

Chapter 34, Antihypertensive Drugs

1. A client is admitted to the emergency department with a severe headache, nausea, shortness of breath, and blood pressure of 200/120 mm Hg. Which response should the nurse **prioritize**?
 - A) Take a blood pressure every 30 minutes.
 - B) Alternate the arms for assessing the blood pressure and pulse.
 - C) Continuously monitor the client's status.
 - D) Measure the pulse rate every hour.

Answer: C

Rationale: When the client has a severe hypertensive emergency (such as an extremely elevated blood pressure), does not have the expected response to drug therapy, or is critically ill, continuous monitoring is performed. The alarm should be set to alert the medical staff if the blood pressure continues to rise. The client is at risk of developing serious complications such as a stroke, kidney failure, or retinopathy if the blood pressure is not lowered quickly.

Question format: Multiple Choice

Chapter: 34

Learning Objective: 5

Cognitive Level: Apply

Client Needs: Physiological Integrity: Reduction of Risk Potential

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 437, Ongoing Assessment

2. A client presents to the urgent care clinic reporting severe dizziness. On assessment, the nurse learns the client was recently prescribed losartan and quit taking it thinking it was responsible for the dizziness. Which assessment should the nurse **prioritize**?
 - A) Breathing difficulty
 - B) Rebound hypertension
 - C) Orthostatic hypotension
 - D) Anginal attacks

Answer: B

Rationale: Rebound hypertension will occur in clients when antihypertensives are abruptly discontinued. In rebound hypertension, there is a sudden rise in blood pressure when the antihypertensives are withheld. Orthostatic hypotension, anginal attacks, and breathing difficulty are the adverse reactions associated with antihypertensive drug usage and may not occur on stopping the drug.

Question format: Multiple Choice

Chapter: 34

Learning Objective: 4

Cognitive Level: Apply

Client Needs: Physiological Integrity: Reduction of Risk Potential
Integrated Process: Clinical Problem-solving Process (Nursing Process)
Reference: p. 440, Educating the Client and Family

3. The nurse is teaching a client with hypertension about losartan which the health care provider has prescribed. The nurse can explain that losartan exerts which action on the body?
- A) Blocks aldosterone receptors
 - B) Prevents conversion of angiotensin I
 - C) Blocks angiotensin II receptors
 - D) Prevents renin secretion

Answer: C

Rationale: Losartan is an angiotensin II receptor antagonist, acting to block the angiotensin II receptors. By blocking the angiotensin II receptor, the renin-angiotensin system is stopped and consequently blood pressure is reduced. Drugs such as captopril prevent the conversion of angiotensin I. A new drug type—direct renin inhibitors—will inhibit renin and subsequently prevent the angiotensin conversion process. A second newer drug type is selective aldosterone receptor antagonists (SARAs), which blocks the aldosterone process by binding with aldosterone.

Question format: Multiple Choice

Chapter: 34

Learning Objective: 4

Cognitive Level: Remember

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Teaching/Learning

Reference: p. 434, Action of Angiotensin II Receptor Antagonists

4. The nurse is assessing a client with renal disease and discovers the client's blood pressure has increased since the last visit. The nurse suspects the client has developed which concern?
- A) Essential hypertension
 - B) Secondary hypertension
 - C) Rebound hypertension
 - D) Hypertensive emergency

Answer: B

Rationale: In secondary hypertension, there is usually a known cause for the development of hypertension. Renal disease is one of the causes of secondary hypertension. When there is no known cause of hypertension, it is called essential hypertension. Rebound hypertension occurs when a client abruptly stops taking antihypertensive medication. Hypertensive emergency is a high blood pressure state, which has to be lowered immediately.

Question format: Multiple Choice

Chapter: 34

Learning Objective: 1

Cognitive Level: Understand

Client Needs: Physiological Integrity: Physiological Adaptation

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 431, Nonpharmacologic Management for Hypertension

5. After teaching a group of nursing students on the mechanism of action of angiotensin-converting enzyme inhibitor (ACEI) drugs, the instructor determines the session is successful after the students correctly choose which action as the result of aldosterone?
- A) Inhibits renin secretion
 - B) Causes sodium and water retention
 - C) Causes excess potassium retention
 - D) Promotes angiotensin I conversion

Answer: B

Rationale: Aldosterone causes retention of sodium and water. This in turn causes a rise in blood pressure. ACEIs act by inhibiting the conversion of angiotensin I to angiotensin II. Aldosterone does not inhibit the release of renin and is not involved in the retention of potassium. Angiotensin-converting enzymes, and not aldosterone, are involved in the conversion of angiotensin I to angiotensin II.

Question format: Multiple Choice

Chapter: 34

Learning Objective: 3

Cognitive Level: Understand

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Teaching/Learning

Reference: p. 434, Action of Angiotensin-Converting Enzyme Inhibitors

6. A nurse notes a client has a new prescription for fluconazole who has also been administered losartan for several months. The nurse determines the client should be monitored for which result of this combination?
- A) Increased risk of adverse effects of losartan
 - B) Increased risk of hypersensitivity reaction
 - C) Decreased hypotensive effect of losartan
 - D) Increased risk of hypoglycemia

Answer: A

Rationale: Increased risk of antihypertensive effects and adverse reactions are associated with the concomitant use of fluconazole and losartan. Decreased hypotensive effect of losartan is seen with use of indomethacin and does not occur with the concomitant use of these drugs. Increased risk of hypoglycemia can occur when ACEIs and hypoglycemic agents and insulin are used concomitantly. There is an increased risk of hypersensitivity when allopurinol and ACEIs are used concomitantly.

Question format: Multiple Choice

Chapter: 34

Learning Objective: 4

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 436, Interactions

7. A client is receiving a diuretic for the treatment of hypertension. Which assessment finding on the laboratory reports should the nurse **prioritize**?
- A) Hyperkalemia
 - B) Hyponatremia
 - C) Hypomagnesemia
 - D) Hypocalcemia

Answer: B

Rationale: The nurse should assess for hyponatremia in clients receiving diuretics. Diuretic usage causes electrolyte disturbances such as hyponatremia and hypokalemia. The nurse should inform the primary health care provider if signs and symptoms of electrolyte imbalance occur. Hyperkalemia can occur with direct renin inhibitor medications. Hypomagnesemia and hypocalcemia are not recognized adverse reactions to antihypertensive medications.

Question format: Multiple Choice

Chapter: 34

Learning Objective: 5

Cognitive Level: Apply

Client Needs: Physiological Integrity: Reduction of Risk Potential

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 439, Dehydration

8. A client is prescribed clonidine as a transdermal patch. After instructing the client about this drug, the nurse determines that the teaching was successful when the client states that the patch should remain in place for how long?
- A) 24 hours
 - B) 3 days
 - C) 7 days
 - D) 2 weeks

Answer: C

Rationale: The nurse should ensure that the transdermal patch is intact for a period of 1 week. A clonidine transdermal patch should be applied to a hairless area over the torso for 1 week. If the patch loosens before 7 days, it has to be reinforced. The nurse has to mark the date of placement and the date of removal of the patch on the surface of the patch.

Question format: Multiple Choice

Chapter: 34

Learning Objective: 8

Cognitive Level: Analyze

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Teaching/Learning

Reference: p. 438, Promoting an Optimal Response to Therapy

9. A client, aged 60 years, is receiving nitroprusside for hypertensive emergency. The nurse would be alert for the development of which reaction?
- A) Significant hypotension
 - B) Rebound hypertension
 - C) Blindness
 - D) Stroke

Answer: A

Rationale: An older adult client is at risk for significant hypotension when receiving nitroprusside. To prevent this, the dosage should be reduced during the initial period of therapy. Rebound hypertension can occur when an individual suddenly stops taking an antihypertensive medication. This puts extreme stress on target organs such as the heart, kidney, and eyes, which could result in a stroke or blindness in the client if not treated quickly.

Question format: Multiple Choice

Chapter: 34

Learning Objective: 4

Cognitive Level: Apply

Client Needs: Physiological Integrity: Reduction of Risk Potential

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 438, Promoting an Optimal Response to Therapy

10. A nurse is analyzing the medical records of several clients who have come to the clinic for a visit. The nurse determines that a client with which blood pressure readings would be identified as prehypertensive?
- A) 112/72 mm Hg
 - B) 128/86 mm Hg
 - C) 144/92 mm Hg
 - D) 164/102 mm Hg

Answer: B

Rationale: Prehypertension is classified as a systolic blood pressure ranging between 120 and 139 mm Hg or a diastolic pressure ranging between 80 and 89 mm Hg. A systolic pressure below 120 mm Hg and a diastolic pressure below 80 mm Hg are considered normal. Stage 1 hypertension would be characterized by a systolic pressure between 140 and 159 mm Hg or a diastolic pressure between 90 and 99 mm Hg. Stage 2 hypertension would be characterized by a systolic pressure of 160 mm Hg or greater or a diastolic pressure of 100 mm Hg or greater.

Question format: Multiple Choice

Chapter: 34

Learning Objective: 2

Cognitive Level: Analyze

Client Needs: Physiological Integrity: Physiological Adaptation

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 4, Introduction

11. The nursing mentor is supervising a group of nursing students in the clinic. The mentor determines the students are well prepared when they **prioritize** which assessment with clients receiving medications such as doxazosin?
- A) Pain rating
 - B) Blood pressure monitoring
 - C) Weight measurement
 - D) Level of consciousness

Answer: B

Rationale: Doxazosin is an example of an antiadrenergic drug given to individuals for the treatment of hypertension. Although assessing for pain, measuring weight, and assessing for levels of consciousness are important, monitoring the client's blood pressure would have the highest priority because the drug therapy regimen may need to be adjusted or changed if the client's response is inadequate.

Question format: Multiple Choice

Chapter: 34

Learning Objective: 6

Cognitive Level: Understand

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 437, Ongoing Assessment

12. The nursing instructor has completed a teaching session explaining the various antihypertensive drugs. The instructor determines additional training is needed when the students choose which drugs as an angiotensin-converting enzyme inhibitor?
- A) Pindolol
 - B) Benazepril
 - C) Quinapril
 - D) Enalapril

Answer: A

Rationale: Pindolol is a beta-adrenergic blocker. Benazepril, quinapril, and enalapril are ACEIs.

Question format: Multiple Choice

Chapter: 34

Learning Objective: 3

Cognitive Level: Understand

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Teaching/Learning

Reference: p. 441, Summary Drug Table

13. The nurse is preparing to teach a group of middle-aged clients ways to reduce hypertension. Which instruction(s) should the nurse point out during this session? Select all that apply.
- A) Lose weight.
 - B) Stop smoking.
 - C) Reduce stress.
 - D) Decrease exercise.
 - E) Increase sodium intake.

Answer: A, B, C

Rationale: Nonpharmacologic management of hypertension should include weight loss, stress reduction, regular aerobic exercise (not decrease exercise), smoking cessation, moderation of alcohol, and decreased sodium intake (not increase intake).

Question format: Multiple Select

Chapter: 34

Learning Objective: 1

Cognitive Level: Apply

Client Needs: Physiological Integrity: Reduction of Risk Potential

Integrated Process: Teaching/Learning

Reference: p. 431, Nonpharmacologic Management for Hypertension

14. The nurse is preparing a presentation for a local health fair to explain various aspects of hypertension. Which factor(s) should the nurse include when pointing out various risk factors that can increase the potential of developing hypertension? Select all that apply.
- A) Lack of potassium in the diet
 - B) Chronic alcohol use
 - C) Men older than 50 years
 - D) Hispanic ethnicity
 - E) Obesity

Answer: A, B, E

Rationale: Recognized risk factors for hypertension include the following: women older than 55 years and men older than 45 years; African American has a greater risk over Asian, Caucasian, or Hispanics; obesity; excessive dietary intake of sodium and too little potassium; chronic alcohol consumption; lack of physical activity; cigarette smoking; and family history of hypertension and/or cardiovascular disease, diabetes, or persistent stress.

Question format: Multiple Select

Chapter: 34

Learning Objective: 1

Cognitive Level: Understand

Client Needs: Physiological Integrity: Reduction of Risk Potential

Integrated Process: Teaching/Learning

Reference: p. 430, Box 34.1 Risk Factors for Hypertension

15. The nursing instructor is teaching a group of students about the various medications used to treat hypertension. After the session, the instructor determines the session is successful when the students correctly connect which action(s) with calcium channel blockers? Select all that apply.
- A) Relaxation of blood vessels
 - B) Increased oxygen supply to the heart
 - C) Reduced workload on the heart
 - D) Decreased blood pressure
 - E) Increased workload on the kidneys

Answer: A, B, C, D

Rationale: The use of calcium channel blockers results in relaxation of blood vessels, increased oxygen supply to the heart, reduced workload on the heart, and decreased blood pressure. The overall goal of treating hypertension is to help decrease the workload on the heart and kidneys. One of the dangers of a hypertensive crisis is kidney damage due to the increased workload.

Question format: Multiple Select

Chapter: 34

Learning Objective: 4

Cognitive Level: Understand

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 434, Action of Calcium Channel Blockers

16. The nurse is reviewing the client's laboratory results and notes the potassium level is 6 mEq/L. The nurse should question the continued administration of which drug(s) if noted in the client's record? Select all that apply.
- A) Atenolol
 - B) Aliskiren
 - C) Clonidine
 - D) Metoprolol
 - E) Eplerenone

Answer: B, E

Rationale: Normal potassium levels should be between 3.5 and 5 mEq/L. Direct renin inhibitors such as aliskiren and the drug eplerenone can cause hyperkalemia. Atenolol and metoprolol are beta-blockers. Clonidine is a centrally acting adrenergic drug.

Question format: Multiple Select

Chapter: 34

Learning Objective: 4

Cognitive Level: Analyze

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 439, Dehydration

17. A client is admitted to the emergency department in hypertensive crisis. The nurse will **prioritize** which assessment(s) to monitor for potential damage as this client receives emergent treatment? Select all that apply.
- A) Heart
 - B) Kidneys
 - C) Gallbladder
 - D) Pancreas
 - E) Eyes

Answer: A, B, E

Rationale: A hypertensive emergency, if not recognized and treated quickly, can result in damage to target organs including the heart, kidneys, and eyes. The gallbladder and pancreas are not recognized as target organs.

Question format: Multiple Select

Chapter: 34

Learning Objective: 1

Cognitive Level: Apply

Client Needs: Physiological Integrity: Reduction of Risk Potential

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 434, Uses

18. The client with hypertension, who has been prescribed aliskiren, reports to the clinic not feeling well. Which assessment(s) finding should the nurse **prioritize**? Select all that apply.
- A) Heart rate above 100 beats per minute
 - B) Fever greater than 100°F
 - C) Swelling of the face
 - D) Swelling of the throat
 - E) Blood pressure above 170/100 mm Hg

Answer: C, D

Rationale: An adverse reaction to aliskiren is angioedema. Angioedema presents with swelling of the face, lips, throat, or extremities. The client should immediately call the health care provider to report the symptoms and get instructions regarding treatment. The increased heart rate, fever, and elevated blood pressure would be related to other sources and would also need to be investigated and treated appropriately; however, they are not indications of angioedema.

Question format: Multiple Select

Chapter: 34

Learning Objective: 4

Cognitive Level: Apply

Client Needs: Physiological Integrity: Reduction of Risk Potential

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 438, Promoting an Optimal Response to Therapy

19. The nurse is preparing to administer nadolol. Which assessment(s) should the nurse investigate before administering the medication? Select all that apply.
- A) Pulse rate on both arms
 - B) Pulse rate on one arm
 - C) Blood pressure in the sitting position
 - D) Blood pressure on both arms
 - E) Blood pressure on one arm

Answer: A, C, D

Rationale: Preadministration assessment for any antihypertensives should include blood pressure and pulse rate on both arms, not just one, with the client in lying, sitting, and standing positions.

Question format: Multiple Select

Chapter: 34

Learning Objective: 5

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 437, Preadministration Assessment

20. A client with hypertension comes to the clinic for a follow-up visit. Which activit(ies) would be appropriate for the nurse to do when assisting the client in managing their hypertension? Select all that apply.
- A) Find local resources in the community for taking blood pressure
 - B) Teach client how to properly record weight and blood pressure
 - C) Schedule regular monitoring of weight and blood pressure
 - D) Schedule an appointment to see a cardiologist
 - E) Schedule an appointment to see a nephrologist

Answer: A, B, C

Rationale: In the ambulatory care setting, the nurse helps plan a schedule of regular monitoring of weight and blood pressure, finds local resources for taking blood pressure in the community, and teaches the client how to record weight and blood pressure readings. Scheduling the client to see a cardiologist or nephrologist would be completed if the primary care health provider recommends a consultation to either specialist if the client is developing complications from the hypertension.

Question format: Multiple Select

Chapter: 34

Learning Objective: 8

Cognitive Level: Apply

Client Needs: Health Promotion and Maintenance

Integrated Process: Teaching/Learning

Reference: p. 440, Educating the Client and Family

21. The nurse is conducting an ongoing assessment after the administration of an antihypertensive. About which finding(s) should the nurse **prioritize** notifying the primary health care provider? Select all that apply.
- A) Weight gain of 0.9 kg (2 lb) or more per day
 - B) Headache
 - C) Edema
 - D) Insomnia
 - E) Sedation

Answer: A, C

Rationale: The nurse should notify the primary health care provider if a client has a weight gain of 0.9 kg (2 lb) or more per day or edema of the hands, fingers, feet, legs, or sacral area. Sedation is a potential adverse reaction of clonidine, guanabenz, and methyldopate. A headache is a potential adverse reaction of many of the antihypertensives but does not warrant an emergent report to the health care provider. Insomnia is a potential adverse reaction to labetalol.

Question format: Multiple Select

Chapter: 34

Learning Objective: 5

Cognitive Level: Apply

Client Needs: Physiological Integrity: Reduction of Risk Potential

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 437, Ongoing Assessment

22. The nurse is teaching a client with hypertension about the prescribed transdermal clonidine. The nurse determines the session is successful when the client correctly articulates which instruction(s)? Select all that apply.
- A) A new patch is applied daily.
 - B) If the patch loosens, a new patch should be applied.
 - C) The use of the adhesive overlay is not necessary.
 - D) A different body area should be selected for each application.
 - E) The patch should be applied to a hairless area.

Answer: D, E

Rationale: The patch is applied to a hairless area of intact skin on the upper arm or torso; the patch is kept in place for 7 days. The adhesive overlay is applied directly over the system to ensure the patch remains in place for the required time. A different body area is selected for each application. If the patch loosens before 7 days, the edges can be reinforced with nonallergenic tape. The date the patch was placed and the date the patch is to be removed can be written on the surface of the patch with a fiber-tipped pen.

Question format: Multiple Select

Chapter: 34

Learning Objective: 8

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Teaching/Learning

Reference: p. 438, Promoting an Optimal Response to Therapy

23. An elderly client with hypertension is prescribed labetalol. Which instruction(s) should the nurse **prioritize** giving the client? Select all that apply.
- A) Sit on the bed for 1 or 2 minutes when rising from a lying position.
 - B) Rise quickly from a chair when moving to a standing position.
 - C) Take the antihypertensive less frequently if hypotension occurs.
 - D) Have someone assist the client if dizziness or weakness occurs.
 - E) Increase salt intake to counteract the hypotension.

Answer: A, D

Rationale: Some antihypertensive medications can cause orthostatic hypotension, which can lead to increased risk of falls. The nurse explains that when rising from a lying position, the client should sit on the edge of the bed for 1 or 2 minutes; the client should rise slowly from a chair and then stand for 1–2 minutes; and when symptoms of orthostatic hypotension occur, someone assisting the client in getting out of bed or a chair can decrease the risk of falls due to orthostatic hypotension. The client should not decrease or change the dose without consulting with the health care provider first, as this may cause rebound hypertension. Increased sodium intake will not counteract hypotension but could increase the blood pressure leading to more adverse reactions.

Question format: Multiple Select

Chapter: 34

Learning Objective: 8

Cognitive Level: Apply

Client Needs: Physiological Integrity: Reduction of Risk Potential

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 439, Injury Risk

24. The nurse is teaching a client and caregiver about the antihypertensive medication that has been prescribed. Which instruction(s) should the nurse point out as **most** important to the client and caregiver? Select all that apply.
- A) "Never discontinue use of the antihypertensive drug except on the advice of the health care provider."
 - B) "Avoid the use of nonprescription drugs unless approved by the health care provider."
 - C) "Avoid alcohol unless its use has been approved by the health care provider."
 - D) "Know that unexplained weakness or fatigue is a normal adverse reaction."
 - E) "Notify the health care provider if the diastolic pressure suddenly increases to 130 mm Hg or higher."

Answer: A, B, C, E

Rationale: The client should be told to never discontinue the drug unless advised to do so, avoid nonprescription drugs unless approved, avoid alcohol unless it is approved, and notify the health care provider if the diastolic pressure suddenly increases to 130 mm Hg or higher. The client also should contact the health care provider if unexplained weakness or fatigue occurs.

Question format: Multiple Select

Chapter: 34

Learning Objective: 8

Cognitive Level: Apply

Client Needs: Physiological Integrity: Reduction of Risk Potential

Integrated Process: Teaching/Learning

Reference: p. 440, Educating the Client and Family

25. A client with hypertension is prescribed atenolol. Which assessment finding(s) on the ongoing assessment should the nurse evaluate **first**? Select all that apply.
- A) Cough
 - B) Hyperkalemia
 - C) Bradycardia
 - D) Dizziness
 - E) Constipation

Answer: C, D

Rationale: Common adverse reactions seen with atenolol, a beta-adrenergic blocker, include bradycardia, dizziness, fatigue, weakness, hypotension, nausea, vomiting, diarrhea (not constipation), and nervousness. Cough is associated with ACE inhibitors. Hyperkalemia is associated with eplerenone and aliskiren.

Constipation is not a common adverse reaction with atenolol.

Question format: Multiple Select

Chapter: 34

Learning Objective: 5

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 441, Summary Drug Table

26. A nursing student is preparing a presentation discussing hypertension. Which factor(s) should the student explain can increase the risk of someone developing hypertension? Select all that apply.
- A) Advancing age
 - B) Family history
 - C) Caucasian race
 - D) Cigarette smoking
 - E) Chronic alcohol consumption

Answer: A, B, D, E

Rationale: Risk factors for hypertension include advancing age (women older than 55 years and men older than 45 years), family history, cigarette smoking, obesity, excessive dietary intake of salt and too little intake of potassium, lack of physical activity, and chronic alcohol consumption. African Americans have higher rates than Asian, Caucasian, or Hispanic individuals.

Question format: Multiple Select

Chapter: 34

Learning Objective: 1

Cognitive Level: Analyze

Client Needs: Health Promotion and Maintenance

Integrated Process: Teaching/Learning

Reference: p. 430, Box 34.1 Risk Factors for Hypertension

27. The nurse is preparing to administer losartan to a client with hypertension. The nurse should question this order if which disorder(s) is noted in the client's medical record? Select all that apply.
- A) Bilateral stenosis
 - B) Angioedema
 - C) Pregnancy
 - D) Diabetes
 - E) Hyperlipidemia

Answer: A, B, C

Rationale: The use of ACEIs (such as benazepril, captopril, enalapril, fosinopril, lisinopril, moexipril, perindopril, quinapril, ramipril, and trandolapril) and ARBs (such as azilsartan, candesartan, eprosartan, irbesartan, losartan, olmesartan, telmisartan, valsartan, and valsartan/sacubitril) are contraindicated if the client has impaired renal function, heart failure, salt or volume depletion, bilateral stenosis, or angioedema or is pregnant. Diabetes is often the cause of secondary hypertension and necessitates treatment. Some of the antihypertensives are also used in the treatment of diabetic nephropathy. An elevation of various electrolytes such as sodium, potassium, and magnesium is more of a concern than hyperlipidemia.

Question format: Multiple Select

Chapter: 34

Learning Objective: 4

Cognitive Level: Apply

Client Needs: Physiological Integrity: Pharmacological Therapies

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 435, Contraindications

28. A nurse is preparing to teach a client about captopril, which has been prescribed to treat hypertension. Which instruction(s) should the nurse point out during this teaching session? Select all that apply.
- A) Taking the drug with meals to decrease GI upset
 - B) Informing the client about the possibility of a cough
 - C) Crushing the capsule before taking it
 - D) Taking measures to reduce injury from hypotension
 - E) Reporting any swelling of the face, throat, or extremities

Answer: B, D

Rationale: The client needs to know that some clients experience a dry cough that does not subside until drug therapy is discontinued and this reaction may need to be tolerated. In addition, these drugs may cause a significant drop in blood pressure after the first dose, so the client needs to take measures to reduce the risk of injury from the drug's effects. The ACE inhibitors, captopril and moexipril, should be taken 1 hour before or 2 hours after meals to enhance absorption. The drugs are sustained-release capsules that should not be crushed, opened, or chewed. ACEIs do not cause angioedema.

Question format: Multiple Select

Chapter: 34

Learning Objective: 8

Cognitive Level: Apply

Client Needs: Physiological Integrity: Reduction of Risk Potential

Integrated Process: Teaching/Learning

Reference: p. 438, Promoting an Optimal Response to Therapy

29. A client has a nursing diagnosis of activity intolerance related to fatigue and weakness. Which action(s) would be appropriate for the nurse to include in the client's plan of care? Select all that apply.
- A) Encouraging ambulation as tolerated
 - B) Maintaining bed rest as much as possible
 - C) Mandating the use of assistive devices
 - D) Encouraging activities early in the morning when fatigue is less
 - E) Promoting rest periods throughout the day as necessary

Answer: A, E

Rationale: The client is encouraged to walk and ambulate as they can tolerate. Assistive devices may be used if needed, but these should not be mandated for use. The client can gradually increase tolerance by increasing the daily amount of activity. Planning rest periods according to the individual's tolerance is appropriate. Rest can take many forms, such as sitting in a chair, napping, watching television, or sitting with legs elevated.

Question format: Multiple Select

Chapter: 34

Learning Objective: 7

Cognitive Level: Apply

Client Needs: Physiological Integrity: Reduction of Risk Potential

Integrated Process: Clinical Problem-solving Process (Nursing Process)

Reference: p. 439, Activity Intolerance