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NCLEX RN Pharmacology Part 4 | Nursing - NCLEX RN Pharmacology Part 4 | Nursing by Exam practices for Nursing 239 views 6 months ago 31 minutes - NCLEX RN Pharmacology Part III https://youtu.be/CtPLwR8p_bo NCLEX RN Pharmacology Part II <https://youtu.be/KwSCInM9nuE> ...
Intro

Chew the tablet thoroughly. Rationale: Antacid tablets should be chewed thoroughly and followed by a full glass of water or milk. Options 2, 3, and 4 are incorrect.

With meals Rationale: The client who is receiving aluminum hydroxide should take the medication with meals. The phosphate-binding effect of this medication is most effective when it is taken with food. If tablets are used, they should be chewed well before swallowing.

Abdominal pain Rationale: Dantrium is hepatotoxic. The nurse observes for indications of liver dysfunction, which include jaundice, abdominal pain, and malaise. The nurse notifies the primary health care provider if these occur. The signs and symptoms in the remaining options are expected side effects due to the central nervous sys

Are the most common side effects of this medication Rationale: Drowsiness, dizziness, and dry mouth are the most common side effects of cyclobenzaprine, and these side effects usually diminish with continued therapy. This medication is a centrally acting skeletal muscle relaxant used in the management of muscle spasm that accompanies a variety of conditions. The remaining options are incorrect.

Creatinine concentration Rationale: Acquired immunodeficiency syndrome is a viral disease caused by the human Immunodeficiency virus (HIV), which destroys T cells, thereby increasing susceptibility to infection and malignancy. Foscarnet is an antiviral medication. Because foscarnet is toxic to the kidneys, serum creatinine is monitored before therapy, 2 or 3 times per week during induction therapy, and at least weekly during maintenance therapy. It also may cause decreased levels of calcium, magnesium, phosphorus, and potassium, so these are monitored with the same frequency. The blood tests in the remaining options are not associated with adverse effects of the medication.

Constipation Rationale: Clonidine is an antihypertensive medication. Side effects of clonidine include dry mouth, drowsiness, constipation, and hypotension. Therefore, symptoms in the remaining options are incorrect.

Increased pulse Rationale: Pirbuterol is an adrenergic bronchodilator. Side and adverse ef-

fects include tachycardia, hypertension, chest pain, dysrhythmias, nervousness, restlessness, and headache. The nurse monitors for these effects during therapy. The other options are not side and adverse effects of this medication.

"The medications will kill the bacteria and stop the acid production." Rationale: Triple therapy for H. pylori infection usually includes 2 antibacterial medications and a proton pump inhibitor. Clarithromycin and amoxicillin are antibacterials. Esomeprazole is a proton pump inhibitor. These medications will kill the bacteria and decrease acid production.

NCLEX RN Pharmacology Part III - NCLEX RN Pharmacology Part III by Exam practices for Nursing 185 views 11 months ago 37 minutes - NCLEX RN Pharmacology Part II <https://youtu.be/KwS-ClnM9nuE> NCLEX RN Leadership <https://youtu.be/KCSB61mJ0hA> NCLEX ...

A client is receiving tacrolimus to prevent organ rejection. Which is a nursing consideration associated with this medication?

The nurse has provided instructions to a client receiving enalapril maleate for hypertension. Which statement by the client indicates a need for further instruction?

The nurse reads that metoclopramide is prescribed for a client. Based on this prescription, the nurse expects to note that which diagnosis is documented?

The nurse prepares to teach a client with subarachnoid hemorrhage about the effects of nimodipine. The nurse plans to explain which information about the type and action of this medication?

The nurse is providing instructions to the client newly diagnosed with diabetes mellitus who has been prescribed pramlintide. Which instruction should the nurse include in the discharge teaching?

The nurse is caring for a postpartum client with a diagnosis of deep vein thrombosis who is receiving a continuous intravenous infusion of heparin sodium. Review of which laboratory result is the most important by the nurse?

The nurse is evaluating the serum acetylsalicylic acid results for a client receiving acetylsalicylic acid for rheumatoid arthritis. Which noted result is indicative that the client is within the range for the medication's antiarthritic effect?

The nurse is providing discharge instructions to a client receiving trimethoprim

The client who is seropositive for human immunodeficiency virus (HIV) has been taking ritonavir.

The nurse tells the client that which follow-up laboratory study will be necessary while taking this medication?

A client with acquired immunodeficiency syndrome who is taking zidovudine 200 mg orally 3 times daily has severe neutropenia noted on follow-up laboratory studies. The nurse interprets that which change is likely to occur at this point?

Rh,(D) immune globulin is prescribed for a client after delivery, and the nurse provides information to the client about the purpose of the medication. The nurse determines that the woman understands the purpose if the woman states that it will protect her next baby from which condition?

An adolescent with severe cystic acne has been prescribed isotretinoin. Which statement by the client would suggest the need for further teaching?

The nurse is instructing a client who is taking levothyroxine and tells the client that full therapeutic benefits will be seen when?

A client is experiencing impotence after taking guanfacine. The client states, "I would sooner have a stroke than keep living with the effects of this medication." What is the most appropriate response by the nurse?

A client arrives at the clinic complaining of fatigue, lack of energy, constipation, and depression. Hypothyroidism is diagnosed, and levothyroxine is prescribed. What is an expected outcome of the medication?

A client is being discharged on warfarin sodium, and the nurse provides Instructions to the client regarding the medication. Which statement, if made by the client, indicates to the nurse that the client understands the teaching provided?

A miotic medication has been prescribed for the client with glaucoma, and the client asks the nurse about the purpose of the medication. Which response should the nurse provide to the client?

Meperidine has been prescribed for a client to treat pain. Which side and adverse effects should the nurse monitor for? Select all that apply.

The nurse is assisting in the care of a client being discharged on phenytoin 100 mg three times daily. When providing client teaching about this medication, the nurse should be sure to include which points? Select all that

Rifabutin is prescribed for a client with active Mycobacterium avium complex (MAC) disease and tuberculosis. For which side and adverse effects of the medication should the nurse monitor? Select all that apply. 1.

NCLEX RN Pharmacology Part II - NCLEX RN Pharmacology Part II by Exam practices for Nursing 193 views 1 year ago 35 minutes - NCLEX RN Leadership <https://youtu.be/KCSB61mJ0hA> NCLEX RN Mental Health part II <https://youtu.be/WnRPM-dfjy8> ...

Intro

A client with medullary carcinoma of the thyroid has an excess function of the C cells of the thyroid gland. When reviewing the most recent laboratory results, the nurse should expect which electrolyte abnormality?

Colchicine is prescribed for a client with a diagnosis of gout. The nurse reviews the client's record, knowing that this medication would be used with caution in which disorder?

Hydrochlorothiazide has been prescribed for a client with hypertension. The nurse contacts the primary health care provider (PHCP) to verify the prescription if which condition is noted in the assessment data?

Hydrochlorothiazide has been prescribed for a client with hypertension. The nurse contacts the primary health care provider (PHCP) to verify the prescription of which condition is noted in the assessment data? 1. Hypertension

A home health nurse visits a client who suffered a back injury. On reviewing the primary health care provider's prescriptions, the nurse notes that codeine sulfate has been prescribed for the client, and the nurse provides instructions to the client regarding the medication. Which statement, if made by the client, indicates an understanding of health measures related to the medication?

The clinic nurse is performing an admission assessment on a client and notes that the client is taking azelaic acid to treat acne. The nurse determines that which client complaint may be associated with use of this medication?

A client who has a cold is seen in the emergency department with an inability to void. Because the client has a history of benign prostatic hyperplasia, the nurse determines that the client should be questioned about the use of which medication?

A client is receiving ganciclovir. Which nursing action is appropriate during the time the client is receiving this medication?

A client diagnosed with schizophrenia has a new prescription for risperidone. Which baseline laboratory result should the nurse review before administering the first dose of this medication?

A client gives the home health nurse a bottle of clomipramine. The nurse notes that the medication has not been taken by the client in 2 months. Which behavior observed in the client would validate noncompliance with this medication?

A client gives the home health nurse a bottle of clomipramine. The nurse notes that the medication has not been taken by the client in 2 months. Which behavior observed in the client would validate noncompliance with this medication?

A client in preterm labor is being started on intravenous magnesium sulfate to stop the contractions. Several hours later, when the nurse is performing an assessment, the following data are obtained: blood pressure, 110/66 mm Hg; pulse, 66 beats per minute; respirations, 10 breaths per minute; and deep tendon reflexes absent. What should the nurse do next?

The nurse is caring for a client in labor who is receiving oxytocin by intravenous infusion to stimulate uterine contractions. Which assessment finding should indicate to the nurse that the infusion needs to be discontinued?

The nurse is reviewing the results of a test on a sample drawn from a child who is receiving carbamazepine for the control of seizures. The results indicate a serum carbamazepine level of 10 mcg/ml. (42.33 mmol/L). The nurse analyzes the results and anticipates that the primary health care provider (PHCP) will note which prescription?

The client with acquired immunodeficiency syndrome and Pneumocystis Jiroveci infection has been receiving pentamidine. The client develops a temperature of 101° F (38.30 C). The nurse continues to assess the client, knowing that this sign most likely indicates which condition?

A client is diagnosed with herpes simplex virus type 1 (HSV 1). The primary health care provider prescribes a topical medication for treatment. The nurse anticipates that which medication will be prescribed?

A client with hypertension has begun taking spironolactone. The nurse teaches the client to limit intake of which food?

Terbutaline is prescribed for a client with bronchitis. The nurse checks the client's medical history for which disorder in which the medication should be used with caution? 1. Osteoarthritis 2. Hypothyroidism 3. Diabetes mellitus 4. Polycystic disease

The nurse is caring for a client with acquired immunodeficiency syndrome (AIDS) who is receiving didanosine. The nurse understands that side and adverse effects associated with this medication

include which findings? Select all that apply.

Hygiene Part II | Fundamentals of Nursing | Nursing school | Study Guide - Hygiene Part II | Fundamentals of Nursing | Nursing school | Study Guide by Exam practices for Nursing 757 views 1 year ago 57 minutes - by Potter|Perry Stockert|Hall **Exam questions**, + NCLEX **questions**, Hygiene Part I <https://youtu.be/qG-ghG3fqc8> Perioperative ...

A nurse caring for a male patient observes the nursing assistive personnel (NAP) performing perineal care. Which of the following observed actions indicates a need for further teaching for the NAP? The NAP

The nurse is teaching the parents of a child who has head lice (pediculosis capitis). Which information will the nurse include in the teaching session?

The nurse is teaching a patient about contact lens care. Which instructions will the nurse include in the teaching session?

A nurse is listening to a student provide instruction to a patient who is having difficulty with activities needed to care for soft contact lenses. Which of the following statements by the nursing student might require some correction by the nurse?

When a nurse delegates hygiene care for a male patient to a nurse assistant, the assistant must use an electric razor to shave the patient with the following diagnosis

The nurse is caring for a patient who is immobile. The nurse frequently checks the patient for impaired skin integrity. What is the rationale for the nurse's action?

The nurse is caring for a patient who has diabetes mellitus and circulatory insufficiency, with peripheral neuropathy and urinary incontinence. On which areas does the nurse focus care?

The patient has been brought to the emergency department following a motor vehicle accident.

The patient is unresponsive. The driver's license states that glasses are needed to operate a motor vehicle, but no glasses were brought in with the patient. Which action should the nurse take next?

The nurse is caring for a patient who has peripheral neuropathy. Which clinical manifestations does the nurse expect to find upon assessment? (Select all that apply.)

The use of critical thinking attitudes is necessary to design a plan of care to meet the patient's hygiene needs. Which of the following are considered critical thinking attitudes? (Select all that apply.)

The patient is being fitted with a hearing aid. In teaching the patient how to care for the hearing aid, which instructions will the nurse provide?

When you are assigned to a patient who has a reduced level of consciousness and requires mouth care, which physical assessment techniques should you perform before the procedure? (Select all that apply.)

Cholinergic–Blocking Drugs | Pharmacology and the Nursing Process | Nursing school | Study Guide - Cholinergic–Blocking Drugs | Pharmacology and the Nursing Process | Nursing school | Study Guide by Exam practices for Nursing 411 views 1 year ago 18 minutes - By Lilley|Rainforth Collins|Snyder 9th Edition **Exam questions**, + NCLEX **questions**, Fluids and Electrolytes ...

NCLEX RN Leadership | Nursing school - NCLEX RN Leadership | Nursing school by Exam practices for Nursing 180 views 1 year ago 44 minutes - NCLEX RN Mental Health part II <https://youtu.be/Wn-RPM-dfjy8> NCLEX-RN Infection Control <https://youtu.be/dEABeYNcNVg> ...

A hospitalized client tells the nurse that an instructional directive is being prepared and that the lawyer will be bringing the document to the hospital today for witness signatures. The client asks the nurse for assistance in obtaining a witness to the will. Which is the most appropriate response to the client?

The nurse witnesses an automobile crash on a highway and stops to provide assistance to the victim.

The nurse notes that the client has sustained a head injury and a compound fracture to the left leg.

The nurse provides the appropriate care before transport of the victim to the hospital by ambulance.

The client develops a severe bone infection at the site of the fracture that requires amputation of the leg and files suit against the nurse who provided care at the scene of the crash. Which is accurate regarding the nurse's immunity from this

Nursing staff members are sitting in the lounge taking their morning break. An assistive personnel (AP) tells the group that she thinks that the unit secretary has acquired immunodeficiency syndrome (AIDS) and proceeds to tell the nursing staff that the secretary probably contracted the disease from her husband, who is supposedly a drug addict. The registered nurse should inform the AP that making this accusation has violated which legal tort?

The nurse in the hospital emergency department is notified by emergency medical services that several victims who survived a plane crash will be transported to the hospital. Victims are suffering from cold exposure because the plane plummeted and was submerged in a local river. What is the initial action of the nurse?

The community health nurse is working with disaster relief after a tornado. The nurse assists in finding

safe housing for survivors, providing support to families, organizing counseling, and securing physical care when needed. Which level of prevention does the nurse exercise?

A nursing graduate is attending an agency orientation regarding the nursing model of practice implemented in the health care facility. The nurse is told that the nursing model is a team nursing approach. The nurse determines that which scenario is characteristic of the team-based model of nursing practice?

The nurse employed in a mental health clinic is greeted by a neighbor in a local grocery store. The neighbor says to the nurse, "How is Carol doing? She is my best friend and is seen at your clinic every week." Which is the most appropriate nursing response?

The nurse provides an educational session on client rights. Which statement by a member of the session demonstrates the best understanding of the nurse's role regarding ensuring that each client's rights are respected?

While eating lunch in the hospital cafeteria, a nursing student overhears 2 nurses talking about a client. Which is the important information for the nurses to remember when talking about the client? The nurse calls a client's primary health care provider (PHCP) to report that the client, who has heart failure, is demonstrating increased wheezes on lung auscultation and dyspnea. The PHCP is in a hurry because of involvement in a critical care situation in the hospital emergency department and gives the nurse a telephone prescription for furosemide. Afterwards, the nurse realizes that the route of the medication is unclear. Which action by the nurse is the most appropriate?

The nurse hears a client calling out for help, hurries down the hallway to the client's room, and finds the client lying on the floor. The nurse performs an assessment, assists the client back to bed, notifies the primary health care provider, and completes an occurrence report. Which statement should the nurse document on the occurrence report?

The registered nurse (RN) is beginning a new job in a clinic and attends an orientation session. After the session, another new employee asks the RN to describe case management, a component of the discussions in the orientation session, because the employee did not clearly understand the concept. Which statement made by the nurse is the most appropriate?

A registered nurse (RN) is observing a licensed practical nurse (LPN) preparing a client for treatment with a continuous passive motion (CPM) machine. Which action by the LPN requires follow-up by the RN?

The client with a perforated gastric ulcer who is scheduled for emergency surgery cannot sign the operative consent form because of sedation with opioid analgesics. The nurse should take which priority action?

An older woman is brought to the emergency department for treatment of a fractured arm. On physical assessment, the nurse notes old and new ecchymotic areas on the client's chest and legs and asks the client how the bruises were sustained. The client, although reluctant, tells the nurse in confidence that her son frequently hits her if supper is not prepared on time when he arrives home from work. Which is the most appropriate nursing response?

Which identifies accurate nursing documentation notation(s)? Select all that apply.

The nurse has made an error in documentation of the dose administered of an opioid pain medication in the client's record. The nurse draws 1 mg from the vial and another registered nurse (RN) witnesses wasting of the remaining 1 mg. When scanning the medication, the nurse entered into the medication administration record (MAR) that 2 mg of hydromorphone was administered instead of the actual dose administered, which was 1 mg. The nurse should take which action(s) to correct the error in the MAR? Select all that apply.

The nurse manager is discussing the facility protocol in the event of a tornado with the staff. Which instructions should the nurse manager include in the discussion? Select all that apply.

The community health nurse is preparing to teach personnel and family preparedness for disasters to a group of parents of school-age children. Which items should the nurse plan to include in disaster preparedness? Select all that apply.

The nurse in charge of a nursing unit is asked to select the hospitalized clients who can be discharged so that hospital beds can be made available for victims of a community disaster. Which clients can be safely discharged? Select all that apply.

NCLEX RN Mental Health part II | Nursing school - NCLEX RN Mental Health part II | Nursing school by Exam practices for Nursing 163 views 1 year ago 41 minutes - NCLEX-RN Infection Control <https://youtu.be/dEABeYNcNVg> NCLEX RN Maternity Part II <https://youtu.be/G-T62EHUhs0> NCLEX ...

NCLEX RN Infection Control Nursing school - NCLEX RN Infection Control Nursing school by Exam practices for Nursing 376 views 1 year ago 34 minutes - NCLEX RN Maternity Part II

<https://youtu.be/G-T62EHUhs0> NCLEX RN Adult Health part II <https://youtu.be/hfXAxzv1XUc> ... NCLEX RN Maternity Part II | Nursing school - NCLEX RN Maternity Part II | Nursing school by Exam practices for Nursing 250 views 1 year ago 21 minutes - NCLEX **questions**, NCLEX RN Adult Health part II <https://youtu.be/hfXAxzv1XUc> NCLEX-RN Pediatrics part I ...

A fetal heart rate of 90 beats/minute Rationale: A normal fetal heart rate is 110 to 160 beats/minute. Bradycardia or late or variable decelerations indicate fetal distress and the need to discontinue the oxytocin. Increased urinary output is unrelated to the use of oxytocin. The goal of labor augmentation is to achieve 3 good- quality contractions (appropriate intensity and duration) in a 10- minute period. The uterus should return to resting tone between contractions, and there should be no evidence of fetal distress.

Hypertension Rationale: A sign of preeclampsia is persistent hypertension. A low-grade fever or increased pulse rate is not associated with preeclampsia. Generalized edema may occur but is not a specific sign of preeclampsia because it can occur in many conditions.

"We want to attend a support group." Rationale: A support group can help the parents to work through their pain by nonjudgmental sharing of feelings. The correct option identifies a statement that indicates positive, normal grieving. Although the other options may indicate reactions of the client and significant other, they are not specifically a part of the normal grieving process.

NCLEX RN Adult Health part II | Nursing - NCLEX RN Adult Health part II | Nursing by Exam practices for Nursing 254 views 1 year ago 40 minutes - NCLEX **questions**, NCLEX-RN Pediatrics part I <https://youtu.be/5m7NepmsCMQ> NCLEX-RN Pediatrics part II ...

A chest x-ray report for a client indicates the presence of a left apical pneumothorax. The nurse would assess the status of breath sounds in that area by placing the stethoscope in which location?

The nurse is assisting a radiologist to facilitate a thoracentesis. The nurse assists the client to a position that widens the spaces between the ribs to help drain which area?

The nurse is collecting data from a client. Which symptom described by the client is characteristic of an early symptom of benign prostatic hyperplasia?

A client receiving total parenteral nutrition (TPN) experiences sudden development of chest pain, dyspnea, tachycardia, cyanosis, and a decreased level of consciousness. What should the nurse suspect as a complication of the TPN?

A client with medullary carcinoma of the thyroid has an excess function of the C cells of the thyroid gland. When reviewing the most recent laboratory results, the nurse should expect which electrolyte abnormality?

A client is suspected of having systemic lupus erythematosus (SLE). On reviewing the client's record, the nurse should expect to note documentation of which characteristic sign of SLE?

The client with pheochromocytoma is scheduled for surgery and says to the nurse, "I'm not sure that surgery is the best thing to do." Which statement is the appropriate response by the nurse?

The client reports to the nurse that while performing testicular self-examination, he found a lump the size and shape of a pea. Which statement is the most appropriate response to the client?

A client is brought to the emergency department in an unresponsive state, and a diagnosis of hyperosmolar hyperglycemic syndrome is made. The nurse would immediately prepare to initiate which anticipated primary health care provider's prescription?

A client with a diagnosis of diabetic ketoacidosis (DKA) is being treated in the emergency department. Which findings support this diagnosis? Select all that apply.

The nurse teaches a client with diabetes mellitus about differentiating between hypoglycemia and ketoacidosis. The client demonstrates an understanding of the teaching by stating that a form of glucose should be taken if which symptoms develop? Select all that apply.

The nurse provides instructions to a client newly diagnosed with type 1 diabetes mellitus. The nurse recognizes accurate understanding of measures to prevent diabetic ketoacidosis when the client makes which statement?

The nurse is monitoring a client newly diagnosed with diabetes mellitus for signs of complications. Which sign or symptom, if frequently exhibited in the client, indicates that the client is at risk for chronic complications of diabetes if the blood glucose is not adequately managed?

A client with diabetes mellitus demonstrates acute anxiety when admitted to the hospital for the treatment of hyperglycemia. What is the appropriate intervention to decrease the client's anxiety?

The nurse is preparing a plan of care for a client with diabetes mellitus who has

A young man with type 1 diabetes mellitus tells the nurse that he might lose his job because he has been having frequent hypoglycemic reactions. His boss thinks that he is drunk during these episodes and that he has been drinking on the job. Which action by the nurse would best assist this client to meet his needs?

The home health nurse visits a client with a diagnosis of type 1 diabetes mellitus. The client reports a history of vomiting and diarrhea and tells the nurse that no food has been consumed for the last 24 hours. Which additional statement by the client indicates a need for further teaching?

The nurse is caring for a client after hypophysectomy and notes clear nasal drainage from the client's nostril. The nurse should take which initial action?

The nurse is preparing a list of home care instructions for a client who has been hospitalized and treated for tuberculosis. Which instructions should the nurse include on the list? Select all that apply. Fundamentals of Nursing 1 | Nursing Exam (55) - Fundamentals of Nursing 1 | Nursing Exam (55) by Nursing Practice Exam 187,265 views 5 years ago 27 minutes - Take this free NCLEX-RN **practice exam**, to see what types of questions are on the NCLEX-RN exam. The actual NCLEX exam ...

Using the principles of standard precautions, the nurse would wear gloves in what nursing interventions?

The nurse is preparing to take vital sign in an alert client admitted to the hospital with dehydration secondary to vomiting and diarrhea. What is the best method used to assess the client's temperature?

A nurse obtained a client's pulse and found the rate to be above normal. The nurse document this findings as

Which of the following actions should the nurse take to use a wide base support when assisting a client to get up in a chair?

A client had oral surgery following a motor vehicle accident. The nurse assessing the client finds the skin flushed and warm. Which of the following would be the best method to take the client's body temperature?

A client who is unconscious needs frequent mouth care. When performing a mouth care, the best position of a client is

A client is hospitalized for the first time, which of the following actions ensure the safety of the client?

A walk-in client enters into the clinic with a chief complaint of abdominal pain and diarrhea. The nurse takes the client's vital sign hereafter. What phrase of nursing process is being implemented here by the nurse?

It is best describe as a systematic, rational method of planning and providing nursing care for individual, families, group and community

Exchange of gases takes place in which of the following organ?

The Chamber of the heart that receives oxygenated blood from the lungs is the?

A muscular enlarge pouch or sac that lies slightly to the left which is used for temporary storage of food...

The ability of the body to defend itself against scientific invading agent such as bacteria, toxin, viruses and foreign body

Hormones secreted by Islets of Langerhans

It is a transparent membrane that focuses the light that enters the eyes to the retina.

Which of the following cluster of data belong to Maslow's hierarchy of needs

This is characterized by severe symptoms relatively of short duration

Which of the following is the nurse's role in the health promotion

It is describe as a collection of people who share some attributes of their lives.

Five teaspoon is equivalent to how many milliliters (ml)?

Which of the following is the abbreviation of drops?

The abbreviation for micro drop is...

Which of the following is the appropriate meaning of CBR?

1 tsp is equals to how many drops?

1 cup is equals to how many ounces?

The nurse must verify the client's identity before administration of medication. Which of the following is the safest way to identify the client?

The nurse prepares to administer buccal medication. The medicine should be placed...

The nurse administers cleansing enema. The common position for this procedure is...

A client complains of difficulty of swallowing, when the nurse try to administer capsule medication.

Which of the following measures the nurse should do?

Which of the following is the appropriate route of administration for insulin?

The nurse is ordered to administer ampicillin capsule TIP p.o. The nurse should give the medication...

Back Care is best describe as

It refers to the preparation of the bed with a new set of linens

Which of the following is the most important purpose of handwashing

What should be done in order to prevent contaminating of the environment in bed making?

The most important purpose of cleansing bed bath is

Which of the following technique involves the sense of sight?

The first techniques used examining the abdomen of a client is

A technique in physical examination that is use to assess the movement of air through the tracheo-bronchial tree

An instrument used for auscultation is

Resonance is best describe as

The best position for examining the rectum is

The nurse asked the client to read the Snellen chart. Which of the following is tested

Another name for knee-chest position is

The nurse prepare IM injection that is irritating to the subcutaneous tissue. Which of the following is the best action in order to prevent tracking of the medication

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Intro

Which of the following laws allow a mentally stable patient to leave AMA (against medical advice) from a hospital?

You're the nurse caring for a patient who is newly diagnosed with CHF. You may ask the UAP to perform all of the following tasks EXCEPT

Medical battery often occurs when a doctor or other healthcare provider denies you the chance to choose whether to get medical therapy. The act may involve touching or other objectionable behavior and is done with intention. Which of the following is an example of medical battery?

As it pertains to medical competence, nurses are required to deliver a level of care that avoids or minimizes risk. What is the term for this?

In the event that you are unable to speak for yourself, a health care proxy designates a trusted individual as your agent, proxy, or representative to communicate your intentions and make healthcare choices on your behalf. The power of attorney will be the health care proxy. Which of the following individuals would need a health care proxy?

What is the name of the act that states that when a patient is admitted to a healthcare institution, the nurse has a legal obligation to explain and educate the patient about advance directives?

Which of the following ensures that patients receive appropriate care, patient independence and decision-making rights, patient respect, privacy, and access to a complaints mechanism?

It is imperative that the nurse advocate for the patient. Which of the following best describes a nurse advocating for a patient?

What is the term for something that often entails giving responsibility for the outcome while assigning non-licensed assistance people to execute activities or duties linked to patient care?

What is the term for a collaborative approach that supports suggested treatment plans to ensure that patients with disabilities, illnesses, or injuries receive the proper medical care?

12 What is the name of the federal legislation that mandated the development of national standards to prevent the disclosure of sensitive patient health information without the patient's knowledge or consent?

There is a fire on a medical surgical unit on the second floor of the hospital. After the nurse has rescued her patients, what is the next step for the nurse to take?

A nurse in an assisted living cares for many different types of older adults with various health conditions. The nurse knows that patients with sensory changes as they age are at a high risk of which of the following?

The UAP walks into a patient's room who is on oxygen and smoking in his bathroom. What should the UAP do immediately?

A housekeeper is taking out the trash when he is stuck by a needle. What is the appropriate next step for the housekeeper?

What is the acronym that is important to remember when using a fire extinguisher in a fire?

What regulatory body is responsible for enforcing compliance with safety rules and procedures in hospitals?

restraints. The nurse notices that the restraints are tied to the bed rails. What action should the nurse take first?

You're assessing a pre-teen with the father present. The father explains that he is concerned that

his child is experiencing depression. Which of the following is NOT an indicator that the patient is experiencing depression?

You're assessing a newborn and you begin asking the mom if she wants immunizations for her infant. The mom says no. What is your BEST response to the mother?

You're assessing a 3 day old newborn at his first doctor's appointment. The infant was born at 8 lbs 5 oz. Which of the following would warrant concern for this infant?

You're caring for a patient who was recently diagnosed with glaucoma. You know that which of the following ethnicities is at HIGHEST risk for glaucoma

You're assessing a two week old breastfed infant. Which of the following would cause concern?

You're educating a patient on why pap smears are so important for sexually active women. What response by the patient lets you know that the patient understands the education provided?

A 30 year old patient's mother joins him in his PCP's office for an appointment for evaluation of psychotic symptoms that the patient has been experiencing. The mother states that she has noticed that the patient is very withdrawn when around others, he is beginning to make up words that make no sense to her, and has been laughing very loudly at random. Which of the following diagnoses does the nurse anticipate for this patient?

20 A 14 year old girl reports that she feels very ashamed after she binge eats so she takes many laxatives to "offset" what she eats. When the nurse assesses the patient's teeth are yellow and chipped. Which of the following does the nurse anticipate for this patient?

A patient is newly diagnosed with Alzheimer's disease. This patient often experiences memory loss and takes longer to complete normal tasks. Which of the following should be included in this patient's plan of care at home?

A parent brings their 7 year old child with ADHD to the pediatric office for a well-child check up. Which of the following interventions will be BEST for this patient?

A mother presents to the pediatrician's office concerned for her 5 year child with ASD (autism spectrum disorder). She states that her child will start kindergarten in two weeks and she is afraid that her child will not cope well. Which of the following may the nurse suggest to BEST help the child?

You are assessing a patient with a new ileostomy. You notice that the ostomy is purple. Which of the following is MOST likely the issue with the new ileostomy?

You're caring for a patient with an enteral tube. Your physician's orders say to bolus a 450 mL feeding. Before administering the bolus feed you aspirate 550 mL of gastric fluid. Which nursing action is MOST appropriate?

You're a nurse working in the DHS office in your county. You are administering Covid-19 vaccines. Which method will you use to ensure that the vaccine stays in the muscle and does not leak back into the subcutaneous tissue?

You're caring for a patient in an external fixation device. What is the MOST important nursing intervention for this patient?

30 The following are high risks when administering an enema to an older adult EXCEPT

The nurse is caring for a child post op day one from a tonsillectomy. The patient has ibuprofen ordered as needed. The order is for 150 mg q6 hours PRN for pain. Available is 100 mg/5 mL. How many mL will the nurse administer?

A patient who is 3 hours post op from a hysterectomy is ordered 7.5 mg morphine sulfate q 2 hr PRN for pain. The pharmacy sends a vial constituted to 5mg/10mL. How many mL will the nurse give?

The physician orders enoxaparin sodium for a patient who is chairfast. At what angle do you anticipate injecting this medication for a patient with a BMI of 23?

You're caring for a patient on dilantin for seizures. Which of the following is the MOST important information to educate the patient on?

A patient is receiving IV vancomycin 1500 mg daily for cellulitis of his right leg. The patient's vancomycin is scheduled for 9 am. At which of the following times will the nurse draw a vancomycin trough?

A child is ordered cephalexin for an ear infection. Which of the following medications would alert the nurse to clarify orders with the doctor if found on the patient's

A patient is prescribed warfarin for a recent blood clot. Which of the following foods should the patient be educated on to not consume?

A nurse is providing an enema to a 75 year old female patient. The following are high risks when administering an enema to an older adult EXCEPT

An ED nurse is educating a 17 year old patient and her parents with a newly placed plaster cast to her left arm after sustaining a wrist fracture. Which of the following is the MOST important thing to educate the patient and parents on?

The nurse is caring for an 87 year old new home health patient who has had an extended stay in the hospital after a fall that led to a broken hip that required a hip replacement, followed by hospital acquired pneumonia. Which of the following is MOST important for the nurse to

The nurse is caring for a patient who recently suffered a stroke. The physician orders for the patient to be advanced to a clear liquid diet from NPO. Before allowing the patient to drink, which of the following is MOST important for the nurse to confirm?

A nurse working in the intensive care unit has a patient that is experiencing a sudden upper gastrointestinal bleed.. What is the MOST important intervention?

The nurse is caring for a diabetic patient who the nurse finds sweating and only able to mumble words. What is the FIRST intervention for the nurse to take?

A nurse working on a labor and delivery unit suspects that her patient is having a seizure. What is the MOST important intervention for the nurse to provide?

A nurse is assisting a physician at the patient's bedside with inserting a chest tube. What is the most important intervention by the nurse?

A patient has just had a thoracentesis performed at the bedside. Which of the following is most important for the nurse to do?

A patient who is 3 hours post procedure from a bronchoscopy. The patient suddenly states that he has chest pain and is showing signs of shortness of breath. Which of the following does the nurse suspect?

So A nurse is about to assist the physician in a lumbar puncture for a patient with suspected bacterial meningitis. The nurse knows that the patient should be placed in which position?

An infant with hyperbilirubinemia has orders for phototherapy under the bili light. What is the most important education to provide to the parents?

A patient in the ICU is on a ventilator following a diagnosis of Covid-19. The patient has copious amounts of secretions in the lungs and must be suctioned often. Which of the following is the most important thing for the nurse to remember?

A nurse is educating a patient on his diet to support optimal wound healing. The patient asks the nurse what he can eat for lunch. Which of the following would be the best lunch option?

A patient who is 3 days post surgery from a knee replacement was discharged from the hospital yesterday. Today he woke up with symptoms of a cold and states that he does not feel well. Which of the following are most important to report to the surgeon?

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Intro

A gunshot wound victim is transported via EMS to the ED with no next of kin present. The patient needs emergency surgery to save his life. What is the proper way for the nurse to obtain informed consent since the patient cannot sign?

The first and most important step in the nursing process is assessment. Which of the following does assessing entail?

The second step of the nursing process is diagnosis. Which of the following does diagnosis entail? According to Maslow's Hierarchy of needs, a patient must have certain needs met. One of these needs is self-actualization. Which of the following does not fall into the self-actualization category? The nurse on a neuro unit is caring for a patient who recently suffered a stroke. The physician orders for the patient to be advanced to a clear liquid diet from NPO. Before allowing the patient to drink, which of the following healthcare team members should assess the patient? You're the nurse caring for a patient who is newly diagnosed with CHF. You may ask the UAP to perform all of the following tasks EXCEPT

What is the term for something that often entails giving responsibility for the outcome while assigning non-licensed assistance people to execute activities or duties linked to patient care? What is the term for a collaborative approach that supports suggested treatment plans to ensure that patients with disabilities, illnesses, or injuries receive the proper medical care? The nurse on a medical surgical floor with four patients with medications due at 9 am. Which of the following patients will the nurse administer medications to first? Which of the following patients should be assessed first by the nurse?

12 You're a nurse working on the rehabilitation unit and have a new LPN shadowing you today. Which of the following should not be delegated to the new nurse? What is the term used to describe cross-disciplinary activity in medicine? For example, the nurse communicates with a physical therapist for home health needs of the patient. A nurse working in the ICU has a patient that is experiencing a sudden upper gastrointestinal bleed. What is the most important intervention? A patient states to the UAP, "I can't breathe!" Which of the following interventions, if provided by the UAP, would warrant correction by the nurse?

10 The nurse is caring for a diabetic patient who the nurse finds sweating and only able to mumble words. What is the FIRST intervention for the nurse to take? The nurse working on an L&D unit suspects her patient is having a seizure. What is the most important intervention for the nurse to provide? You're educating a 16 year old female on oral birth control pills before she leaves the OBGYN's office. Which of the following statements by the patient assures you that the patient understands the teaching? You're educating a patient on his risks for CAD (coronary artery disease). Which of the following is NOT considered a modifiable risk factor for this patient? Which of the following is NOT considered a primary preventative measure? You're assessing an infant who is 6 months old. You ask the mother which foods have been introduced to the infant. Which of the following would require education from the nurse? Which of the following is not a normal part of aging in the older adult population (65+)?

A patient presents to the ED with tachycardia, hypertension, and hallucinations. His EKG reveals SVT. The patient's temperature is 100.7. His wife states, He had a seizure that lasted more than 5 minutes before EMS arrived. Which of the following substances can the nurse anticipate this patient will test positive for in his urinalysis? A patient with breast cancer came into her PCP's office and stated that she feels extremely tired and worthless to her kids and husband. She states, "maybe they will be better off when I am dead." The nurse understands that the patient needs

A patient with schizophrenia has orders for haldol IM STAT due to extreme aggressive behavior due to hallucinations. When the nurse goes into the patient's room to administer the IM injection, which of the following is the most important for the nurse to ensure safety? A patient who recently started a low dose of a benzodiazepine is at home experiencing a panic attack. The mother calls the patient's PCP and asks what she can do to help her child. What intervention should the nurse educate the mother on? A patient is admitted to the hospital for complications of her chronic pancreatitis. The patient states that she drinks 12 beers per day as well as at least a pint of hard liquor most days. Which of the following medications should the nurse anticipate the physician ordering for this patient? A 16 year old comes into the ED with severe abdominal pain to the right lower quadrant. What is your initial step when assessing this patient? Your patient has a new diagnosis of stroke with a new prescription for warfarin. Which of the following will you educate your patient on? Your patient is gasping for air. Which of the following positions are best to place the patient in? Which of the following lung sounds would be MOST likely heard in a patient with an asthma exacerbation?

You are providing catheter care to a patient with a suprapubic catheter. What is the best way to provide catheter care?

30 You're providing education on medications to a patient that you're discharging. What is the best way to be sure that the patient has understood the education provided?

You're the home health nurse providing medication education to a 67 year old male that lives alone. The patient states that he sometimes forgets to take his medications. How will you know that the patient knows how to take his medications?

30 A teenage patient is admitted to the ICU for overdosing on acetaminophen. You know the antidote for acetaminophen is what?

A nurse is caring for a patient that is an alcoholic. She has been admitted to the hospital and will not be able to drink alcohol. What medication does the nurse anticipate the doctor prescribing for this patient to help with withdrawal symptoms?

The nurse is caring for a patient who has been receiving dilaudid 0.5 mg every 3 hours scheduled for post op surgical pain. The nurse is handing off report and notices that the patient's O2 sat drops to 88%, the patient's chest is not moving, and the patient becomes unresponsive. Which pharmacological therapy do you anticipate needing?

You're giving furosemide via IV push. You know to push it 20 mg/min to prevent which clinical side effect?

A patient is prescribed ferrous sulfate for her chronic anemia. Which of the following medications does the patient need to be educated on?

The MD orders D5W 2 L to infuse over 12 hours. What is the rate of infusion?

A 20 year old patient with down syndrome is unable to perform oral hygiene and has no family with him. Which of the following is the responsibility of the UAP?

A 7 year old patient presents to the ED after falling from his treehouse. X-rays show that the patient sustained a greenstick fracture. Which of the following correctly identifies a greenstick fracture?

A patient presents to the ED complaining of a severe stomach ache to her right lower abdomen. The patient is diagnosed with appendicitis after a CT scan. The patient is later admitted to the medical surgical unit. Which of the following, if stated by the patient, would indicate a medical

The nurse is assessing a patient with a new ileostomy. The nurse notices that the ostomy is purple. Which of the following is MOST likely the issue with the new ileostomy?

The nurse is caring for a patient in an external fixation device on an orthopedic unit. What is the MOST important nursing intervention for this patient?

The nurse is monitoring a 5 year old for increased intracranial pressure after the child fell from his treehouse. Which of the following should be reported to the MD immediately?

The nurse is caring for a patient that is 6 hours post surgery with a Jackson Pratt drain. The nurse knows that the proper way to create suction is to

You're caring for a patient who is 6 hours post surgery after a TURP (transurethral resection of the prostate). The nurse notices that there is bright red blood in the foley drainage tubing. What is the correct intervention by the nurse?

The nurse is educating a patient who is receiving radiation therapy. Which of the following is MOST important to educate the patient on increasing in their diet?

Which of the following is MOST important to educate a patient on when receiving chemotherapy and radiation therapy?

A mother in the transitional stage of labor begins having late decelerations causing the fetus's heart rate to drop. What is the BEST intervention for the nurse to perform?

A nurse is assessing a patient's foley catheter drain tube. The patient has previously had yellow, clear urine. The nurse noticed that there is heavy sediment in the patient's urine. What can the nurse most likely expect to do once notifying the doctor.

A 16 week pregnant mother being seen in her OBGYN's office is a gravida 1 mother who explains to the doctor that she is worried because she has not yet felt her baby move. What education is likely to be provided to the patient?

A patient is being seen in his PCP's office due to pain and redness in his left calf. The site is hot and edematous. What is the most likely intervention to be performed for this patient?

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