complication of excessive protein intake in patients with compromised kidney function. High protein intake can increase the workload on the kidneys and potentially worsen renal function in individuals with existing kidney disease. Protein intake needs to be carefully monitored and tailored to the individual's renal function to prevent further kidney damage.

**Question: 1061**

In a scenario where a patient on parenteral nutrition presents with elevated liver enzymes, what adjustment in the nutritional support plan might be necessary to improve liver function and tolerance?

- A. Increase lipid infusion rate
- B. Decrease carbohydrate concentration
- C. Change to a higher-protein formula
- D. Add supplemental vitamins

Answer: B

Explanation: Decreasing carbohydrate concentration may help reduce the risk of hepatic steatosis and improve liver function in patients receiving long-term parenteral nutrition.

**Question: 1062**

Which of the following is an appropriate indication for the use of a peripherally inserted central catheter (PICC) for nutrition support?

- A. Short-term nutrition support (<2 weeks)
- B. Patients with severe malabsorption
- C. Patients with a history of central line-associated bloodstream infections (CLABSIs)
- D. Patients with adequate peripheral venous access

Answer: B

Explanation: A peripherally inserted central catheter (PICC) is commonly used for long-term nutrition support in patients with severe malabsorption. It provides a more secure and stable access point for delivering parenteral nutrition compared to peripheral venous access. Short-term nutrition support can be achieved through peripheral venous access, and patients with a history of central line-associated bloodstream infections (CLABSIs) may require alternative access options.

**Question: 1063**

A patient with a history of diabetes and renal failure is receiving nutritional support. Which electrolyte imbalance should be monitored closely in this scenario?

- A. Hypocalcemia
- B. Hyperkalemia
- C. Hyponatremia
- D. Hypomagnesemia

Answer: B

Explanation: Patients with renal failure are at high risk for hyperkalemia due to impaired potassium excretion, particularly when receiving nutrition support that may include potassium.

**Question: 1064**

Which of the following conditions is associated with increased protein needs?

- A. Hypothyroidism
- B. Type 2 diabetes mellitus
- C. Chronic kidney disease
- D. Iron deficiency anemia

Answer: C

Explanation: Chronic kidney disease is associated with increased protein needs due to the loss of protein through urine and increased protein breakdown. Adequate protein intake is essential to prevent malnutrition and maintain muscle mass in individuals with kidney disease.

**Question: 1065**

A 75-year-old male with end-stage renal disease is on hemodialysis and presents with symptoms of malnutrition. What is the recommended protein intake for this patient to meet his nutritional needs while preventing complications?

- A. 0.6 g protein/kg/day.
- B. 2.0 g protein/kg/day.
- C. 1.5 g protein/kg/day.
- D. 1.2 g protein/kg/day.

Answer: D

Explanation: For patients with end-stage renal disease on hemodialysis, a protein intake of 1.2 g protein/kg/day is recommended to compensate for protein losses during dialysis while maintaining nutritional status.

**Question: 1066**

During a nutritional assessment, a patient reports significant financial difficulties affecting their access to food and healthcare. Which of the following factors should be prioritized in the nutrition support plan to improve the patient's overall well-being?

- A. Initiating oral nutritional supplements
- B. Implementing a high-protein diet
- C. Focusing solely on macronutrient intake
- D. Referring the patient to a social worker

Answer: D

Explanation: Addressing socio-economic factors is essential for improving access to food and healthcare. A referral to a social worker can help the patient navigate resources available to them.

**Question: 1067**

Which of the following is a potential complication of untreated hypothyroidism?

- A. Depression

- B. Weight loss
- C. Hyperactivity
- D. Heat intolerance

Answer: A

Explanation: Depression is a potential complication of untreated hypothyroidism. Hypothyroidism is a condition characterized by an underactive thyroid gland, which leads to a decrease in the production of thyroid hormones. Thyroid hormones play a role in regulating mood, and low levels of these hormones can contribute to symptoms of depression. Hyperactivity (option A) is more commonly associated with hyperthyroidism (overactive thyroid). Weight loss (option B) is not typically seen in hypothyroidism; instead, weight gain is a common symptom. Heat intolerance (option D) is associated with hyperthyroidism. Therefore, option C is the correct answer.

**Question: 1068**

A patient on parenteral nutrition develops new-onset hypertriglyceridemia. Which of the following changes would be most appropriate to manage this complication while continuing nutritional support?

- A. Increase the rate of dextrose infusion
- B. Reduce the lipid infusion rate
- C. Switch to a higher-calorie formula
- D. Initiate insulin therapy

Answer: B

Explanation: Reducing the lipid infusion rate directly addresses hypertriglyceridemia while allowing the continuation of nutritional support through other macronutrients.

**Question: 1069**

In a critically ill patient requiring nutrition support therapy, what is the most appropriate initial approach to determining the feeding route?

- A. Initiate parenteral nutrition to ensure nutrient delivery
- B. Use enteral nutrition exclusively, regardless of the patient's condition
- C. Begin with oral nutrition to maintain normalcy
- D. Assess the patient's gastrointestinal function before deciding the route

Answer: D

Explanation: Assessing gastrointestinal function is critical in determining the most appropriate feeding route, ensuring that the chosen method is safe and effective for the patient's condition.

**Question: 1070**

When reviewing a patient's current clinical status, which laboratory value would provide the most direct

insight into their protein status, particularly in the context of malnutrition?

- A. Blood urea nitrogen (BUN)
- B. Hemoglobin
- C. Serum albumin
- D. Serum electrolytes

Answer: C

Explanation: Serum albumin is a key marker for protein status and nutritional adequacy. Low levels can indicate malnutrition and are often seen in patients with chronic diseases and those undergoing inflammation.

**Question: 1071**

A patient on long-term TPN suddenly presents with chills and fever. What is the most appropriate immediate course of action?

- A. Increase the TPN infusion rate
- B. Switch to enteral nutrition
- C. Administer antipyretics and continue TPN
- D. Obtain blood cultures and discontinue TPN

Answer: D

Explanation: Obtaining blood cultures and discontinuing TPN is critical to rule out catheter-related infections, which are a common risk associated with long-term TPN use.

**Question: 1072**

Which of the following is a common symptom of vitamin B12 deficiency?

- A. Fatigue
- B. Night blindness
- C. Rickets
- D. Scurvy

Answer: A

Explanation: A common symptom of vitamin B12 deficiency is fatigue. Vitamin B12 plays a crucial role in the production of red blood cells and the maintenance of nerve cells. When levels of vitamin B12 are low, it can lead to a condition called pernicious anemia, which is characterized by fatigue, weakness, and shortness of breath. Night blindness is associated with vitamin A deficiency, rickets is associated with vitamin D deficiency, and scurvy is associated with vitamin C deficiency. Therefore, option A is the correct answer.

**Question: 1073**

A patient in the ICU has been on enteral nutrition for three days but is not meeting their caloric goals due to gastrointestinal intolerance. Their current prescription is 1500 kcal/day. What would be the most effective strategy to optimize their nutrition support therapy?

- A. Switch to total parenteral nutrition (TPN)
- B. Increase the caloric density of the enteral formula
- C. Administer medications to enhance gastric motility
- D. Reduce the enteral feeding rate

Answer: B

Explanation: Increasing the caloric density allows the patient to meet nutritional requirements without increasing the volume, which can help reduce gastrointestinal intolerance.

**Question: 1074**

A patient on long-term parenteral nutrition has developed metabolic bone disease. Which modification should be made to their nutrition support therapy to address this complication?

- A. Limit phosphorus intake to prevent further bone loss
- B. Increase the calcium and vitamin D content in their parenteral solution
- C. Switch to a higher-calorie parenteral formula
- D. Reduce the rate of infusion to enhance tolerance

Answer: B

Explanation: Increasing calcium and vitamin D in the parenteral solution is essential to help mitigate the effects of metabolic bone disease and promote bone health.

**Question: 1075**

In the context of nutrition support therapy, which of the following represents a violation of ethical principles when making decisions about patient care?

- A. Utilizing a standardized protocol for all patients
- B. Failing to consider the patient's cultural beliefs in treatment decisions
- C. Collaborating with the healthcare team to develop a care plan
- D. Educating patients about their nutrition options

Answer: B

Explanation: Failing to consider a patient's cultural beliefs violates ethical principles of respect for autonomy and beneficence, as it disregards the patient's values and preferences in care decisions.

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