# Chapter 30, Upper Respiratory System Drugs

1. The nurse has completed teaching a client about the prescribed upper respiratory drug. The nurse determines additional teaching is warranted when the client chooses which finding as requiring further assessment?
   A) Cough changes from nonproductive to productive.
   B) Sputum appears clear.
   C) Sputum increases.
   D) Shortness of breath occurs.

   Answer: B

   Rationale: The client should notify their primary health care provider if the type of cough changes, sputum changes color or increases, and shortness of breath occurs. Clear sputum is normal.
   Question Format: Multiple Choice
   Chapter: 30
   Learning Objective: 5
   Cognitive Level: Analyze
   Client Needs: Physiological Integrity: Reduction of Risk Potential
   Integrated Process: Teaching/Learning
   Reference: p. 23, Educating the Client and Family

2. A client with a nonproductive cough is prescribed codeine sulfate. The nurse will recognize a contraindication in which client?
   A) Head injury
   B) COPD
   C) Premature infant
   D) Asthma

   Answer: C

   Rationale: Codeine sulfate is contraindicated in premature infants. Codeine sulfate should be used cautiously in clients with head injury, COPD, and asthma.
   Question Format: Multiple Choice
   Chapter: 30
   Learning Objective: 2
   Cognitive Level: Apply
   Client Needs: Physiological Integrity: Pharmacological Therapies
   Integrated Process: Clinical Problem-solving Process (Nursing Process)
   Reference: p. 371, Antitussives, Expectorants, and Mucolytics

3. A nurse is preparing to administer diphenhydramine to a client with bronchial irritation. Which activity should the nurse prioritize during the preadministration assessment?
   A) Document color and amount of any sputum present.

B) Record the previous prescriptions.
C) Take vital signs every 4 hours.
D) Assess the client's cardiovascular status.

Answer: A

Rationale: Before drug administration, the nurse should document the color and amount of any sputum present. The nurse need not record the previous prescriptions; however, the nurse should determine if any drugs the client uses would potentially interact with diphenhydramine. The nurse needs to take the client's vital signs, but not every 4 hours. The nurse needs to assess the respiratory status of the client before administering mucolytics and expectorants, but not before administering diphenhydramine HCl. Assessing the client's cardiovascular status is not necessary.
Question Format: Multiple Choice
Chapter: 30
Learning Objective: 3
Cognitive Level: Apply
Client Needs: Physiological Integrity: Pharmacological Therapies
Integrated Process: Clinical Problem-solving Process (Nursing Process)
Reference: p. 373, Preadministration Assessment

4. A nurse is conducting an ongoing assessment and notes the client is experiencing difficulty bringing up mucus. Which nursing diagnosis should the nurse prioritize for this client?
A) Ineffective Airway Clearance
B) Acute Pain
C) Injury Risk
D) Impaired Oral Mucous Membranes

Answer: A

Rationale: Thick sputum interferes with moving air effectively in and out of the respiratory tract. Therefore, the most likely nursing diagnosis would be Ineffective Airway Clearance. There is no evidence of pain. Injury Risk would be appropriate if the client was experiencing sedation or drowsiness from the prescribed medication. Impaired Oral Mucous Membranes would be appropriate if the client was experiencing dry mouth from the medication.
Question Format: Multiple Choice
Chapter: 30
Learning Objective: 4
Cognitive Level: Analyze
Client Needs: Physiological Integrity: Reduction of Risk Potential
Integrated Process: Clinical Problem-solving Process (Nursing Process)
Reference: p. 374, Ineffective Airway Clearance

5. The nurse is preparing a teaching session for a client prescribed dextromethorphan orally. Which instruction should the nurse prioritize?
A) Take the drug with a glass of milk.

B) Swallow the whole tablet and do not chew it.
C) Dissolve the tablet in water and take the drug.
D) Take the drug on an empty stomach.

Answer: B
Rationale: The nurse should instruct the client to swallow the whole tablet and not to chew it to ensure that the drug is absorbed properly. The nurse need not instruct the client to take the drug with a glass of milk, dissolve the tablet in water and take the drug, or take the drug on an empty stomach.
Question Format: Multiple Choice
Chapter: 30
Learning Objective: 5
Cognitive Level: Apply
Client Needs: Physiological Integrity: Pharmacological Therapies
Integrated Process: Teaching/Learning
Reference: p. 374, Educating the Client and Family

6. The nurse notes a client has a new prescription for an expectorant. The nurse will monitor this client closely if which disorder is noted in the client's history?
A) Renal impairment
B) Persistent headache
C) Persistent cough
D) Seizure disorder

Answer: C

Rationale: The nurse should use the expectorant drugs with caution in clients with persistent cough. The nurse should use antitussives with caution in clients with persistent headache. The nurse needs to use opioid antitussives cautiously in clients with renal impairment and seizure disorders.
Question Format: Multiple Choice
Chapter: 30
Learning Objective: 2
Cognitive Level: Apply
Client Needs: Physiological Integrity: Pharmacological Therapies
Integrated Process: Clinical Problem-solving Process (Nursing Process)
Reference: p. 371, Antitussives, Expectorants, and Mucolytics

7. A client prescribed an antihistamine for vasomotor rhinitis is concerned about the potential increased sedation effects. Which antihistamine can the nurse point out as the best option to help avoid the sedation effects?
A) Brompheniramine
B) Clemastine
C) Chlorpheniramine
D) Azelastine

Answer: D

Rationale: The nurse should assure the client that azelastine has very little sedative effect; it is a second-generation antihistamine with little effect on central nervous system (CNS) depression. Brompheniramine, clemastine, and chlorpheniramine are first-generation antihistamines. Sedation is seen more often with first-generation antihistamines.
Question Format: Multiple Choice
Chapter: 30
Learning Objective: 1, 5
Cognitive Level: Apply
Client Needs: Physiological Integrity: Pharmacological Therapies
Integrated Process: Clinical Problem-solving Process (Nursing Process)
Reference: p. 369, Respiratory System Reactions

8. The nurse is preparing a teaching session for a client with rhinitis about the prescribed decongestant. Which potential adverse reaction should the nurse point out?
   A) Decreased pulse rate
   B) Blurred vision
   C) Drowsiness
   D) Dryness of throat

   Answer: B

   Rationale: The nurse should inform the client that blurred vision is a possible adverse reaction of decongestant drugs. Additionally, an increased and not decreased pulse rate may also be seen. Drowsiness is not seen with decongestant usage. Dryness of the nasal mucosa and not the throat may be seen with decongestant drugs, which are used mostly as topical sprays and drops.
   Question Format: Multiple Choice
   Chapter: 30
   Learning Objective: 2
   Cognitive Level: Apply
   Client Needs: Physiological Integrity: Pharmacological Therapies
   Integrated Process: Teaching/Learning
   Reference: p. 370, Decongestants

9. A client with allergic rhinitis is prescribed an antihistamine. The nurse instructs the client to suck on sugarless hard candy to address which potential adverse reaction?
   A) Drowsiness and sedation
   B) Thickening of the bronchial secretions
   C) Altered sensation of taste
   D) Dryness of the oral mucosa and the throat

   Answer: D

Rationale: The nurse should instruct the client to suck on a sugarless hard candy to prevent dryness of the oral mucosa and the throat, which is a side effect of antihistamine therapy. Sucking on candy does not relieve drowsiness, sedation, and thickening of the bronchial mucosa seen with antihistamine therapy. Altered sense of taste does not occur with most antihistamines.
Question Format: Multiple Choice
Chapter: 30
Learning Objective: 5
Cognitive Level: Apply
Client Needs: Physiological Integrity: Pharmacological Therapies
Integrated Process: Teaching/Learning
Reference: p. 374, Impaired Oral Mucous Membranes

10. The client reports a mild stinging sensation after using a nasal spray decongestant. Which response by the nurse would be most appropriate?
A) "You need to stop the medication immediately."
B) "The dose is probably too strong and needs to be reduced."
C) "This sensation is common and usually disappears with continued use."
D) "We better contact your primary health care provider right away."

Answer: C

Rationale: The nurse needs to assure the client that the mild stinging sensation usually disappears with continued use. The drug needs to be stopped only if the stinging sensation is severe. The dose of the medication does not need to be altered. The primary health care provider does not need to be consulted immediately in the presence of a mild stinging sensation.
Question Format: Multiple Choice
Chapter: 30
Learning Objective: 5
Cognitive Level: Apply
Client Needs: Physiological Integrity: Pharmacological Therapies
Integrated Process: Clinical Problem-solving Process (Nursing Process)
Reference: p. 374 Educating the Client and Family

11. A client currently prescribed a MAOI for depression is also prescribed a decongestant for cold symptoms. Which potential adverse reaction should the nurse point out will warrant contacting the health care provider?
A) Hypotension
B) Severe headache
C) Sedation
D) Bradycardia

Answer: B

Rationale: The nurse should warn the client of the possibility of severe headache due to an interaction between the two drugs. Such an interaction may also result in hypertensive crisis instead of hypotension. Sedation and bradycardia do not occur when an MAOI and decongestant are used together.

Question Format: Multiple Choice
Chapter: 30
Learning Objective: 5
Cognitive Level: Apply
Client Needs: Physiological Integrity: Reduction of Risk Potential
Integrated Process: Teaching/Learning
Reference: p. 370, Decongestants

12. The nurse is preparing to administer an antitussive to a client. Which assessments will the nurse prioritize in the preadministration assessment? Select all that apply.
A) Temperature
B) Sputum presence
C) Type of cough
D) Bowel sounds
E) Heart sounds

Answer: A, B, C

Rationale: Vital signs, type of cough, presence of sputum, color and amount of sputum, home remedies used, and actions taken should be assessed prior to initiation of an antitussive. Bowel and heart sounds are not part of the preadministration assessment but should be part of the ongoing assessment as these are potential adverse reactions.
Question Format: Multiple Select
Chapter: 30
Learning Objective: 3
Cognitive Level: Apply
Client Needs: Physiological Integrity: Pharmacological Therapies
Integrated Process: Clinical Problem-solving Process (Nursing Process)
Reference: p. 373, Preadministration Assessment

13. A client has been prescribed an antitussive. The nurse prepares to assess which factors on the ongoing assessment? Select all that apply.
A) Heart sounds
B) Lung sounds
C) Frequency of cough
D) Therapeutic effect
E) Pain assessment

Answer: B, C, D, E

Rationale: Vital signs, lung sounds, therapeutic effect including frequency of cough, and assessment of pain should be part of the ongoing client assessment. Auscultation of heart sounds is not part of the ongoing client assessment as there are no recognized cardiac adverse reactions.
Question Format: Multiple Select
Chapter: 30
Learning Objective: 3
Cognitive Level: Apply

Client Needs: Physiological Integrity: Reduction of Risk Potential
Integrated Process: Clinical Problem-solving Process (Nursing Process)
Reference: p. 373, Ongoing Assessment

14. The nurse is preparing a teaching session for a client who is prescribed an antitussive. Which instructions should the nurse prioritize? Select all that apply.
A) Decreasing fluid intake during treatment with an antitussive
B) Encouraging the use of sedatives during treatment
C) Drinking fluids at least 30 minutes after taking a lozenge form
D) Swallowing oral antitussive capsules whole
E) Avoiding respiratory irritants during antitussive treatment

Answer: D, E

Rationale: A client's antitussive teaching plan should include the following instructions: do not exceed recommended dose; avoid respiratory irritants; drink plenty of fluids, not decrease intake, if not contraindicated; swallow oral capsules whole; avoid drinking fluids for 30 minutes after taking a lozenge, instead of making sure fluids are taken within 30 minutes; do not use alcohol or other CNS depressants while being treated with antitussives due to potential adverse reactions; and contact the health care provider if cough is not relieved or becomes worse or is accompanied by chills, fever, chest pain, or sputum production.
Question Format: Multiple Select
Chapter: 30
Learning Objective: 5
Cognitive Level: Apply
Client Needs: Physiological Integrity: Reduction of Risk Potential
Integrated Process: Teaching/Learning
Reference: p. 374, Educating the Client and Family

15. A client presents to the clinic with a cough that is getting worse. The client reports having used over-the-counter dextromethorphan. Which findings on assessment should the nurse prioritize after noting the client is prescribed phenelzine? Select all that apply.
A) Hypertension
B) Fever
C) Nausea
D) Constipation
E) Sedation

Answer: B, C

Rationale: Coadministration of dextromethorphan (a nonopioid antitussive) and phenelzine (a monoamine oxidase inhibitor) may result in hypotension, fever, nausea, leg jerking, and coma. Individuals with hypertension should use antihistamines and decongestants cautiously due to potential adverse reactions. Sedation is a potential reaction when MAOIs and antihistamines are taken concomitantly. Constipation is a potential adverse reaction when using codeine and Benzonatate.

Question Format: Multiple Select
Chapter: 30
Learning Objective: 2
Cognitive Level: Apply
Client Needs: Physiological Integrity: Pharmacological Therapies
Integrated Process: Clinical Problem-solving Process (Nursing Process)
Reference: p. 371, Antitussives, Expectorants, and Mucolytics

16. A client is questioning the use of eucalyptus as a decongestant. The nurse should point out that eucalyptus is contraindicated for which clients? Select all that apply.
A) Pregnant females
B) Children younger than 2 years
C) Lactating females
D) Postmenopausal females
E) Men

Answer: A, B, C

Rationale: The use of eucalyptus is contraindicated during pregnancy and lactation, as well as in people who are hypersensitive to eucalyptus and in children younger than 2 years. Eucalyptus is generally considered safe for postmenopausal females and men.
Question Format: Multiple Select
Chapter: 30
Learning Objective: 2
Cognitive Level: Apply
Client Needs: Physiological Integrity: Pharmacological Therapies
Integrated Process: Clinical Problem-solving Process (Nursing Process)
Reference: p. 372, Herbal Considerations

17. The nurse determines the appropriate nursing diagnosis for a client is Ineffective Airway Clearance. Which instructions will the nurse prioritize for this client? Select all that apply.
A) Encouraging increased fluid intake
B) Assisting the client in taking deep, diaphragmatic breaths
C) Discouraging client movement
D) Instructing the client to avoid coughing
E) Encouraging the client to change positions

Answer: A, B, E

Rationale: Clients should be encouraged to change positions frequently, breathe deeply, and increase fluid intake to aid in effectively clearing the airway of sputum. Coughing helps to move mucus. Discouraging movement and coughing will contribute to the collection of secretions and result in this diagnosis.
Question Format: Multiple Select
Chapter: 30
Learning Objective: 4
Cognitive Level: Apply

Client Needs: Physiological Integrity: Basic Care and Comfort
Integrated Process: Clinical Problem-solving Process (Nursing Process)
Reference: p. 374, Ineffective Airway Clearance

18. A client suffers from motion sickness. Which drug would the nurse anticipate the primary health care provider to prescribe? Select all that apply.
A) Promethazine
B) Diphenhydramine
C) Levocetirizine
D) Azelastine
E) Pseudoephedrine

Answer: A, B

Rationale: Both promethazine and diphenhydramine can be used in the treatment of motion sickness. Levocetirizine is a second-generation antihistamine which is used to treat allergic rhinitis and urticaria. Azelastine is also a second-generation antihistamine and is used in the treatment of seasonal and vasomotor rhinitis. Pseudoephedrine is a decongestant and used to treat nasal congestion.
Question Format: Multiple Select
Chapter: 30
Learning Objective: 2
Cognitive Level: Apply
Client Needs: Physiological Integrity: Pharmacological Therapies
Integrated Process: Clinical Problem-solving Process (Nursing Process)
Reference: p. 368, Antihistamines

19. The nurse is preparing to administer a drug to a client reporting nasal congestion. Which drug does the nurse anticipate administering? Select all that apply.
A) Loratadine
B) Guaifenesin
C) Dextromethorphan
D) Phenylephrine
E) Oxymetazoline

Answer: D, E

Rationale: Phenylephrine and oxymetazoline are decongestants that reduce swelling in the nasal passages by vasoconstriction. Loratadine is an antihistamine, guaifenesin is an expectorant, and dextromethorphan is a centrally acting antitussive.
Question Format: Multiple Select
Chapter: 30
Learning Objective: 2
Cognitive Level: Analyze
Client Needs: Physiological Integrity: Pharmacological Therapies
Integrated Process: Clinical Problem-solving Process (Nursing Process)
Reference: p. 370, Decongestants

20. The nurse is preparing to administer an antihistamine to a client. Which actions should the nurse prioritize during the preadministration assessment? Select all that apply.
    A) Ask about symptoms.
    B) Check visual acuity.
    C) Ask about prescription medications.
    D) Auscultate bowel sounds.
    E) Auscultate heart sounds.

    Answer: A, C

    Rationale: The preadministration assessment for clients receiving antihistamines depends on the reason for use but should at the least include asking about symptoms of the involved areas and asking about prescription and over-the-counter medications the client is taking. Assessing the visual acuity and auscultating the bowel and heart sounds are part of the initial general assessment and should already be completed. Preadministration assessments are evaluating specific areas which are or could be affected by the prescribed medication.
    Question Format: Multiple Select
    Chapter: 30
    Learning Objective: 3
    Cognitive Level: Apply
    Client Needs: Physiological Integrity: Reduction of Risk Potential
    Integrated Process: Clinical Problem-solving Process (Nursing Process)
    Reference: p. 373, Preadministration Assessment

21. The nurse is monitoring a client for the effectiveness of a prescribed decongestant. Which factors should the nurse prioritize in the ongoing assessment? Select all that apply.
    A) Heart sounds
    B) Blood pressure
    C) Level of congestion
    D) Therapeutic effect
    E) Pain assessment

    Answer: B, C, D

    Rationale: The ongoing assessment for a client taking a decongestant should include assessment of blood pressure and pulse and asking about level of congestion, therapeutic effect, and adverse reactions. Assessing heart sounds would be important after administering a variety of cardiac medications. Pain assessment would be necessary after administering pain medication to assess the effectiveness of the medication.
    Question Format: Multiple Select
    Chapter: 30
    Learning Objective: 3
    Cognitive Level: Apply
    Client Needs: Physiological Integrity: Reduction of Risk Potential
    Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 373, Ongoing Assessment

22. When teaching a client about using a decongestant in a nasal spray form, which instruction would the nurse include? Select all that apply.
    A) "Recline on a bed and hang your head over the edge."
    B) "Overuse can make the symptoms return."
    C) "Make sure the tip of the container is touching the nasal mucosa."
    D) "Do not share the container with anyone except family members."
    E) "Know that nasal burning or stinging may occur."

    Answer: B, E

    Rationale: A client should be instructed to administer a nasal spray while sitting upright and, not allow the tip of the container to touch the nasal mucosa. The client may experience some burning or stinging after the administration of the nasal spray. The container should not be shared with anyone. Overuse can make the symptoms worse resulting in rebound congestion. If the burning and stinging become severe, the health care provider should be notified.
    Question Format: Multiple Select
    Chapter: 30
    Learning Objective: 5
    Cognitive Level: Apply
    Client Needs: Physiological Integrity: Pharmacological Therapies
    Integrated Process: Clinical Problem-solving Process (Nursing Process)
    Reference: p. 374, Educating the Client and Family

23. An elderly client is prescribed an antihistamine. Which finding on the ongoing assessment should the nurse prioritize? Select all that apply.
    A) Hypotension
    B) Hypertension
    C) Dry mouth
    D) Insomnia
    E) Sedation

    Answer: A, C, E

    Rationale: Older adult clients are more likely to experience anticholinergic effects (dry mouth), dizziness, sedation (not insomnia), hypotension (not hypertension), and confusion while taking an antihistamine.
    Question Format: Multiple Select
    Chapter: 30
    Learning Objective: 3
    Cognitive Level: Apply
    Client Needs: Physiological Integrity: Reduction of Risk Potential
    Integrated Process: Clinical Problem-solving Process (Nursing Process)
    Reference: p. 374, Impaired Oral Mucous Membranes

24. The nursing instructor is conducting a teaching session with a group of nursing students analyzing the differences between first- and second-generation antihistamines. The instructor determines the class is successful when the students correctly choose which actions as advantages for administering second generation antihistamines? Select all that apply.
A) Less sedation
B) Fewer anticholinergic effects
C) Less nausea
D) Can be used during pregnancy
E) Can be used during lactation

Answer: A, B

Rationale: Second-generation antihistamines cause less sedation and fewer anticholinergic effects because they selectively bind to peripheral rather than central H1 receptors. Some first-generation antihistamines can be used as antiemetics. Use of any antihistamine is contraindicated during pregnancy and lactation.
Question Format: Multiple Select
Chapter: 30
Learning Objective: 2
Cognitive Level: Apply
Client Needs: Physiological Integrity: Pharmacological Therapies
Integrated Process: Teaching/Learning
Reference: p. 368, Antihistamines

25. The nurse has administered an antitussive to an older client. Which findings on assessment should the nurse prioritize? Select all that apply.
A) Hearing loss
B) Steady gait
C) Visual impairment
D) Hypertension
E) Salivation

Answer: A, C

Rationale: Older adult clients are more likely to experience injury from dizziness because with age comes an increased risk for falls due to sensorimotor deficits (hearing loss, visual impairment) or unsteady gait. Codeine may cause orthostatic hypotension. Dryness of the mouth would be more of a concern than salivation.
Question Format: Multiple Select
Chapter: 30
Learning Objective: 2
Cognitive Level: Apply
Client Needs: Physiological Integrity: Physiological Adaptation
Integrated Process: Clinical Problem-solving Process (Nursing Process)
Reference: p. 373, Injury Risk

26. The nurse is preparing to administer naphazoline to a client. The nurse will exercise caution if which disorder is noted in the client's history on preadministration assessment? Select all that apply.
    A) Diabetes
    B) Glaucoma
    C) Hypotension
    D) Hypothyroidism
    E) Arthritis

    Answer: A, B, D

    Rationale: The nurse should administer decongestants cautiously to clients with thyroid disease, diabetes mellitus, cardiovascular disease, prostatic hypertrophy, coronary artery disease, peripheral vascular disease, hypertension (instead of hypotension), and glaucoma. These clients should contact their primary health care provider before taking over-the-counter decongestants. Arthritis is not recognized to be a reason for cautious use.
    Question Format: Multiple Select
    Chapter: 30
    Learning Objective: 2
    Cognitive Level: Apply
    Client Needs: Physiological Integrity: Reduction of Risk Potential
    Integrated Process: Clinical Problem-solving Process (Nursing Process)
    Reference: p. 370, Decongestants

27. After teaching a group of nursing students about antihistamines, the instructor determines that the teaching was successful when the students correctly choose which drugs as less sedating? Select all that apply.
    A) Loratadine
    B) Fexofenadine
    C) Cetirizine
    D) Brompheniramine
    E) Clemastine

    Answer: A, B, C

    Rationale: Loratadine, fexofenadine, and cetirizine are considered second-generation antihistamines that are less sedating than first-generation antihistamines (brompheniramine and clemastine).
    Question Format: Multiple Select
    Chapter: 30
    Learning Objective: 1
    Cognitive Level: Understand
    Client Needs: Physiological Integrity: Pharmacological Therapies
    Integrated Process: Teaching/Learning
    Reference: p. 368, Antihistamines

28. A client taking metoprolol 50 mg one tablet twice daily begins taking over-the-counter pseudoephedrine. The nurse would assess for which potential reaction? Select all that apply.
    A) Hyperglycemic episode
    B) Hypertensive episode
    C) Rebound congestion
    D) Hypoglycemic episode
    E) Bradycardic episode

    Answer: B, E

    Rationale: A client taking a beta-adrenergic blocker, such as metoprolol, and a decongestant, such as pseudoephedrine, may develop an initial hypertensive episode followed by a bradycardic episode. Rebound congestion is common with overuse of INS. Decongestants should be used cautiously in clients with diabetes mellitus.
    Question Format: Multiple Select
    Chapter: 30
    Learning Objective: 1
    Cognitive Level: Apply
    Client Needs: Physiological Integrity: Pharmacological Therapies
    Integrated Process: Clinical Problem-solving Process (Nursing Process)
    Reference: p. 370, Decongestants

29. A client presents to the urgent care center reporting prolonged congestion which has not been relieved by an over-the-counter nasal spray or by a decongestion which was added later. Which suggestions should the nurse prioritize? Select all that apply.
    A) Suggest the client switch from a topical decongestant to an oral product.
    B) Recommend the client switch from an oral decongestant to a topical product.
    C) Tell the client to abruptly discontinue the decongestant product.
    D) Advise the client to gradually discontinue the decongestant product.
    E) Suggest a saline irrigation of the nasal passages in place of the decongestant.

    Answer: A, D, E

    Rationale: The client is possibly experiencing rebound congestion which is related to overuse of decongestants. It can be treated by a switch from a topical to an oral decongestant, gradual discontinuation of the topical decongestant, or replacement of the topical decongestant with saline irrigation of the nasal passages.
    Question Format: Multiple Select
    Chapter: 30
    Learning Objective: 5
    Cognitive Level: Apply
    Client Needs: Physiological Integrity: Reduction of Risk Potential
    Integrated Process: Clinical Problem-solving Process (Nursing Process)
    Reference: p. 374, Ineffective Airway Clearance

30. A client with allergies reports increased sedation after the initiation of chlorpheniramine. Which medications should the nurse point out as alternative medications for this client? Select all that apply.
    A) Diphenhydramine
    B) Clemastine
    C) Loratadine
    D) Cetirizine
    E) Phenylephrine

    Answer: C, D

    Rationale: Loratadine and cetirizine are second-generation antihistamines, which can be less sedating than first-generation antihistamines, like chlorpheniramine, diphenhydramine, and clemastine. Phenylephrine is a decongestant used to treat nasal congestion.
    Question Format: Multiple Select
    Chapter: 30
    Learning Objective: 1, 5
    Cognitive Level: Apply
    Client Needs: Physiological Integrity: Pharmacological Therapies
    Integrated Process: Clinical Problem-solving Process (Nursing Process)
    Reference: p. 369, Respiratory System Reactions