

Med surg 2 final study guide

1. A nurse is concerned that a preoperative client has a great deal of anxiety about the upcoming procedure. What action by the nurse is best? -ask the client to describe current feelings
2. A preoperative nurse is reviewing morning laboratory values on four clients waiting for surgery, which result warrants immediate communication with the surgical team? -potassium 2.9 mEq/L
3. A nurse is caring for a client who is experiencing moderate metabolic alkalosis. Which action should the nurse take? -teach the client fall prevention measures
4. Which newly written prescription does the nurse administer first? -oral potassium chloride to a client whose serum potassium is 3 mEq/L
5. A postoperative client has an abdominal drain. What assessment by the nurse indicates that goals for the priority client problems related to the drain are being met? -there is no redness, warmth, or drainage at the insertion site
6. A nurse evaluates the following arterial blood gas values in a client: pH 7.48, PaO₂ 98mm Hg, PaCO₂ 28 mm Hg, and HCO₃ -22 mEq/L, which client condition should the nurse correlate with these results? -anxiety induced hyperventilation
7. An older adult client is admitted with dehydration. Which nursing assessment data identify that the client is at risk for falling? -orthostatic blood pressure changes
8. When caring for a client with a pulse oximetry level of 89%, which action does the nurse take first? -apply oxygen as prescribed
9. A preoperative client smokes a pack of cigarettes a day. What is the nurse's teaching priority for the best physical outcomes? -teach the importance of incentive spirometry
10. The charge nurse on a medical surgical unit is completing assignments for the day shift. Which client is assigned to the LPN/LVN? -a 76 year old with poor skin turgor who has a serum osmolality of 300 mOsm/L
11. A nurse is assessing clients for fluid and electrolyte imbalances. Which client should the nurse assess first for potential hyponatremia? - a 34-year-old on NPO status who is receiving intravenous D5W
12. During a preoperative assessment, which statement by a client requires further investigation by the nurse to assess surgical risks? - "I had a heart attack 4 months ago"
13. In going through the preoperative checklist, the nurse notices that the client's armband does not match the handwritten name on the informed consent, but it matches the stamped name. What does the nurse do first? -talk to the operating team
14. A 90-year-old client with hypermagnesemia is seen in the emergency department (ED). The ED nurse prepares the client for admission to which inpatient unit? -telemetry/cardiac stepdown
15. After teaching a client to increase dietary potassium intake, a nurse assesses the client's understanding. Which dietary meal selection indicates the client correctly understands the teaching? -sausage, one slice of whole wheat toast, half cup of raisins and a glass of milk
16. After teaching a client who is prescribed a restricted sodium diet, a nurse assesses the client's understanding. Which food choice for lunch indicates the client correctly understood the teaching? -grilled chicken breast with glazed carrots
17. A nurse is caring for a client who is experiencing excessive diarrhea. The client's arterial blood gas values are pH 7.28, PaO₂ 45 mm Hg, and HCO₃ -16 mEq/L. Which provider order should the nurse expect to receive? - sodium bicarbonate 100 mEq/L diluted in 1 L of D5W

18. A nurse assesses a client who is experiencing an acid-base imbalance. The client's arterial blood gas values are pH 7.34, PaO₂ 88 mm Hg, PaCO₂ 38 mm Hg, and HCO₃⁻ 19 mEq/L. which assessment should the nurse perform first? -cardiac rate and rhythm
19. An inpatient nurse brings an informed consent form to a client for an operation scheduled for tomorrow. The client asks about possible complications from the operation. What response by the nurse is best? -do not have the client sign the consent and call the surgeon
20. Which electrolyte laboratory result does the nurse report immediately to the anesthesiologist? -creatinine 1.9 mEq/L
21. The nurse is instructing a client who is being discharged with a diagnosis of congestive heart failure (CHF). Which client statement indicates a correct understanding of CHF? -"weighing myself daily can reveal increased fluid retention."
22. A nurse is caring for an older adult client who is admitted with moderate dehydration. Which intervention should the nurse implement to prevent injury while in the hospital? -dangle the client on the bedside before ambulating
23. A nurse is giving a preoperative client a dose of ranitidine (Zantac). The client asks why the nurse is giving this drug when the client has no history of ulcers. What response by the nurse is best? - "it helps prevent ulcers from the stress of surgery"
24. A nurse is caring for a client who has the following arterial blood values: pH 7.12, PaO₂ 56 mm Hg, PaCO₂ 65 mm Hg, and HCO₃⁻ 22 mEq/L. which clinical situation should the nurse correlate with these values? -bronchial obstruction related to aspiration of a hot dog
25. A nurse is assessing a client who has acute pancreatitis and is at risk for an acid-base imbalance. For which manifestation of this acid-base imbalance should the nurse assess? -kussmaul respirations
26. To decrease the risk of acid-base imbalance, what goal must the client with diabetes mellitus strive for? -Maintaining blood glucose level within normal limits
27. A nurse assesses a client who is prescribed a medication that inhibits angiotensin I from converting into angiotensin II(Angiotensin-converting enzyme[ACE] inhibitor). For which expected therapeutic effect should the nurse assess? -blood pressure decreases from 180/72 mm Hg to 144/50 mm Hg
28. The nurse is teaching a group of unlicensed assistive personnel (UAP) about fluid intake principles for older adults. What does the nurse tell them? -"offer fluids that they prefer frequently and on a regular schedule"
29. A nurse cares for a client who has a serum potassium of 7.5 mEq/L and is exhibiting cardiovascular changes. Which prescription should the nurse implement first? -prepare to administer dextrose 20% and 10 units of regular insulin IV push
30. A 77-year-old woman is brought to the emergency department by her family after she has had diarrhea for 3 days. The family tells the nurse that she has not been eating or drinking well, but that she has been taking her diuretics for congestive heart failure. Her laboratory results include a potassium level of 7.0 mEq/L. What is the primary goal of drug therapy for this client? -Restoring fluid balance by controlling the causes of dehydration
31. A nurse evaluates a client's arterial blood gas values (ABGs): pH 7.30, PaO₂ 86 mm hg, PaCO₂ 55 mm Hg, and HCO₃⁻ 22 mEq/L. which intervention should the nurse implement first? -assess the airway
32. A 70-year-old woman is admitted to the hospital with heart failure, shortness of breath, and 3+ pitting edema in her lower extremities. Her medications are furosemide (Lasix),

digoxin (Lanoxin), and an angiotensin-converting enzyme inhibitor (Lotensin). She states that she stopped taking her Lasix because she did not think that it was helping her heart failure. Her health care provider orders furosemide (Lasix) 5 mg IV push. Ten hours after receiving the Lasix, the client's potassium (K+) level is 2.5 mEq/L. Knowing all of the client's medications, what problem does the nurse anticipate in this client? -clinical manifestations of digoxin toxicity

33. A nurse is evaluating a client who is being treated for dehydration. Which assessment result should the nurse correlate with a therapeutic response to the treatment plan? -decreased orthostatic light-headedness and dizziness
34. A nurse teaches a client who is at risk for mild hypernatremia. Which statement should the nurse include in this client's teaching? -"read food labels to determine sodium content."
35. A client has been given hydroxyzine (Atarax) in the preoperative holding area. What action by the nurse is most important for this client? -raise the siderails on the bed
36. The nurse is planning care for a client with hypocalcemia. Which nursing action is appropriate to delegate to unlicensed assistive personnel (UAP)? -transferring the client from the bed to the stretcher using a lift sheet
37. A client is being prepared for gastrointestinal surgery and undergoes a bowel preparation. Why is this preoperative procedure done? -Reduce the number of intestinal bacteria
38. A nurse is assessing clients on a medical-surgical unit. Which adult client should the nurse identify as being at greatest risk for insensible water loss? -anxious client who has tachypnea
39. The perioperative nurse manager and the postoperative unit manager are concerned about the increasing number of surgical infections in their hospital. What action by the managers is best? -audit charts to see if the surgical care improvement project (SCIP) outcomes were met
40. The RN is caring for a client admitted with dehydration who requires a blood transfusion. Which nursing action does the RN delegate to unlicensed assistive personnel (UAP)? -Obtaining baseline vital signs before blood administration
41. Which acid-base disturbance does the nurse anticipate the client with morbid obesity may develop? -respiratory acidosis
42. Colostomy surgery is categorized as what type of surgery? -palliative
43. A client who collapsed during dinner in a restraint arrives in the emergency department. The client is going to surgery to repair an abdominal aortic aneurysm. What medication does the nurse prepare to administer as a priority for this client? -metoclopramide (Reglan)
44. A preoperative nurse is assessing a client prior to surgery. Which information would be most important for the nurse to relay to the surgical team? -use of multiple herbs and supplements
45. A nurse assesses a client who is prescribed furosemide (Lasix) for hypertension. For which acid-base imbalance should the nurse assess to prevent complications of this therapy? -metabolic alkalosis
46. A student is caring for clients in the preoperative area. The nurse contacts the surgeon about a client whose heart rate is 120 beats/min. After consulting with the surgeon, the nurse administers a beta blocker to the client. The student asks why this was needed. What response by the nurse is best? - "a rapid heart rate requires more effort by the heart."
47. Which of these clients would be appropriate to assign to the new nurse working on the unit? -A client with emphysema and cellulitis with a PaCO₂ level of 58 mm Hg

48. A nurse is caring for a client who has the following laboratory results: potassium 3.4 mEq/L, magnesium 1.8 mEq/L, calcium 8.5 mEq/L, sodium 144 mEq/L. Which assessment should the nurse complete first? -depth of respirations
49. The nurse is instructing a client about the use of anti embolism stockings. Which statement by the client indicates the need for further teaching? -"These stockings will prevent blood clots."
50. After receiving change-of-shift report, which client does the RN assess first? -A 46-year-old receiving IV diuretics whose BP is 95/52 mmHg
51. A nurse is assessing a client with hypokalemia, and notes that the client's handgrip strength has diminished since the previous assessment 1 hour ago. Which action should the nurse take first? -assess the client's respiratory rate rhythm and depth
52. A nurse is caring for a client who has a serum calcium level of 14 mg/dL. Which provider order should the nurse implement first? -connect the client to a cardiac monitor
53. A nurse assesses a client in the preoperative holding area and finds brittle nails and hair, dry skin turgor, and muscle wasting. What action by the nurse is best? -consult the surgeon about a postoperative dietitian referral
54. A client has a great deal of pain when coughing and deep breathing after abdominal surgery despite having pain medication. What action by the nurse is best? -demonstrate how to splint the incision
55. A nurse is assessing clients on a medical-surgical unit. Which client is at risk for hypokalemia? -client with pancreatitis who has continuous nasogastric suctioning
56. As adults age, which common physiologic change is likely to alter their hydration status? -decreased muscle mass
57. The nurse is assessing a client with hyponatremia. Which finding requires immediate action? -muscular weakness
58. The nurse is educating a client who is about to undergo cardiac surgery with general anesthesia. Which statement by the client indicates the need for further instruction? -"pain medication will take my pain away."
59. After providing discharge teaching, a nurse assesses the client's understanding regarding increased risk for metabolic alkalosis. Which statement indicates the client needs additional teaching? - "I'll take sodium bicarbonate after every meal to prevent heartburn."
60. After teaching a client who was malnourished and is being discharged, a nurse assesses the client's understanding. Which statement indicates the client correctly understood teaching to decrease risk for the development of metabolic acidosis? -"I will eat three well-balanced meals and a snack daily."
61. Which action should the nurse take first for the client who is admitted to the emergency department (ED) with a panic attack and whose blood gases indicate respiratory alkalosis? -encourage the client to take slow deep breaths
62. The nurse is caring for a client with hypoxemia and metabolic acidosis. Which of these tasks can be delegated to the nursing assistant who is helping with the client's care? -Apply the pulse oximeter for continuous readings.
63. A client is admitted to the nursing unit with a diagnosis of hypokalemia. Which assessment does the nurse complete first? -obtaining a pulse oximetry reading
64. A client waiting for surgery is very anxious. What intervention can the nurse delegate to the unlicensed assistive personnel (UAP)? -give the client a back rub
65. An older client's adult child tells the nurse that the client does not want life support. What does the nurse do first? - talk to the client

66. An unidentified client from the emergency department requires immediate surgery, but he is not conscious, and no one is with him. What must the nurse, who is verifying the informed consent, do? -Ensure written consultation of two noninvolved physicians.
67. Which nursing intervention takes priority for a client admitted with severe metabolic acidosis? -initiate cardiac monitoring
68. A 68-year-old man is admitted to the hospital with dehydration. He has a history of atrial fibrillation, congestive heart failure, and hypertension. His current medications are digoxin (Lanoxin), chlorothiazide (Diuril), and potassium supplements. He tells a nurse that he has had flu-like symptoms for the past week and has been unable to drink for the past 48 hours. The nurse starts the client's IV and receives laboratory results, which include a potassium level of 2.7 mEq/L. The physician orders an IV potassium supplement. How does the nurse administer this medication? -Added to an IV, not to exceed 20 mEq/hr
69. The nurse teaches a morbidly obese client who has chosen gastric bypass surgery to promote weight loss that he will need to perform monitoring to detect what disturbance consistent with rapid weight loss associated with this procedure? -ketosis
70. When caring for a group of clients at risk for respiratory acidosis, the nurse identifies which person as at highest risk? -clients who smoke cigarettes
71. The nurse instructs an older adult client to increase intake of dietary potassium when the client is prescribed which classification of drugs? -high ceiling loop diuretics
72. The RN is caring for a client who is severely dehydrated. Which nursing action can be delegated to the unlicensed assistive personnel (UAP)? -providing oral care every 1 to 2 hours
73. A client in the preoperative holding room has received sedation and now needs to urinate. What action by the nurse is best? -give the client a bedpan or urinal to use
74. A client with mild hypokalemia caused by diuretic use is discharged home. The home health nurse delegates which of these interventions to the home health aide? -Measurement of client's urine output
75. The nurse manager of a medical-surgical unit is completing assignments for the day shift staff. The client with which electrolyte laboratory value is assigned to the LPN/LVN? -calcium level of 9.5 mg/dl
76. A client is admitted with hypokalemia and skeletal muscle weakness. Which assessment does the nurse perform first? -respirations
77. The nurse completes the preoperative checklist on a client scheduled for general surgery. Which factor contributes the greatest risk for the planned procedure? -Diet-controlled diabetes mellitus
78. A client develops fluid overload while in the intensive care unit. Which nursing intervention does the nurse perform first? -elevates head of bed
79. The nurse is caring for a critically ill client with septic shock. The serum lactate level is 6.2. For which of the following acid-base disturbances should the nurse assess? -metabolic acidosis
80. A nurse is caring for a client who has chronic emphysema and is receiving oxygen therapy at 6L/min via nasal cannula. The following clinical data are available(chart): - notify the rapid response team and provide ventilation support
81. Which client is most likely to exhibit the following ABG results: pH 7.30; PaCO₂ 49; HCO₃ -26; PaO₂ 76? -client taking hydromorphone (Dilaudid)
82. Which client is at greatest risk for hypernatremia? -a 54-year-old who is sweating profusely

83. The health care provider writes orders for a client who is admitted with a serum potassium level of 6.9 mEq/L. What does the nurse implement first? -place the client on a cardiac monitor
84. An older client is hospitalized after an operation. When assessing the client for postoperative infection, the nurse places priority on which assessment? -change in behavior
85. A nurse assesses a client who is admitted with an acid-base imbalance. The client's arterial blood gas values are pH 7.32, PaO₂ 85 mm hg, PaCO₂ 34 mm hg, and HCO₃ -16 mEq/L. what action should the nurse take next? -assess clients rate, rhythm and depth of respiration
86. The nurse is caring for a client with an oxygen saturation of 88% and accessory muscle use. The nurse provides oxygen and anticipates which of these physician orders? -intubation and mechanical ventilation
87. A nurse is caring for a client who has just experienced a 90-second tonic-clonic seizure. The clients arterial blood gas values are pH 6.88. PaO₂ 50 mm Hg, PaCO₂ 60 mm Hg, and HCO₃ -22 mEq/L. which action should the nurse take first?- apply oxygen by mask or nasal cannula.
88. Which task would be best for the charge nurse to assign to the LPN/LVN working in the surgery admitting area? -Insert a retention catheter in a client who requires a flap graft of a sacral pressure ulcer A 70-year-old woman is admitted to the hospital with heart failure, shortness of breath, and 3+ pitting edema in her lower extremities. Her current medications are furosemide (Lasix), digoxin (Lanoxin), and an angiotensin-converting enzyme inhibitor (Lotensin). She states that she stopped taking her Lasix because she did not think that it was helping her heart failure. Her health care provider orders furosemide (Lasix) 5 mg IV push. Which client assessment determines that the medication is working? -increased urine output
89. The nurse is caring for a client who has taken a large quantity of furosemide (Lasix) to promote weight loss. The nurse anticipates the finding of which acid-base imbalance? -HCO₃⁻ of 34 mEq/L
90. The nurse is planning care for a 72-year-old resident of a long-term care facility who has a history of dehydration. Which action does the nurse delegate to unlicensed assistive personnel (UAP)? -Offering fluids to drink every hour.
91. A nurse works on the postoperative floor and has four clients who are being discharged tomorrow. Which one has the greatest need for the nurse to consult other members of the health care team for post-discharge care? -older adult who lives at home despite some memory loss
92. The nurse is caring for a group of clients with acidosis. The nurse recognizes that Kussmaul respirations are consistent with which situation? -aspirin overdose
93. A nurse assesses a client with diabetes mellitus who is admitted with an acid-base imbalance. The clients arterial blood gas values are pH 7.36, PaO₂ 98 mm Hg, PaCO₂ 33 mm Hg, and HCO₃ -18 mEq/L. which manifestation should the nurse identify as an example of the client's compensation mechanism? – increased rate and depth of respirations
94. client with hyperkalemia is being treated with drugs to improve the condition. Which potassium level indicates that therapy is effective? -4.6 mEq/L
95. a nurse answers a call light on the postoperative nursing unit. The client states there was a sudden gush of blood from the incision, and the nurse sees a blood spot on the sheet. What action should the nurse take first? -perform hand hygiene and apply gloves

96. a client has been hospitalized with an opportunistic infection secondary to acquired immune deficiency syndrome. The client's partner is listed as the emergency contact, but the client's mother insists that she should be listed instead. What action by the nurse is best? -contact the social worker to assist the client with advance directives
97. a nurse works in an allergy clinic. What task performed by the nurse takes priority? -checking emergency equipment each morning
98. a client is hospitalized with pneumocystis jiroveci pneumonia. The client reports shortness of breath with activity and extreme fatigue. What intervention is best to promote comfort? -pace activities, allowing for adequate rest
99. An HIV negative client who has an HIV positive partner asks the nurse about receiving Truvada (emtricitabine and tenofovir). What information is most important to teach the client about this drug? -Truvada does not reduce the need for safe sex practices"
100. A client with human immune deficiency virus (HIV) has had a sudden decline in status with a large increase in viral load. What action should the nurse take first? -assess the client for adherence to the drug regimen
101. A client with human immune deficiency virus is admitted to the hospital with fever, night sweats, and severe cough. Laboratory results include a CD4+ cell count of 180/mm³ and a negative tuberculosis (TB) skin test 4 days ago. What action should the nurse take first? -place the client under airborne precautions
102. A client has just been diagnosed with human immune deficiency virus (HIV). The client is distraught and does not know what to do. What intervention by the nurse is best? -assess the client for support systems
103. A client is taking prednisone to prevent transplant rejection. What instruction by the nurse is most important? -"avoid large crowds and people who are ill."
104. A client is admitted with superior vena cava syndrome. What action by the nurse is most appropriate? -gently inquire about advance directives
105. A client suffered an episode of anaphylaxis and has been stabilized in the intensive care unit when assessing the client's lungs, the nurse hears the following sounds. What medication does the nurse prepare to administer? -albuterol (Proventil) via nebulizer
106. A client is receiving interleukins along with chemotherapy. What assessment by the nurse takes priority? - blood pressure
107. A group of nursing students has entered a futuristic science contest in which they have "developed" a cure for cancer. Which treatment would most likely be the winning entry? -artificial fibronectin infusion to maintain tight adhesion of cells
108. The student nurse learning about cellular regulation understands that which process occurs during the S phase of the cell cycle? -doubling of DNA
109. A client with cancer is admitted to a short-term rehabilitation facility. The nurse prepares to administer the client's oral chemotherapy medications. What action by the nurse is most appropriate? -wear personal protective equipment when handling the medications
110. A client with cancer has anorexia and mucositis and is losing weight. The client's family members continually bring favorite foods to the client and are distressed when the client won't eat them. What action by the nurse is best? - help the family show other ways to demonstrate love and caring
111. A client has received a dose of ondansetron (Zofran) for nausea. What action by the nurse is most important? -assist the client in getting out of bed

112. An HIV positive client is admitted to the hospital with Toxoplasma Gondii infection. What action by the nurse is most important? -use standard precautions consistently
113. A nurse is preparing a client for discharge after surgery. The client needs to change a large dressing and manage a drain at home. What instruction by the nurse is most important? -"wash your hands before touching the drain or dressing"
114. An older adult has been transferred to the postoperative inpatient unit after surgery. The family is concerned that the client is not waking up quickly and states "She needs to get back to her old self!". What response by the nurse is best? -"sometimes older people take longer to wake up"
115. A client asks the nurse if eating only preservative-and-dye free foods will decrease cancer risk. What response by the nurse is best? -"maybe; preservatives, dyes, and preparation methods may be risk factors"
116. A nurse is assessing a client for acute rejection of kidney transplant. What assessment finding requires the most rapid communication with the provider? -creatinine of 3.9 mg/dl
117. A client is receiving rituximab (Rituxan) and asks how it works. What response by the nurse is best? -"it prevents the start of cell division in the cancer cells"
118. A client is receiving plasmapheresis as treatment for Goodpasture's syndrome. When planning care, the nurse places highest priority on interventions for which client problem? -potential for infection related to the site for organism invasion
119. A nurse is assessing an older client for the presence of infection. The client's temperature is 97.6 F (36.4C). What response by the nurse is best? -assess the client for more specific signs
120. A nurse reads on a hospitalized client's chart that the client is receiving teletherapy. What action by the nurse is best? -coordinate continuation of the therapy
121. A client calls the clinic to report exposure to poison ivy and an itchy rash that is not helped with over-the-counter antihistamines. What response by the nurse is most appropriate? -"antihistamines do not help poison ivy"
122. A nursing student learning about antibody-mediated immunity learns that the cell with the most direct role in this process begins development in which tissue or organ? -bone marrow
123. A postoperative client vomited. After cleaning and comforting the client, which action by the nurse is most important? -auscultate lung sounds
124. A client is hospitalized and on multiple antibiotics. The client develops frequent diarrhea. What action by the nurse is most important? -consult with the provider about obtaining stool cultures
125. The nurse is caring for a client diagnosed with human immune deficiency virus. The client's CD4+ cell count is 399/mm³. What action by the nurse is best? -counsel the client on safer sex practices/abstinence
126. A client has been admitted to the hospital for a virulent infection and is started on antibiotics. The client has laboratory work pending to determine if the diagnosis is meningitis. After starting the antibiotics, what action by the nurse is best? - assess the client frequently for worsening of his or her condition
127. The post anesthesia care unit (PACU) charge nurse notes vital signs on four postoperative clients. Which client should the nurse assess first? -client with a respiratory rate of 6 breaths/min
128. A new nurse has been assigned a client who is in the hospital to receive iodine-131 treatment. Which action by the nurse is best? -read the policy on handling radioactive excreta

129. A hospital unit is participating in a bioterrorism drill. A "client" is admitted with inhalation anthrax. Under what type of precautions does the charge nurse admit the "client"?
-standard precautions
130. An older adult has a mild temperature, night sweats, and productive cough. The client's tuberculin test comes back negative. What action by the nurse is best? -treat the client as is he or she has tuberculosis (TB)
131. A postoperative nurse is caring for a client whose oxygen saturation dropped from 98% to 95%. What action by the nurse is most appropriate? -assess other indicators of oxygenation
132. The student nurse learns that the most important function of inflammation and immunity is which purpose? -providing protection against invading organisms
133. A client tells the oncology nurse about an upcoming vacation to the beach to celebrate completing radiation treatments for cancer. What response by the nurse is most appropriate?
- "Do not expose the radiation area to direct sunlight"
134. A client on the postoperative nursing unit has a blood pressure of 156/98 mm Hg, pulse 140 beats/min, and respirations of 24 breaths/min. the client denies pain, has normal hemoglobin, hematocrit, and oxygen saturation, and shows no signs of infection. What should the nurse assess next? -psychosocial status
135. A client is in the preoperative holding area prior to surgery. The nurse notes that the client has allergies to avocados and strawberries. What action by the nurse is best? - ensure the information is relayed to the surgical team
136. A client has arrived in the postoperative unit. What action by the circulating nurse takes priority? -participating in hand-off report
137. The nurse working in an organ transplantation program knows that which individual is typically the best donor of an organ? -identical twin
138. A client in the oncology clinic reports her family is frustrated at her ongoing fatigue 4 months after radiation therapy for breast cancer. What response the nurse is most appropriate?
- "it is normal to be fatigued even for years afterward"
139. A postoperative client has just been admitted to the post anesthesia care unit (PACU). What assessment by the PACU nurse takes priority? -airway
140. A client with Sjogren's syndrome reports dry skin, eyes, mouth and vagina. What nonpharmacologic comfort measures does the nurse suggest? -home humidifier
141. A client has been placed on Contact Precautions. The clients family is very afraid to visit for fear of being "contaminated" by the client. What action by the nurse is best? -inform them that the infection is the issue, not the client
142. Ten hours after surgery, a postoperative client reports that the antiembolism stocking and sequential compression devices itch and are too hot. The client asks the nurse to remove them. What response by the nurse is best? - "to prevent blood clots you need them a few more hours"
143. a nurse is caring for a postoperative client who reports discomfort, but denies serious pain and odes not want medication. What action by the nurse is best to promote comfort?
-assist the client into a position of comfort
144. A client has primary selective immunoglobulin A deficiency. The nurse should prepare the client for self-management by teaching what principle of medical management: - "treatment is aimed at treating specific infections"

145. A nurse is caring for a client who has methicillin resistant *Staphylococcus aureus* (MRSA) infection cultured from the urine. What action by the nurse is most appropriate? -prepare to administer vancomycin (Vancocin)
146. A client with a history of prostate cancer is in the clinic and reports new onset of severe low back pain. What action by the nurse is most important? -assess the client's gait and balance
147. A client is receiving chemotherapy through a peripheral IV line. What action by the nurse is most important? -assessing the IV site every hour
148. A nurse is caring for four clients who have immune disorders. After receiving the hand-off report. Which client should the nurse assess first? -client with acquired immune deficiency syndrome with CD4+ cell count of 210/mm³ and a temp of 102.4°F (39.1°C)
149. A client is in the oncology clinic for a first visit since being diagnosed with cancer. The nurse reads in the client's chart that the cancer classification is T15N0M0. What does the nurse conclude about this client's cancer? -there are no distant metastases noted in the report
150. After receiving the hand-off report, which client should the oncology nurse see first? -older client on chemotherapy with mental status changes
151. A client is having a catheter placed in the femoral artery to deliver yttrium-90 beads into a liver tumor. What action by the nurse is most important? -ensuring that informed consent is on the chart
152. A nurse is observing as an unlicensed assistive personnel (UAP) performs hygiene and changes a client's bed linens. What action by the UAP requires intervention by the nurse? -shaking dirty linens and placing them on the floor
153. A postoperative client has respiratory depression after receiving midazolam (Versed) for sedation. Which IV-push medication and dose does the nurse prepare to administer? -flumazenil (Romazicon) 0.2 to 1 mg
154. The nurse working with client who have autoimmune diseases understands that what component of cell-mediated immunity is the problem? -suppressor T cells
155. A client having severe allergy symptoms has received several doses of IV antihistamines. What action by the nurse is most important? -instruct the client not to get up without help
156. A client in the family practice clinic reports a 2-week history of an "allergy to something.". the nurse obtains the following assessment and laboratory data: -everything except elimination of any pets
157. A nurse works on an oncology unit and delegates personal hygiene to an unlicensed assistive personnel (UAP). What action by the UAP requires intervention from the nurse? -allowing a very tired client to skip oral hygiene and sleep
158. A client has a platelet count of 9800/mm³. What action by the nurse is most appropriate? -instruct the client to call for help to get out of bed
159. A client is admitted with fever, myalgia, and a popular rash on face, palms and soles of the feet. What action should the nurse take first? -place the client on airborne precautions
160. A client is being admitted with suspected tuberculosis (TB). What action by the nurse are best?(select all that apply): -admit, order
161. A client has a leg wound that is in the second stage of the inflammatory response. For what manifestation does the nurse assess? -purulent drainage
162. The nurse is caring for clients on the medical surgical unit. What action by the nurse will help prevent a client from having a type II hypersensitivity reaction? -correctly identifying the client prior to a blood transfusion

163. A client with acquired immune deficiency syndrome has been hospitalized with suspected cryptosporidiosis. What physical assessment would be most consistent with this condition? -assessing mucous membranes
164. A nurse is talking with a client about a negative enzyme linked immunosorbent assay (ELISA) test for human immune deficiency virus (HIV) antibodies. The test is negative and the client states, "whew I was really worried about that result". What action by the nurse is most important? -assess the client's sexual activity and patterns
165. The nurse is presenting information to a community group on safer sex practices. The nurse should teach that which sexual practice is the riskiest? -anal intercourse
166. A nurse working with clients who experience alopecia knows that which is the best method of helping clients manage the psychosocial impact of this problem? -assisting the client to pre-plan this event
167. A nurse has taught a client about dietary changes that can reduce the chances of developing cancer. What statement by the client indicates the nurse needs to provide additional teaching? -"I'm so glad I don't have to give up my juicy steaks"
168. Which statement about carcinogenesis is accurate? -tumor cells need to develop their own blood supply
169. A clinic nurse is working with an older client. What assessment is most important for preventing infections in this client? -assessing vaccination records for booster shot needs
170. The nurse caring for oncology clients knows that which form of metastasis is the most common? -bloodborne
171. The nurse is caring for a client who is being treated for hypertensive emergency. What medication prescribed for the client should the nurse question? -Dopamine (intropin)
172. A client arrives in the emergency department with new-onset ptosis, diplopia, and dysphagia. The nurse anticipates that the client will be tested for which neurologic disease? -Myasthenia gravis (MG)
173. An older client has decided to give up driving due to cataracts. What assessment information is most important to collect? -feelings related to loss of driving
174. While caring for a client who has received recombinant tissue plasminogen activator (t-PA) for a large deep vein thrombus, the nurse becomes most concerned when the client develops which condition? -client stating that the year is 1967
175. The nurse is caring for a client with peripheral arterial disease (PAD). For which symptoms does the nurse assess? -reproducible leg pain with exercise
176. The home health nurse visits a client with heart failure who has gained 5 pounds in the past 3 days. The client states, "I feel so tired and short of breath." Which action does the nurse take first? -auscultate the client's posterior breath sounds
177. The nurse is preparing a client for a Tensilon (edrophonium chloride) test. What action by the nurse is most important? -obtaining atropine sulfate
178. A client with Guillain-Barre syndrome is admitted to the hospital. The nurse plans caregiving priority to interventions that address which priority client problem? -inadequate airway
179. A nurse assesses a client who has a history of heart failure. Which questions should the nurse ask to assess the extent of the client's heart failure? -are you able to walk upstairs without fatigue

180. A client is being evaluated for signs associated with myasthenic crisis or cholinergic crisis. Which symptoms lead the nurse to suspect that the client is experiencing a cholinergic crisis?
-abdominal cramps, blurred vision and facial muscle twitching
181. A bedridden client with reduced vision has been admitted. Which nursing interventions will ease the client's hospital stay?(select all that apply): -everything except speak in a loud clear voice
182. A client hospitalized for a wound infection has a blood urea nitrogen of 45 mg/dl and creatinine of 4.2 mg/dl. What action by the nurse is best? -assess the ordered antibiotics for ototoxicity
183. A client newly diagnosed with myasthenia gravis (MG) is being discharged, and the nurse is teaching about proper medication administration. Which statement by the client demonstrates a need for further teaching? -"I can continue to take over-the-counter drugs"
184. A client has undergone an embolectomy for acute arterial occlusion after creation of a lower arm arteriovenous fistula for dialysis. Which finding does the nurse report to the provider immediately? -swelling and tenseness in the affected area
185. The nurse is caring for four hypertensive clients. Which drug-laboratory value combination should the nurse report immediately to the health care provider? -furosemide (Lasix)/ potassium 2.1 mEq/L
186. The nurse admits a client with suspected Eaton-Lambert syndrome. The nurse anticipates that the health care provider will request which test to confirm the diagnosis?
-electromyography (EMG)
187. A client with trigeminal neuralgia is admitted for a percutaneous stereotactic rhizotomy in the morning. The client currently reports pain. What does the nurse do next? -administers pain medication as requested
188. A client had a percutaneous transluminal coronary angioplasty for peripheral arterial disease. What assessment finding by the nurse indicates a priority outcome for this client has been met? -distal pulse on affected extremity 2+/4+
189. The nurse is reviewing the lipid panel of a male client who has atherosclerosis. What finding is most concerning? - triglycerides 198 mg/dl
190. The nurse is reviewing the medication history of a client diagnosed with myasthenia gravis (MG) who has been prescribed a cholinesterase inhibitor (ChE) inhibitor. The nurse contacts the health care provider if the client is taking which medication? - procainamide (Pronestyl)
191. A client has returned to the unit after a thymectomy and is extubated. The client begins to report chest pain. What does the nurse do next? -informs the surgeon immediately
192. The nurse is caring for a client who is admitted with mastoiditis. What assessment data obtained by the nurse requires the most immediate action? -the client reports a headache and stiff neck
193. A nurse teaches a client who is prescribed digoxin (Lanoxin) therapy. What statement should the nurse include in this client's teaching? -"do not take this medication within 1 hour of taking an antacid"
194. A client is admitted with exacerbation of Guillain-Barre syndrome (GBS) presenting with dyspnea. Which intervention does the nurse perform first? -raises the head of the bed to 45 degrees
195. Which type of drug therapy does the nurse anticipate giving to a client with Meniere's disease to decrease endolymph volume? -diuretics

196. When administering furosemide (Lasix) to a client who does not like bananas or orange juice, the nurse recommends that the client try which intervention to maintain potassium levels?
-consume melons and baked potatoes
197. A nurse assesses a client with pericarditis. Which assessment finding should the nurse expect to find? -friction rub at the left lower sternal border
198. An older, adult client reports ear pain. To differentiate the cause, which clinical manifestation is more indicative of otitis media? -vertigo
199. A client had a myringotomy. The nurse provides which discharge teaching? -buy dry shampoo to use for a week
200. A client has labyrinthitis and is prescribed antibiotics. What instruction by the nurse is most important for this client? -immediately report headache or stiff neck
201. A nurse is preparing a client for a femoropopliteal bypass operation. What actions does the nurse delegate to the unlicensed assistive personnel (UAP)?(select all that apply): -raising, recording
202. The nursing instructor asks a nursing student to compare and contrast Bell's palsy and trigeminal neuralgia. Which statement by the nursing student is correct? -difficulty chewing may occur in both disorders
203. A nurse assesses a client with mitral valve stenosis. What clinical manifestation should alert the nurse to the possibility that the client's stenosis has progressed? -dyspnea on exertion
204. A client has a corneal ulcer. What information provided by the client most indicates a potential barrier to home care? -chronic use of sleeping pills
205. An older adult client reports ear pain. Otoscopic examination by the nurse practitioner (NP) reveals a dull and retracted membrane. What does the NP do next? -continues further assessment
206. After teaching a client who is being discharged home after mitral valve replacement surgery, the nurse assesses the client's understanding. Which client statement indicates a need for additional teaching? -"I will have my teeth cleaned by my dentist in 2 weeks"
207. A nurse is caring for a client with acute pericarditis who reports substernal precordial pain that radiates to the left side of the neck. Which nonpharmacologic comfort measure should the nurse implement? -sit the client up with a pillow to lean forward on
208. A nurse assesses a client after administering isosorbide mononitrate (Imdur). The client reports a headache. Which action should the nurse take? -administer PRN acetaminophen
209. A client is 4 hours postoperative after a femoropopliteal bypass. The client reports throbbing leg pain on the affected side, rated as 7/10. What action by the nurse takes priority? -assess distal pulses and skin color
210. The nurse is assessing a client with a cardiac infection. Which symptoms support the diagnosis of infective endocarditis instead of pericarditis or rheumatic carditis? -splinter hemorrhages
211. A client has undergone a percutaneous stereotactic rhizotomy. What instruction by the nurse is most important on discharge from the ambulatory surgical center? -"Do not use harsh chemicals on your face"
212. The nurse admits a client with suspected myasthenia gravis(MG). the nurse anticipates that the health care provider will request which medication to aid in the diagnosis of MG?
-edrophonium chloride (Tensilon)

213. A nurse assesses a client who is prescribed levothyroxine (Synthroid) for hypothyroidism. Which assessment finding, should alert the nurse that the medication therapy is effective? -heart rate is 70 beats/min and regular
214. A nurse is assessing an older client and discover back pain with tenderness along T2 and T3. What action by the nurse is best? -consult with the provider about an x-ray
215. A client has scoliosis with a 65-degree curve to the spine. What action by the nurse takes priority? -assesses the clients cardiac and respiratory system
216. A nurse is teaching a client with psoriatic arthritis about the medication golimumab (Simponi). What information is most important to include? -“avoid large crowds or people who are ill”
217. A client in a nursing home refuses to take medications. She is at high risk for osteomalacia. What action by the nurse is best? -ensure the client gets 15 minutes of sun exposure daily
218. A nurse is caring for a client who was prescribed high-dose corticosteroid therapy for 1 month to treat a severe inflammatory condition. The clients symptoms have now resolved and the clients asks “When can I stop taking these medications?” how should the nurse respond? -once you start corticosteroids you have to be weaned off them
219. A client has been prescribed denosumab (Prolia). What instruction about this drug is most appropriate? -make appointments to come get your shot
220. A hospitalized client is being treated for Ewing’s sarcoma. What action by the nurse is most important? -handling and disposing of chemotherapeutic agents per policy
221. A client has a continuous passive motion (CPM) device after a total knee replacement. What action does the nurse delegate to the unlicensed assistive personnel (UAP), after the affected leg is placed in the machine while the client is in bed? -raise the lower siderail on the affected side
222. The nurse is providing care to a client with impaired oxygenation related to anemia. Which nursing intervention has the highest priority? -transfuse ordered packed red blood cells
223. A client has a metastatic bone tumor. What action by the nurse takes priority? -handle the affected extremity with caution
224. In planning care for a client with an acquired secondary immune deficiency with Candida Albicans, which problem has the highest priority? -potential for infection transmission related to recurring opportunistic infections
225. A nurse sees clients in an osteoporosis clinic. Which client should the nurse see first? -client taking raloxifene (Evista) who reports unilateral calf swelling
226. A client is started on etanercept (Enbrel). What teaching by the nurse is most important? -giving subcutaneous injections
227. A nurse is caring for a client after joint replacement surgery. What action by the nurse is most important to prevent wound infection? -use aseptic technique for dressing changes
228. While assessing a client with Graves disease the nurse notes that the clients temperature has risen 1 F. what action should the nurse take first? -turn the lights down and shut the clients door
229. A client who has had systemic lupus erythematosus (SLE) for many years is in the clinic reporting hip pain with ambulation. Which action by the nurse is best? -assess medication record for steroid use
230. Which factor relates most directly to a diagnosis of primary immune deficiency? -full term infant surfactant deficiency

231. A client has a bone density score of -2.8. what action by the nurse is best? -planning to teach about bisphosphonates
232. Which is a priority problem for the older adult client diagnosed with bone cancer?
-potential for injury related to weakness and drug therapy

Select all that apply

- A nurse working in the preoperative holding area performs which function to ensure client safety? (select all that apply) -everything except allow small sips of plain water
- A nurse is caring for several clients prior to surgery. Which medications taken by the clients require the nurse to consult with the physician about their administration? (select all that apply): all except omega-3 fatty acids
- The nurse caring for a client with Gullian-Barre syndrome has identified the priority client problem of decreased mobility for the client. What actions by the nurse are best?(select all that apply): -ask, consult, work
- A client has Menieres disease with frequent attacks. About what drugs does the nurse plan to teach the client?(select all that apply): -Thorazine, Benadryl, Antivert
- A nurse teaches a client with Cushing's disease. Which dietary requirements should the nurse include in this clients teaching? (select all that apply): -low carb, low cal, low sodium
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- A clients family members are concerned that telling the client about a new finding of cancer will cause extreme emotional distress. They approach the nurse and ask if this can be kept from the client. What actions by the nurse are most appropriate?(Select all that apply): -ask, consult, explain
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- A client is experiencing pain after leg surgery but cannot yet have more pain medication. What comfort interventions can the nurse provide? (Select all that apply): -everything except turn the TV on loudly to distract the client

- Which situation can cause a client to experience “insensible water loss”? (select all that apply): - everything except nausea
- A postoperative client is being discharged with a prescription for oxycodone hydrochloride with acetaminophen (Percocet). What instructions does the nurse give the client? (select all that apply): - everything except “if this gives you diarrhea, loperamide (Imodium) can help”
- Which findings are AIDS-defining characteristics?(select all that apply): -CD4+, infection, presence
- A nurse is assessing a client who has an electrolyte imbalance related to renal failure. For which potential complication of this electrolyte imbalance should the nurse assess? (select all that apply): -electrocardiogram, paralytic, skeletal
- A 77 year old woman is brought to the emergency department by her family after she has had diarrhea for 3 days. The family tells the nurse that she has not been eating or drinking well. But that she has been taking her diuretics for congestive heart failure (CHF). She is receiving lactated ringers solution IV for rehydration. What clinical manifestation does the nurse monitor during rehydration of the clients? (Select all that apply): - everything except blood serum glucose
- A nurse assesses a client who is admitted for treatment of fluid overload. Which manifestations should the nurse expect to find? (select all that apply): -increased pulse, distended neck veins, skeletal muscle weakness
- A nurse develops a plan of care for a client who has a history of hypocalcemia. What interventions should the nurse include in this clients care plan?(Select all that apply): -use, provide
- A nurse recently hired to the preoperative area learns that certain clients are at higher risk for venous thromboembolism (VTE). Which clients are considered at high risk? (select all that apply): -everything except client with a humerus fracture
- A new perioperative nurse is receiving orientation to the surgical area and learns about the surgical care improvement project (SCIP) goals. What major areas do these measures focus on preventing? (select all that apply): -infection, serious, thromboembolism
- The student nurse caring for clients who have cancer understand that the general consequences of cancer include which client problem?(Select all that apply): -everything except clotting abnormalities from thrombocythemia
- A student nurse is caring for clients on the postoperative unit. The student asks the registered nurse why malnutrition can lead to poor surgical outcomes. What responses by the nurse are best? (Select all that apply): -everything except malnourished clients always have other problems
- The student nurse learns that effective antimicrobial therapy requires which factors to be present?(Select all that apply): -everything except standardized peak levels
- A 77-year-old woman is brought to the emergency department by her family after she has had diarrhea for 3 days. The family tells the nurse that she has not been eating or drinking well, but that she has been taking her diuretics for congestive heart failure (CHF). Her laboratory results include a potassium level of 7.0 mEq/L. What does the nurse include in the client's medication teaching? (Select all that apply.) -Diuretics can lead to fluid and electrolyte imbalances, Laxatives can lead, It is important to weigh
- A nurse is assessing clients who are at risk for acid-base imbalance. Which clients are correctly paired with the acid-base imbalance? (Select all that apply): -metabolic acidosis, respiratory alkalosis, metabolic alkalosis

- A student nurse asks why older adults are higher risk for complications after surgery. What reasons does the registered nurse give? (select all that apply): -everything except inability to adapt to changes
- Which statement are true regarding standard precautions?(select all that apply): -use, wear
- A nursing instructor is teaching students about different surgical procedures and their classification. Which examples does the instructor include? (Select all that apply): -liver biopsy: diagnostic, total shoulder replacement: restorative
- A nurse assesses a client who is receiving total parenteral nutrition. For which adverse effects related to an acid-base imbalance should the nurse assess? (select all that apply): -positive, anxiety
- The nurse is teaching a client who is taking a potassium-sparing diuretic about what foods to avoid. Which foods contain high amounts of potassium? (Select all that apply.) -everything except apples
- A nurse is planning care for a client who is anxious and irritable. The clients arterial blood gas values are pH 7.30, PaO₂ 96 mm Hg, PaCO₂ 43 mm Hg, and HCO₃ -19 mEq/L. which questions should the nurse ask the client and spouse when developing the plan of care?(select all that apply): -"is your..", "Do you..."
- A client with acquired immune deficiency syndrome (AIDS) is hospitalized with pneumocystitis jirovecii pneumonia and is started on the drug of choice for this infection. What laboratory values should the nurse report to the provider as a priority? (select all that apply): -aspartate, platelet, serum
- A client has thrombocytopenia. What actions does the nurse delegate to the unlicensed assistive personnel (UAP)? (select all that apply): -apply, assist, use
- A nurse orienting to the postoperative area learns which principle about the postoperative periods? (select all that apply): -phase I care may, phase II, vital
- A nurse is traveling to a third-world country with a medical volunteer group to work with people who are infected with human immune deficiency virus (HIV). The nurse should recognize that which of the following might be a barrier to the prevention of perinatal HIV transmission?(select all that apply): -everything except unknown transmission routes
- The student nurse caring for clients understands that which factors must be present to transmit infection?(select all that apply): -everything except colonization
- A client on interferon therapy is reporting severe skin itching and irritation. What actions does the nurse delegate to the unlicensed assistive personnel (UAP)? (select all that apply): -apply moisturizers, bathe
- A client with acquired immune deficiency syndrome is in the hospital with severe diarrhea. What actions does the nurse delegate to the unlicensed assistive personnel (UAP)?(select all that apply): - everything except assessing the clients fluid and electrolyte status
- A nurse on the postoperative nursing unit provides care to reduce the incidence of surgical wound infection. What actions are best to achieve this goal? (Select all that apply): -disposing, performing, removing
- A client receiving chemotherapy has a white blood cell count of 1000/mm³. What actions by the nurse are most appropriate?(Select all that apply): -everything except do not allow the client to eat meat or poultry
- A client with an infection has a fever. What actions by the nurse help increase the clients comfort? (select all that apply): -change, offer

- A client with acquired immune deficiency syndrome and esophagitis due to Candida Fungus is scheduled for an endoscopy. What actions by the nurse are most appropriate? (select all that apply): -assess, ensure, maintain
- A client with acquired immune deficiency syndrome has oral thrush and difficulty eating. What actions does the nurse delegate to the unlicensed assistive personnel (UAP)?(select all that apply): -assist, offer, remind
- A nurse is providing community education on the seven warning signs of cancer. Which signs are included? (select all that apply): - everything except near-daily abdominal pain
- A client has mucositis. What actions by the nurse will improve the client's nutrition? (Select all that apply): -everything except give the client hot liquids to hold in the mouth
- A nurse is participating in primary prevention efforts directed against cancer. In which activities is this nurse most likely to engage?(Select all that apply): -instructing, providing, teaching
- For a person to be immunocompetent, which processes need to be function and interact appropriately with each other?(Select all that apply): everything except red blood cells
- A nurse is preparing to administer IV chemotherapy. What supplies does this nurse need? (Select all that apply): -chemo, facemask, isolation
- The nurse working with oncology clients understands that interacting factors affect cancer development. Which factors does this include?(select all that apply): -exposure, genetic, immune
- A client receiving chemotherapy has a white blood cell count of 1000/mm³. What actions by the nurse are most appropriate? (Select all that apply): -everything except do not allow the client to eat meat or poultry
-