



## ATI RN Comprehensive Predictor 2019 Form B

Independent Study-Nursing (Nassau Community College)

## RN Comprehensive Predictor 2019 Form B

1. A nurse is assessing a newborn who has a blood glucose level of 30 mg/dl. Which of the following manifestations should the nurse expect?

- A. Loose stools
- B. Jitteriness**
- C. Hypertonia
- D. Abdominal distention

2. A nurse is assessing a client who is immediately post-operative following total hip arthroplasty, which of the following considerations should the nurse take when positioning the client?

- A. Place the client's heels directly against the bed mattress
- B. Ensure that the client's hips remain in an abducted position.**
- C. Maintain the client in a supine position for the first 24 hr. after surgery.
- D. Flex the client's hip up to 120° when sitting in a chair.

3. A nurse is assessing a client who is immediately postoperative following a subtotal thyroidectomy. Which of the following should the nurse expect to administer?

- A. Calcium gluconate.**
- B. Sodium bicarbonate.
- C. Potassium chloride.
- D. Sodium phosphate.

4. A nurse is caring for an adult client who has prescriptions for multiple medications. Which of the following (Unable to read) as an age-related change that increases the risk for adverse effects from this medication?

- A. Rapid gastric emptying.
- B. Prolonged medication half-life.**
- C. Increased medication elimination.
- D. Decreased medication sensitivity.

5. A nurse manager is planning to promote client advocacy among staff in a medical unit. Which of the following actions should the nurse take?
- A. Encourage staff to implement the principle of paternalism when a client is having difficulty making a choice.
  - B. Tell staff explain procedures to clients before obtaining informed consent.
  - C. Instruct unit staff to share personal experiences to help clients make decisions.
  - D. Develop a system for staff members to report safety concerns in the client care environment.**
6. A nurse is preparing an in-service for a group of nurses about malpractice issues in nursing. Which of the following examples should the nurse include in the teaching?
- A. Leaving a nasogastric tube clamped after administering oral medication
  - B. Documenting communication with a provider in the progress notes of the client's medical record
  - C. Administering potassium via IV bolus**
  - D. Placing a yellow bracelet on a client who is at risk for falls
7. A nurse is providing teaching about the gastrostomy tube feedings to the parents of a school age child. Which of the following instructions should the nurse take?
- A. Administer the feeding over 30 min.**
  - B. Place the child in a supine position after the feeding.
  - C. Change the feeding bag and tubing every 3 days.
  - D. Warm the formula in the microwave prior to administration.
8. A nurse is administering digoxin 0.125 mg Po to an adult client. For which of the following findings should the nurse report to the provider?
- A. Potassium level 4.2 mEq/L.
  - B. Apical pulse 58/min.**
  - C. Digoxin level 1 ng/ml.**
  - D. Constipation for 2 days.
9. A nurse is providing discharge teaching to a client who has a new prescription for phenelzine. The nurse should instruct the client that it is safe to eat which of the following foods while taking this medication?
- A. Whole grain bread**
  - B. Avocados
  - C. Smoked salmon
  - D. Pepperoni pizza

10. A nurse is caring for an adolescent who has sickle-cell anemia. Which of the following manifestations indicates acute chest syndrome and should be immediately reported to the provider?
- A. Substernal retractions.
  - B. Hematuria.
  - C. Temperature 37.9 C (100.2 F).
  - D. Sneezing.
11. A nurse manager is updating protocols for the use of belt restraints. Which of the following guidelines should the nurse include?
- A. Attach the restraint to the bed's side rails.
  - B. Attach a PRN restraint prescription for clients who are aggressive
  - C. Document the client's condition every 15 min
  - D. Remove the client's restraints every 4 hr
12. A nurse is performing a gastric lavage for a client who has upper gastrointestinal bleeding. Which of the following action should the nurse take?
- A. Instill 500 ml of solution through the NG tube.
  - B. Insert a large-bore NG tube.
  - C. Use a cold irrigation solution.
  - D. Instruct the client to lie on his right side.

13. A nurse is providing care for a client who is in the advance stage of amyotrophic lateral sclerosis. (ALS). Which of the following referrals is the nurse's priority?

- B. Psychologist.
- C. Social worker.
- D. Occupational therapist.
- E. **Speech-language pathologist.**

14. A nurse is reviewing the laboratory results of a client who has rheumatoid arthritis. Which of the following findings should the nurse report to the provider?

- A. WBC count 8,000/mm<sup>3</sup>.
- B. Platelets 150,000/mm<sup>3</sup>.
- C. Aspartate aminotransferase 10 units/L.
- D. Erythrocyte sedimentation rate 75 mm/hr

15. A nurse is caring for a client who has generalized petechiae and ecchymoses. The nurse should expect a prescription for which of the following laboratory tests?

- A. **Platelet count.**
- B. Potassium level.
- C. Creatine clearance.
- D. Prealbumin.

16. A charge nurse on a medical-surgical unit is assisting with the emergency response plan following an external disaster in the community. In anticipation of multiple client admissions, which of the following current clients should the nurse recommend for early discharge?

- A. A client who has COPD and a respiratory rate of 44/min
- B. A client who has cancer with a sealed implant for radiation therapy.
- C. A client who is receiving heparin for deep-vein thrombosis
- D. A client who is 1 day postoperative following a vertebroplasty

17. A nurse is caring for a client who is comatose and has advance directives that indicate the client does not want life-sustaining measures. The client's family want the client to have life-sustaining measures. Which of the following action should the nurse take?

- A. Arrange for an ethics committee meeting to address the family's concerns.
- B. Support the family's decision and initiate life-sustaining measures.
- C. Complete an incident report.
- D. Encourage the family to contact an attorney.

18. A nurse is caring for a client who wears glasses. Which of the following actions should the nurse

take? A. Store the glasses in a labeled case.

- B. Clean the glasses with hot water.
- C. Clean the glasses with a paper towel.
- D. Store the glasses on the bedside table.

19. A nurse is teaching a group of newly licensed nurses about measures to take when caring for a client who is on contact precautions. Which of the following should the nurse include in the teaching?

- A. Remove the protective gown after the client's room.
- B. Place the client in a room with negative pressure.
- C. Wear gloves when providing care to the client.
- D. Wear a mask when changing the linens in the client's room.

20. A nurse is planning on care for a client who is recovering from an acute myocardial infarction that occurred 3 days ago. Which of the following instructions should the nurse include?

- A. Perform an ECG every 12 hr.
- B. Place the client in a supine position while resting.
- C. Draw a troponin level every 4hr.
- D. Obtain a cardiac rehabilitation consultation.

21. The nurse is reviewing the medical record of a client who is requesting combination oral contraceptives. Which of the following conditions in the client's history is a contradiction to the use of oral contraceptives?

A. Hyperthyroidism.

**B. Thrombophlebitis.**

C. Diverticulosis.

D. Hypocalcemia.

22. A nurse is caring for a client who request the creation of a living will. Which of the following actions should the nurse take?

A. Schedule a meeting between the hospital ethics committee and the client.

**B. Evaluate the client's understanding of life-sustaining measures.**

C. Determine the client's preferences about post mortem care.

D. Request a conference with the client's family.

23. A nurse is providing teaching to a client who is at 14 weeks of gestation about findings to report to the provider. Which of the following findigns should the nurse include in the teaching?

A. Bleeding gums

B. Faintness upon rising

**C. Swelling of the face**

D. Urinary frequency

24. A nurse is caring for a client following application of a cast. Which of the following actions should the nurse take first?

A. Place an ice pack over the cast.

**B. Palpate the pulse distal to the cast.**

C. Teach the client to keep the cast clean and dry.

D. Position the casted extremity on a pillow.

25. A nurse is caring for a client who has vision loss. Which of the following actions should the nurse take? (Select all that apply)

- A. **Keep objects in the client's room in the same place.**
- B. Ensure there is high-wattage lighting in the client's room.
- C. Approach the client from the side.
- D. **Allow extra time for the client to perform tasks.**
- E. Touch the client gently to announce presence.

26. A nurse is caring for a client who is newly diagnosed with pancreatic cancer and has questions about the disease. To research the nurse should identify that which of the following electronic database has the most comprehensive collection of nursing (Unable to read) articles?

- A. MEDLINE
- B. CINAHL.
- C. ProQuest.
- D. Health Source.

27. A nurse in an emergency department is assessing newly admitted client who is experiencing drooling and hoarseness following a burn injury. Which of the following should actions should the nurse take first?

- A. Obtain a baseline ECG.
- B. Obtain a blood specimen for ABG analysis.
- C. Insert an 18-gauge IV catheter.
- D. **Administer 100% humidified oxygen.**

28. A nurse is planning care for a client who has unilateral paralysis and dysphagia following a right hemispheric stroke. Which of the following interventions should the nurse include in the plan?

- A. Place food on the left side of the client's mouth when he is ready to eat.
- B. Provide total care in performing the client's ADLs.
- C. Maintain the client on bed rest.
- D. **Place the client's left arm on a pillow while he is sitting.**

29. A nurse is caring for a client who is in a seclusion room following violent behavior. The client continues to display aggressive behavior. Which of the following actions should the nurse take?

- A. Confront the client about this behavior.
- B. Express sympathy for the client's situation.
- C. Speak assertively to the client.
- D. Stand within 30 cm (1 ft) of the client when speaking with them.

30. A nurse is caring for a client who is receiving brachytherapy for treatment of prostate cancer. Which of the following actions should the nurse take?

- A. Cleanse equipment before removal from the client's room.
- B. Limit the client's visitors to 30 min per day.
- C. Discard the client's linens in a double bag.
- D. Discard the radioactive source in a biohazard bag.

31. A nurse is developing a plan of care for a client who has schizophrenia and is experiencing auditory hallucinations. Which of the following actions should the nurse include in the plan?

- A. Ask the client directly what he is hearing
- B. Encourage the client to lie down in a quiet room
- C. Avoid eye contact with the client
- D. Refer to the hallucinations as if they are real

32. A nurse is caring for a client who is in labor and requires augmentation of labor. Which of the following conditions should the nurse recognize as a contraindication to the use of oxytocin.

- A. Diabetes mellitus.
- B. Shoulder presentation.
- C. Postterm with oligohydramnios. (I think Maternal Newborn Chapter 15 page 100)
- D. Chorioamnionitis.

33. A nurse is preparing to perform a sterile wound irrigation and dressing change for a client. Which of the following actions by the nurse indicates a break in surgical aseptic technique?

- A. Applying a sterile gown after applying a sterile mask
- B. Balancing the bottle on the sterile basin while pouring the liquid**
- C. Placing the supplies on the sterile field and leaving a 1-inch perimeter
- D. Putting on sterile gloves after preparing the sterile field

34. A nurse is assessing a client who has left-sided heart failure. Which of the following should the nurse identify as a manifestation of pulmonary congestion?

- A. Frothy, pink sputum.
- B. Jugular vein distention.
- C. Weight gain.
- D. Bradypnea.**

35. A nurse is teaching a prenatal class about infection prevention at a community center. Which of the following statements by a client indicates an understanding of the teaching?

- A. "I can visit my nephew who has chickenpox 5 days after the sores have crusted."**
- B. "I can clean my cat's litter box during my pregnancy."
- C. "I should take antibiotics when I have a virus."
- D. "I should wash my hands for 10 seconds with hot water after working in the garden."

36. A nurse is caring for a 5-month-old infant who has manifestations of severe dehydration and a prescription for paternal fluid therapy. The guardian asks, "What are the indications that my baby needs an IV?" Which of the following responses should the nurse make?

- A. "Your baby needs an IV because she is not producing any tears"**
- B. "Your baby needs an IV because her fontanelles are budging"
- C. "Your baby needs an IV because she is breathing slower than normal"
- D. "Your baby needs an IV because her heart rate is decreasing"

37. A nurse is providing teaching to a client who has heart failure and a new prescription for furosemide. Which of the following statements should the nurse make?

- A. "Taking furosemide can cause your potassium levels to be high"
- B. "Eat foods that are high in sodium"
- C. "Rise slowly when getting out of bed"
- D. "Taking furosemide can cause you to be overhydrated"

38. A nurse is creating a plan of care for a newly admitted client who has obsessive-compulsive disorder. Which of the following interventions should the nurse take?

- A. Allow the client enough time to perform rituals.
- B. Give the client autonomy in scheduling activities.
- C. Discourage the client from exploring irrational fears.
- D. Provide negative reinforcement for ritualistic behaviors.

39. A nurse is caring for a client who has depression and reports taking St. John's wort along with citalopram. The nurse should monitor the client for which of the following conditions as a result of an interaction between these substances?

- A. Serotonin syndrome
- B. Tardive dyskinesia
- C. Pseudo parkinsonism.
- D. Acute dystonia.

40. A nurse is assessing a client who is receiving packed RBCs. Which of the following findings indicate fluid overload?

- A. Low back pain.
- B. Dyspnea.
- C. Hypotension.
- D. Thready pulse.

41. A nurse is calculating a client's expected date of delivery. The client's last menstrual period began on April 12. Using Nagele's rule, what date should the nurse determine to be the client's expected delivery date? (Use mmdd format.)

0119 date

42. A nurse is discussing group treatment and therapy with a client. The nurse should include which of the following as being a characteristic of a therapeutic group?

- A. The group is organized in an autocratic structure.
- B. The group encourages members to focus on a particular issue. (Mental Health Chapter 8 Page 42)**
- C. The group must be led by a licensed psychiatrist.
- D. The group encourages clients to form dependent relationships.

43. A nurse manager is reviewing documentation with a newly licensed nurse. Which of the following notations by the newly licensed nurse indicates an understanding of the teaching.

UNSURE IF ON THE REPORT

- A. "OOB with assistance for breakfast"
- B. "Given 2 mg MSO4 IM for report of pain"
- C. "Dressing changed qd"
- D. "Administered 8 u regular insulin sq."**

44. A nurse is preparing to administer eye drops to a school-age child. Identify the actions the nurse should take. (Move the steps into the box on the right, placing them in the order of performance. Use all the steps.)

1. Apply pressure to the lacrimal punctum.
2. Ask the child to look upward.
3. Pull the lower eyelid downward.
4. Instill the drops of medication.
5. Place the child in a sitting position.

**5 2 3 4 1**

45. A nurse is caring for a client who speaks a language different from the nurse. Which of the following should the nurse take?

- A. Request an interpreter of a different sex from the client.
- B. Request a family member or friend to interpret information for the client.
- C. Direct attention toward the interpreter when speaking to the client.
- D. Review the facility policy about the use of an interpreter.

46. A nurse is caring for a client who is in labor and is receiving oxytocin. Which of the following findings indicates that the nurse should increase the rate of infusion?

**ON THE REPORT** needs double checking

- A. Urine output 20 ml/hr.
- B. Montevideo units constantly 300 mm Hg.
- C. FHR pattern with absent variability.
- D. Contractions every 5 min that last 30 seconds.

47. A nurse is planning care for a group of clients and is working with one licensed practical nurse (LPN) and one assistive personnel (AP). Which of the following actions should the nurse take first to manage her time effectively?

- A. Develop an hourly time frame for tasks.
- B. Schedule daily activities.
- C. Determine goals of the day
- D. Delegate tasks to the AP

48. A public health nurse is managing several projects for the community. Which of the following interventions should the nurse identify as a primary prevention strategy?

- A. Teaching parenting skills to expectant mothers and their partners.
- B. Conducting mental health screenings at the local community center.
- C. Referring client who have obesity to community exercise programs.
- D. Providing crisis intervention through a mobile counseling unit.

49. A nurse is providing teaching to an adolescent who has peptic ulcer disease. Which of the following statements by the client indicates an understanding of the teaching?

- A. "I will decrease my daily protein intake to 15 grams per day."
- B. "I will use ibuprofen as needed to control abdominal pain."
- C. "I will take sucralfate with meals three times per day."
- D. "I will avoid food and beverages that contain caffeine."**

50. A nurse is reviewing legal issues in health care with a group of newly licensed nurses. Which of the following recommendations should the nurse make?

- A. Place copies of incident reports in clients' medical records.
- B. Overestimate clients' acuity to prevent short staffing.
- C. Ensure that each client has a living will on file prior to treatment.**
- D. Obtain personal professional liability insurance coverage.

51. A nurse is providing preoperative teaching about patient-controlled analgesia (PCA) to a client. Which of the following statements should the nurse include in the teaching?

- A. "The PCA will deliver a double dose of medication when you push the button twice."
- B. "You can adjust the amount of pain medication you receive by pushing on the keypad."
- C. "Continuous PCA infusion is designed to allow fluctuating plasma medication levels."
- D. "You should push the button before physical activity to allow maximum pain control."**

52. A nurse is preparing to administer an autologous blood product to a client. Which of the following actions should the nurse take to identify the client?

- A. Match the client's blood type with the type and cross match specimens.**
- B. Confirm the provider's prescription matches the number on the blood component.
- C. Ask the client to state the blood type and the date of their last blood donation.
- D. Ensure that the client's identification band matches the number on the blood unit.**

53. A nurse is performing physical therapy for a client who has Parkinson's disease. Which of the following statements by the client indicates the need for a referral to physical therapy?

- A. "I have been experiencing more tremors in my left arm than before"
- B. "I noticed that I am having a harder time holding on to my toothbrush"
- C. **"Lately, I feel like my feet are freezing up, as they are stuck to the ground"**
- D. "Sometimes, I feel I am making a chewing motion when I'm not eating"

54. A nurse is reviewing laboratory data for a client who has chronic kidney disease. Which of the following findings should the nurse expect?

- A. Increased creatine.
- B. Increased hemoglobin.
- C. Increased bicarbonate.
- D. Increased calcium.

55. A nurse is administering a scheduled medication to a client. The client reports that the medication appears different than what they take at home. Which of the following responses should the nurse take?

- A. "Did the doctor discuss with you that there was a change in this medication?"
- B. "I recommend that you take this medication as prescribed"
- C. "Do you know why this medication is being prescribed to you?"
- D. **"I will call the pharmacist now to check on this medication"**

56. A nurse is teaching at a community health fair about electrical fire prevention. Which of the following information should the nurse include in the teaching?

- A. **Use three pronged grounded plugs.**
- B. Cover extension cords with a rug.
- C. Check the tingling sensations around the cord to ensure the electricity is working.
- D. Remove the plug from the socket by pulling the cord.

57. A charge nurse is recommending postpartum client discharge following a local disaster. Which of the following should the nurse recommend for discharge?

- A. A 42-year-old client who has preeclampsia and a BP of 166/110 mm Hg.
- B. A 15-year-old client who delivered via emergency cesarean birth 1 day ago.
- C. A client who received 2 units of packed RBCs 6 hr. ago for a postpartum hemorrhage.
- D. A client who delivered precipitously 36 hr. ago and has a second-degree perineal laceration.**

58. A nurse in a provider's office is reviewing the laboratory results of a group of clients. Which to report?

- A. Herpes simplex.
- B. Human papillomavirus
- C. Candidiasis
- D. Chlamydia**

59. A nurse is providing discharge teaching for a group of clients. The nurse should recommend a referral to a dietitian

- A. A client who has a prescription for warfarin and states "I will need to limit how much spinach I eat".
- B. A client who has gout and states, "I can continue to eat anchovies on my pizza."**
- C. A client who has a prescription for spironolactone and states "I will reduce my intake of foods that contain potassium".
- D. A client who has (Unable to read) and states "I'll plan to take my calcium carbonate with a full glass of water".

60. 40. A nurse is preparing to measure a temperature of an infant. Which of the following action should the nurse take?

- A. Place the tip of the thermometer under the center of the infant's axilla.**
- B. Pull the pinna of the infant's ear forward before inserting the probe.
- C. Insert the probe 3.8 cm (1.5in) into the infant's rectum.
- D. Insert the thermometer in front of the infant's tongue.

61. A nurse in a pediatric clinic is teaching a newly hired nurse about the varicella rooster. Which of the following information should the nurse include?

- A. Children who have varicella are contagious until vesicles are crusted.
- B. Children who have varicella should receive the herpes zoster vaccination.
- C. Children who have varicella should be placed in droplet precaution.
- D. Children who have varicella are contagious 4 days before the first vesicle eruption.

62. A nurse is reviewing the laboratory report of a client who has been having lithium carbonate for the past 12 months. The nurse notes a lithium level of 0.8 mEq/L. Which of the following orders from the provider should the nurse expect?

- A. Withhold the next dose.
- B. Increase the dosage.
- C. Discontinue the medication.
- D. Administer the medication.

63. A nurse is caring for a client who has fibromyalgia and requests pain medication. Which of the following medications should the nurse administer?

- A. Pregabalin
- B. Lorazepam
- C. Colchicine
- D. Codeine.

64. A nurse is caring for a client who is to receive a transfusion of packed RBCs. Which of the following actions should the nurse take?

- A. Prime IV tubing with 0.9% sodium chloride.
- B. Use a 24-gauge IV catheter
- C. Obtain filter less IV tubing.
- D. Place blood in the warmer for 1 hr.

65. A nurse is caring for a toddler who has acute lymphocytic leukemia. In which of the following should the toddler participate?

- A. Looking at alphabet flashcards.
- B. Playing with a large plastic truck.**
- C. Use scissors cut out paper shapes.
- D. Watching a cartoon in the dayroom.

66. A nurse is caring for a client who has chronic pancreatitis. Which of the following dietary recommendations should the nurse make?

- A. Coffee with creamer.
- B. Lettuce with sliced avocados.
- C. Broiled skinless chicken breast with brown rice.**
- D. Warm toast with margarine.

67. A nurse is preparing to assess a 2-week-old newborn. Which of the following actions should the nurse plan to take?

- A. Obtain the newborn's body temperature using a tympanic thermometer.
- B. (Unable to read) FACES pain scale.
- C. Auscultate the newborn's apical pulse for 60 seconds.**
- D. Measure the newborn's head circumference over the eyebrows and below the occipital prominence. (NOT)

68. A nurse is caring for a client who is at 38 weeks gestation, is in active labor, and has ruptured membrane. Which of the following actions should the nurse take?

- A. Insert an indwelling urinary catheter.
- B. Apply fetal heart rate monitor.**
- C. Initiate fundal massage.
- D. Initiate an oxytocin IV infusion.

69. A nurse is assessing a client who is 30 min postoperative following an arterial thrombectomy. Which of the following findings should the nurse report?

- A. Chest pain.
- B. Muscle spasms.
- C. Cool, moist skin.
- D. Incisional pain.

70. A nurse is completing an incident report after a client fall. Which of the following competencies of Quality and Safety Education for Nurse is the use demonstrating?

- A. Quality improvement.
- B. Patient (Unable to read)
- C. Evidence based practice.
- D. Informatics.

71. A nurse is talking with another nurse on the unit and smells alcohol on her breath. Which of the following actions should the nurse take?

- A. Confront the nurse about the suspected alcohol use.
- B. Inform another nurse on the unit about the suspected alcohol use.
- C. Ask the nurse to finish administering medications and then go home.
- D. Notify the nursing manager about the suspected alcohol use.

72. A nurse is caring for a client who has diaper dermatitis. Which of the following actions should the nurse take?

- A. Apply zinc oxide ointment to the irritated area.
- B. (Unable to read)
- C. Wipe stool from the skin using store bought baby wipes.
- D. Apply talcum powder to the irritated area.

73. A nurse is reviewing the facility's safety protocols considering newborn abduction with the parent of a newborn. Which of the following statements indicates an understanding of the teaching?

- A. "Staff will apply identification band after first bath"
- B. "I will not publish public announcement about my baby's birth"
- C. "I can remove my baby's identification band as long as she is in my room"
- D. "I can leave my baby in my room while I walk in the hallway"

74. A nurse is receiving a telephone prescription from a provider for a client who requires additional medication for pain control. Which of the following entries should the nurse make in the medical record?

- A. "Morphine 3 mg SQ every 4 hr. PRN for pain."
- B. "Morphine 3 mg Subcutaneous (Unable to read)"
- C. "Morphine 3.0 mg sub q every 4 hr. PRN for pain."
- D. "Morphine 3 mg SC q 4 hr. PRN for pain."

75. A nurse realizes that the wrong medication has been administered to a client. Which of the following actions should the nurse take first?

- A. Notify the provider.
- B. Report the incident to the nurse manager.
- C. Monitor vital signs.
- D. Fill out an incident report.

76. A nurse is providing teaching to a client who is experiencing preterm contractions and dehydration. Which of the following statements should the nurse make?

- A. "Dehydration is treated with calcium supplements"
- B. "Dehydration can increase the risk of preterm labor"
- C. "Dehydration associated gastroesophageal reflux"
- D. "Dehydration is caused by a decreased hemoglobin and hematocrit"

77. A nurse is receiving a change-of-shift report for an adult female client who is postoperative. Which of the following client information should the nurse report?

- A. (Unable to read)
- B. (Unable to read)
- C. Answer might be lower platelets.
- D. (Unable to read)

78. A nurse manager is developing a protocol for an urgent care clinic that often cares for clients who do not speak the same language as clinical staff. Which of the following instructions should the nurse include?

- A. Use the client's children to provide interpretation.
- B. (Answer was the nurse was going to do the interpretation)
- C. Offer client's translation services for a nominal fee.
- D. Evaluate the clients' understanding at regular intervals.

79. A charge nurse is teaching a newly licensed nurse about clients designating a health care proxy in situations that require a durable power of attorney for health care (DPAHC). Which of the following information should the charge nurse include?

- A. "The proxy should make health care decisions for the client regardless of the client's ability to do so."
- B. "The proxy can make financial decisions if they need arises."
- C. "The proxy can make treatment decisions if the client is under anesthesia."
- D. "The proxy should manage legal issues for the client."

80. A nurse is caring for a client who has a history of depression and is experiencing a situational crisis. Which of the following actions should the nurse take first?

- A. Confirm the client's perception of the event.
- B. Notify the client's support person.
- C. Help the client identify personal strengths.
- D. Teach the client relaxation techniques

81. A nurse is caring for a client who has end-stage kidney disease. The client's adult child asks the nurse about becoming a living kidney donor for her father. Which of the following conditions in the child's medical history should the nurse identify as a contraindication to the procedure?

- A. Amputation
- B. Osteoarthritis
- C. Hypertension
- D. Primary glaucoma

82. A nurse is planning care for a client who has bipolar disorder and is experiencing mania. Which of the following interventions should the nurse include in the plan?

- A. Encourage the client to spend time in the day room
- B. Withdraw the client's TV privileges if he does not attend group therapy.
- C. Encourage the client to make frequent rest periods.**
- D. Place the client in seclusion when he exhibits signs of anxiety.

83. A nurse is working with a client who has an anxiety disorder and is in the orientation phase of the therapeutic relationship. Which of the following statements should the nurse make during this phase?

- A. "Let's talk about how you can change your response to stress."
- B. "We should establish our roles in the initial session."**
- C. "Let me show you simple relaxation exercises to manage stress."
- D. "We should discuss resources to implement in your daily life."

84. A staff education nurse is evaluating a group of nurses during a new employee orientation on the use of proper body mechanics when lifting. Which of the following images indicates the appropriate use of ergonomic principles?



**C (Aka picture below 1)**



85. A nurse is providing teaching to an older adult client about methods to promote nighttime sleep. Which of the following instructions should the nurse include?
- A. Stay in bed at least 1 hr if unable to fall asleep.
  - B. Take a 1 hr nap during the day
  - C. Perform exercises prior to bedtime
  - D. Eat a light snack before bedtime**
86. A nurse is interviewing the partner of a client who was admitted in the manic phase of bipolar disorder. The partner states, "I don't know what to do. Everything has been happening so quickly." Which of the following responses by the nurse is therapeutic?
- A. "Can you talk about what was happening with your partner at home?"**
  - B. "Why do you think your partner's symptoms are progressing so quickly?"
  - C. "You should make sure your partner takes the prescribed medication."
  - D. "You did the right thing by bringing your partner in for treatment."

87. A nurse is receiving change-of-shift report for a group of clients. Which of the following clients should the nurse plan to assess first?

- A. A client who has sinus arrhythmia and is receiving cardiac monitoring
- B. A client who has a hip fracture and a new onset of tachypnea**
- C. A client who has epidural analgesia and weakness in the lower extremities
- D. A client who has diabetes mellitus and a hemoglobin A1C of 6.8%

88. A nurse is providing dietary teaching to a client who has a new diagnosis of irritable bowel syndrome. Which of the following recommendations should the nurse include?

- A. Consume food high in bran fiber.**
- B. Increase intake of milk products
- C. Sweeten foods with fructose corn syrup
- D. Increase intake of foods high in gluten

89. A nurse is caring for an infant who has coarctation of the aorta. Which of the following should the nurse identify as an expected finding?

- A. Weak femoral pulses**
- B. Frequent nosebleeds
- C. Upper extremity hypotension
- D. Increased intracranial pressure

90. A nurse is providing teaching to a client about the adverse effects of sertraline. Which of the following adverse effects should the nurse include?

- A. Excessive sweating**
- B. Increased urinary frequency
- C. Dry cough
- D. Metallic taste in mouth

91. A nurse is caring for a client who is in active labor and notes the FHY baseline has been 100/min for the past 15 min. The nurse should identify which of the following conditions as a possible cause of fetal bradycardia?

- A. Maternal fever
- B. Fetal anemia
- C. Maternal hypoglycemia**
- D. Chorioamnionitis

92. A nurse is providing teaching to the parents of a newborn about newborn genetic screening. Which of the following statements should the nurse include in the teaching?

- A. "This test should be performed after your baby is 24 hours old."
- B. "A nurse will draw blood from your baby's inner elbow."
- C. "Your baby will be given 2 ounces of water to drink prior to the test."
- D. "This test will be repeated when your baby is 2 months old."

93. A nurse is caring for a client who asks for information regarding organ donation. Which of the following responses should the nurse make?

- A. "I cannot be a witness for your consent to donate."
- B. "Your name cannot be removed once you are listed on the organ donor list."
- C. "Your desire to be an organ donor must be documented in writing."
- D. "You must be at least 21 years of age to become an organ donor."

94. A nurse is caring for a client who is at 33 weeks of gestation following an amniocentesis. The nurse should monitor the client for which of the following complications?

- A. Vomiting
- B. Hypertension
- C. Epigastric pain
- D. Contractions

95. A nurse is providing discharge teaching to a client who has chronic kidney disease and is receiving hemodialysis. Which of the following instructions should the nurse include in the teaching?

- A. Take magnesium hydroxide for indigestion
- B. Drink at least 3 L of fluid daily
- C. Eat 1 g/kg of protein per day
- D. Consume foods high in potassium

96. A charge nurse is teaching new staff members about factors that increase a client's risk to become violent. Which of the following risk factors should the nurse include as the best predictor of future violence?

- A. Previous violent behavior
- B. A history of being in prison
- C. Experiencing delusions
- D. Male gender

97. A nurse is teaching a client who is trying to conceive. Which of the following should the nurse instruct the client to increase in her diet to prevent a neural tube defect?

- A. Folate
- B. Zinc
- C. Iron
- D. Calcium

98. A nurse is caring for a client who is experiencing acute mania. Which of the following foods should the nurse provide for the client?

- A. Peanut butter sandwich
- B. Oatmeal with butter
- C. Chicken noodle soup
- D. Celery sticks

99. A nurse is preparing to administer an IV medication to a client and accidentally punctures the IV bag causing the medication to leak on the counter. Which of the following medications requires the nurse to follow facility procedures in the safe handling of a biohazardous material spill?

- A. Doxorubicin hydrochloride
- B. Ampicillin sodium
- C. Metronidazole
- D. Phenytoin

100. A nurse in a provider's office is reviewing a female client's medical record during a routine visit. The nurse should recommend increased dietary intake of which of the following vitamins? (Click on the "Exhibit" button for additional information about the client. There are three tabs that contain separate categories of data.)

- A. Vitamin D
- B. Vitamin K
- C. Vitamin B12
- D. Vitamin A

101. A nurse is developing an in-service about personality disorders. Which of the following information should the nurse include when discussing borderline personality disorder?

- A. "The client might act seductively."
- B. The client is overly concerned about minor details."
- C. The client exhibits impulsive behavior."**
- D. "The client is exceptionally clingy to others."

102. A nurse is completing an admission assessment for a client who has narcissistic personality disorder. Which of the following findings should the nurse expect?

- A. Ritualistic behavior
- B. Suspicious of others
- C. Exhibits separation anxiety
- D. Preoccupied with aging**

103. A nurse is caring for a child who has cystic fibrosis and requires postural drainage. Which of the following actions should the nurse take?

- A. Hold hand flat to perform percussions on the child.
- B. Perform the procedure twice a day.
- C. Administer a bronchodilator after the procedure.
- D. Perform the procedure prior to meals**

104. A nurse is reviewing the medical record of a client who has schizophrenia and is taking clozapine. Which of the following findings should the nurse identify as a contraindication to the administration of clozapine?

- A. Heart rate 58/min
- B. Fasting blood glucose 100 mg/dL
- C. Hgb 14 g/dL
- D. WBC count 2,900/mm<sup>3</sup>**

105. A nurse is providing teaching about digoxin administration the parents of a toddler who has heart failure. Which of the following statements should the nurse include in the teaching?

- A. "Limit your child's potassium intake while she is taking this medication."
- B. "You can add the medication to a half-cup of your child's favorite juice"
- C. "Repeat the dose if your child vomits within 1 hour after taking the medication."
- D. "Have your child drink a small glass of water after swallowing the medication."**

106. A school nurse is teaching a parent about absence seizures. Which of the following information should the nurse include?

- A. "This type of seizure can be mistaken for daydreaming."
- B. "This type of seizure lasts 30 to 60 seconds"
- C. "The child usually has an aura prior to onset"
- D. "This type of seizure has a gradual onset"

107. A nurse is reviewing assessment data from several clients. For which of the following clients should the nurse recommend referral to a dietitian?

- A. An older adult client who has a BMI of 24
- B. A client who has a nonhealing leg ulcer
- C. An older adult client who has presbyopia
- D. A client who has an albumin level of 3.7 g/dL

108. A nurse is caring for a client who is receiving intermittent enteral tube feedings. Which of the following places the client at risk for aspiration?

- A. Sitting in a high-Fowler's position during the feeding
- B. A history of gastroesophageal reflux disease
- C. Receiving a high osmolarity formula
- D. A residual of 65 mL 1 hr postprandial

109. A nurse is caring for several clients on a medical-surgical unit. For which of the following nursing activities is it required that the nurse use sterile gloves?

- A. Inserting an NG tube
- B. Administering total parenteral nutrition through a central venous access device
- C. Initiating IV access
- D. Performing tracheostomy care

110. A nurse is providing teaching to the parents of a newborn about newborn genetic screening. Which of the following statements should the nurse include in the teaching?

- A. "This test should be performed after your baby is 24 hours old"
- B. "A nurse will draw blood from your baby's inner elbow."
- C. "Your baby will be given 2 ounces of water to drink prior to the test."
- D. "This test will be repeated when your baby is 2 months old"

111. A nurse in a mental health clinic receives a request from a client who is undergoing psychotherapy to obtain a copy of the therapist's notes. Which of the following responses should the nurse make?
- A. "We can provide a copy of your records, but the therapist's notes are not included."
  - B. "I don't think you will benefit from reviewing your therapist's notes right now"
  - C. "Why are you interested in seeing your therapist's notes?"
  - D. "Are you not happy with your treatment?"
112. A nurse is developing a plan of care for a client who has preeclampsia and is to receive magnesium sulfate via continuous IV infusion. Which of the following actions should the nurse include in the plan?
- A. Monitor the FHR via Doppler every 30 min
  - B. Restrict the client's total fluid intake to 250 mL/hr
  - C. Give the client protamine if signs of magnesium sulfate toxicity occur.
  - D. Measure the client's urine output every hour
113. A nurse is assessing a client who is in active labor. Which of the following findings should the nurse report to the provider?
- A. Contractions lasting 80 seconds
  - B. FHR baseline 170/min
  - C. Early decelerations in the FHR
  - D. Temperature 37.4°C (99.3°F)
114. A nurse is caring for a client who is in labor and has received an epidural. Which of the following actions should the nurse take?
- A. Decrease the maintenance infusion rate of IV fluid
  - B. Have protamine sulfate available at the bedside
  - C. Reposition the client side-to-side each hour
  - D. Monitor the client for hypertension
115. A nurse is building a therapeutic relationship with a newly admitted client. Which of the following actions should the nurse plan to take during the orientation phase of the relationship?
- A. Determine previous coping skills used by the client
  - B. Establish the responsibilities of the nurse and client
  - C. Facilitate the client's problem-solving skills
  - D. Assist the client in expressing alternative behaviors

116. A nurse is providing dietary teaching to a client who has a new diagnosis of irritable bowel syndrome.

Which of the following recommendations should the nurse include?

- A. Increase intake of foods high in gluten
- B. Increase intake of milk products
- C. Sweeten foods with fructose corn syrup
- D. Consume food high in bran fiber**

117. A nurse is reviewing the medical records of four clients. The nurse should identify that which of the following client findings requires follow up care?

A client who received a Mantoux test 48 hr ago and has an induration

A client who is scheduled for a colonoscopy and is taking sodium phosphate

**A client who is taking warfarin and has an INR of 1.8**

A client who is taking bumetanide and has a potassium level of 3.6 mEq/L

118. A nurse is caring for a client who is 2 hr postoperative following a cardiac catheterization. Which of the following is the priority assessment finding?

- A. Report of burning sensation at the insertion site
- B. Absence of pedal pulse in the affected extremity**
- C. Urinary output 25 mL/hr
- D. Oxygen saturation 91%

119. A nurse is caring for a client who has cystic fibrosis and requires postural drainage. Which of the following actions should the nurse take?

- A. Hold hand flat to perform percussions on the child
- B. Perform the procedure twice a day
- C. Perform the procedure prior to meals**
- D. Administer a bronchodilator after the procedure

120. A nurse in a mental health facility receives change-of-shift report for four clients. Which of the following clients should the nurse plan to assess first?

- A. A client placed in restraints due to aggressive behavior**
- B. A client who will be receiving her first ECT treatment today
- C. A client who received a PRN dose of haloperidol 2hr ago for increased anxiety
- D. A newly admitted client who has a history of 4.5 kg (10 lb) weight loss in the past 2 months

121. A nurse is providing discharge teaching about car seat safety to a parent of a newborn. Which of the following statements by the parent indicates an understanding of the teaching?

- A. "I can turn my baby's car seat around when she weighs 15 pounds."
- B. "I can place my baby in the front seat with the airbag turned off"
- C. "I will place my baby in a forward-facing car seat in my back seat."
- D. "I will position my baby at a 45-degree angle in the car seat."**

122. A nurse in a clinic is assessing a 6-month-old infant. Which of the following findings should the nurse report to the provider?

- A. Pulse 140/min
- B. Closed anterior fontanel
- C. Respiratory rate 26/min**
- D. Abdominal breathing

123. A nurse is planning care for a client who has bipolar disorder and is experiencing mania. Which of the following interventions should the nurse include in the plan?

- A. Encourage the client to spend time in the day room
- B. Place the client in seclusion when he exhibits signs of anxiety
- C. Withdraw the client's TV privileges if he does not attend group therapy
- D. Encourage the client to take frequent rest periods**

124. A nurse is providing teaching to a client about the adverse effects of sertraline. Which of the following adverse effects should the nurse include?

- A. Metallic taste in mouth
- B. Dry cough
- C. Increased urinary frequency
- D. Excessive sweating**

125. A nurse is developing an in-service personality disorders. Which of the following information should the nurse include when discussing borderline personality disorder?

- A. "The client exhibits impulsive behavior."
- B. "The client might act seductively."
- C. "The client is exceptionally clingy to others."
- D. "The client is overly concerned about minor details."

126. A nurse is caring for a client who is receiving intermittent enteral tube feedings. Which of the following places the client at risk for aspiration?

- A. A residual of 65 mL 1 hr postprandial
- B. Sitting in a high-Fowler's position during the feeding
- C. A history of gastroesophageal reflux disease
- D. Receiving a high osmolarity formula

127. A nurse is caring for a client following a cardiac catheterization through the left groin. Which of the following actions should the nurse take?

- A. Monitor the dorsalis pedis pulse every 15 min.
- B. Keep the client NPO for 24 hr.
- C. Place in the client in Fowler's position
- D. Maintain strict bedrest for the first 12 hr.

128. A nurse is reviewing the medical record of a client who has a prescription for intermittent heat therapy for a foot injury. Which of the following findings should the nurse identify as a contraindication for heat therapy?

- A. Peripheral neuropathy
- B. Osteoarthritis
- C. Abdominal aortic aneurysm
- D. Phlebitis

129. A nurse in an emergency department is caring for a toddler who has burns following a house fire. Which of the following actions should the nurse take first?

- A. Calculate fluid replacement based on vital signs and urinary output
- B. Determine the location and depth of the burns
- C. Check the mouth for soot and smoky breath
- D. Administer antibiotics prophylactically to prevent sepsis

130. A nurse is caring for a client following a stroke. The client has right-sided weakness and facial drooping. Which of the following nursing actions is the priority?

- A. Perform range-of-motion exercises to the client's extremities.
- B. Place the client's right hand in a supination position
- C. Change the client's position every 2 hr
- D. Maintain NPO status for the client

131. A nurse is caring for an adult client who has chronic anemia and is schedule to receive a transfusion of 1 unit of packed RBCs. Which of the following actions should the nurse take?

- A. Administer the blood via a 21-gauge IV needle
- B. Set the IV infusion pump to administer the blood over 6 hr.
- C. Check the client's vital signs from the previous shift prior to the initiation of the transfusion
- D. Flush the blood administration tubing with 0.9% sodium chloride prior to the transfusion

132. Intradermal Injection areas

- A. Buttocks.
- B. Upper back.
- C. Hamstring area

