Question 1
The nurse manager is reviewing a quality improvement study conducted on a client care issue. List the order in which the steps should be evaluated to determine that the study was completed correctly.
A) Research factors that contribute to better outcomes.
B) Compare outcomes to benchmarks.
C) Identify areas for improvement.
D) Analyze current protocols of care and associated outcomes.
E) Implement changes to improve outcomes.
F) Analyze client outcomes to determine effectiveness of changes.

Question 2
A home health nurse is conducting home visits for several clients who are diagnosed with acquired immunodeficiency syndrome (AIDS). Which client would the nurse see first?
A) A client with Pneumocystis carinii pneumonia (PCP) who called the office this morning to report a new onset of fever, cough, and shortness of breath
B) A client who is receiving lamivudine (Epivir) because of a diagnosis of a low CD4 cell count
C) A client who is receiving IV antibiotics daily for toxoplasmosis
D) A client with wasting syndrome who needs modifications and education regarding dietary changes

Question 3
A client, admitted with irregular chest pain and shortness of breath, complains of fatigue with activity. The client's body mass index (BMI) is 30.5. Which is the priority nursing diagnosis for this client?
A) Fear
B) Ineffective Coping
C) Fluid Volume Deficit
D) Imbalanced Nutrition: More than Body Requirements

Question 4
The nurse is assessing a client with a surgical wound. Which observation indicates that care has been effective for this client?
A) A small area of erythema and edema is present.
B) There is only a scant amount of purulent drainage on the dressing.
C) The client's temperature is 100°F.
D) The client performs wound care independently.

Question 5
The nurse is teaching a group of children and their parents about the prevention of heat-related illness during exercise. Which statement by a parent indicates an appropriate understanding of the preventive techniques taught during the teaching session?
A) "My child only needs to hydrate at the end of an exercise session."
B) "I will have my child stop every 15-20 minutes during the activity for fluids."
C) "Water is the drink of choice to replenish fluids that are lost during exercise."
D) "It is important for my child to wear dark clothing while exercising in the heat."

Question 6
The nurse educator trains case managers on the use of an electronic medical record when providing client care. Which participant statements indicate that training has been effective? Select all that apply.
A) "The record reduces the cost of health care."
B) "Client education is to be documented in the system."
C) "Quality metrics can be observed to reduce readmission rates."
D) "Coordination of care is improved."
E) "The record allows trending of client progress."
Question 7
A nurse on the pediatric unit contemplates the changes in healthcare insurance for 2014 when speaking with other colleagues. Which aspects of the Affordable Care Act (ACA) affect children favorably? Select all that apply.
A) All children are covered regardless of whether the parents are covered.
B) Insurance companies cannot deny coverage based on preexisting conditions.
C) Benefits are paid through private benefactors.
D) The government must make appropriate arrangements for children of laypeople.
E) Insurance companies cannot drop children who have serious illnesses.

Question 8
A female nurse is caring for a 21-year-old male client with a questionable gastrointestinal blockage. The healthcare provider prescribes an enema. Which reaction by the client does the nurse anticipate when planning care?
A) "May I have a visitor as support in the room?"
B) "I have never had an enema before."
C) "I am afraid of having an enema."
D) "I would rather have my doctor perform this procedure."

Question 9
The nurse provides an in-service to peers regarding situations that can affect the comfort level of the clients on the unit. Which client statement indicates that the client’s sense of well-being is negatively impacted?
A) "I was able to sleep uninterrupted last night."
B) "I am so glad that playing cards takes my mind off my worries."
C) "I feel like I have no energy today."
D) "I don't feel any physical pain today."

Question 10
The nurse is providing care to a pregnant client who is experiencing ptyalism. Which will the nurse include in the plan of care for this client?
A) Use a cool-mist vaporizer
B) Use low-sodium antacids
C) Avoid use of nasal sprays and decongestants
D) Suck on hard candy

Question 11
The nurse is teaching a client how to properly administer a new medication. The client goal for this teaching is compliance with the medication regimen. Which client statement best illustrates compliance?
A) "If I take my medications as prescribed, I’ll feel better."
B) "I already knew most of what you told me."
C) "Knowing how to take a new medication properly makes the process much easier."
D) "I think you should have waited until I was ready to go home. Maybe I’d remember better."

Question 12
List the pathophysiology concepts related to the onset of sepsis in sequential order.
A) Macrophage-producing cytokines are released.
B) Endotoxin released by microorganisms sets off an out-of-control inflammatory process.
C) Neutrophils arrive and multiply, occluding capillaries.
D) Vasodilation with increased capillary permeability and fluid leak.

Question 13
The nurse is providing care for a client with a head injury and wants to decrease the client’s risk for developing increased intracranial pressure (ICP). Which assessment data indicates that the nurse is successful? Select all that apply.
A) Sluggish response to verbal stimuli
B) Pupils equal and reactive to light
C) Absent gag reflex
D) Body temperature elevated 1 degree in 4 hours
E) Oxygen saturation 93% via pulse oximetry

Question 14
A client requests a small inflated doughnut-style device to sit on to relieve pressure. Which response by the nurse is most appropriate?
A) "Using the doughnut can cause skin breakdown."
B) "I will obtain the device for you."
C) "I will need to get an order from the physician."
D) "You will need to wait until discharge and use this at home."

Question 15
The nurse is planning care for a client with multiple sclerosis. Which intervention would address the nursing diagnosis of Fatigue?
A) Plan activities with sufficient rest periods.
B) Group activities together so care will not be interrupted.
C) Schedule physical therapy three times a day.
D) Encourage increased activity.

Question 16
As a working professional, the nurse knows that one reason to join the American Nurses Association (ANA) is for which opportunity?
A) To participate in national discussions about resources
B) To determine how to fight for resources locally
C) To advocate for resources through different business sources
D) To gain local and national notoriety

Question 17
While assessing the feet and ankles of an older adult client, the nurse presses a finger into the client’s skin in order to create an indentation. For what is the nurse assessing?
A) Periorbital edema
B) Sacral edema
C) Pitting edema
D) Ascites

Question 18
Lab results are back on a client who has limiting joint pain. Synovial fluid analysis shows no uric acid crystals, bacteria, or blood. The client asks what conditions are possible cause(s) of this pain. What is the nurse’s response? Select all that apply.
A) Trauma
B) Osteoarthritis
C) Septic arthritis
D) Gout
E) Rheumatoid arthritis

Question 19
A client has a body temperature of 95°F and exhibits slurred speech and poor coordination. Which is the priority nursing diagnosis for this client?
A) Imbalanced Body Temperature
B) Disturbed Sensory Perception
C) Hypothermia
D) Acute Confusion
Question 20
The family of an older adult client is informed that the client has delirium. Which statement indicates that the family understands the diagnosis?
A) “Dad has been becoming increasingly forgetful over the last several months.”
B) “The changes in his behavior came on so quickly. He was fine when he woke up but didn’t know the year or where he was by lunch time.”
C) “Maybe it’s just caused by aging. This usually happens when people get older.”
D) “Dad has always been so independent. He’s lived alone for years since my mom died.”

Question 21
During a physical assessment, a client tells the nurse that his penis “hurts” when the shaft is touched. What should the nurse suspect is occurring with this client?
A) Urethral stricture
B) Inflammatory disease
C) Acute orchitis
D) Acute epididymitis

Question 22
The Chief Nursing Officer and Chief Medical Officer in an urban teaching hospital are leading a series of meetings with nurses, physicians, hospital lawyers, and risk managers to review and update hospital privileging procedures and requirements for advanced practice RNs and physicians new to the hospital. This is an example of which type of collaborative team?
A) Complementary
B) Intradisciplinary
C) Interdisciplinary
D) Multidisciplinary

Question 23
In alignment with the contributions of Florence Nightingale, the Vietnam Women’s Memorial was established to honor which individuals? Select all that apply.
A) The memory of Ms. Nightingale
B) The families who lost loved ones during the war
C) The image of the angel of mercy
D) Those who brought a human touch to the suffering and dying
E) Those who developed new surgical advancements and anesthetic agents

Question 24
The novice nurse on the medical-surgical unit would like to have a mentor. Which traits will the novice nurse look for in seasoned nurses when choosing a mentor? Select all that apply.
A) A nurse with many years of experience who is also new to the unit.
B) A nurse with at least 10 year experience.
C) A nurse who is the same gender.
D) A nurse who is an established leader on the unit.
E) A nurse with a master’s degree.

Question 25
The nurse is concerned that a client admitted for a total hip replacement is at risk for thrombus formation. Which assessment finding supports the nurse’s concern?
A) Former cigarette smoker
B) Age 45 years
C) Blood pressure 132/88 mmHg
D) Body mass index (BMI) 35.8
Question 26

The nurse is assessing a postmenopausal client. Which client statement should indicate the need for further assessment by the nurse?

A) “Sex certainly takes longer than it used to, but I'm getting used to that.”
B) “For some reason, I have more sexual desire than ever.”
C) “I use water-soluble lubricant to treat my vaginal dryness.”
D) “I am so glad that I don’t need to worry about sex anymore.”


Question 27

A nurse is caring for a client diagnosed with xerostomia. When educating the client about this condition, the nurse includes which as causative factors for developing this condition? Select all that apply.

A) Antihistamine medications
B) Oxygen therapy
C) NPO status
D) Intravenous electrolyte replacement therapy
E) Tachypnea


Question 28

The nurse is admitting a pediatric client to the hospital with a VP shunt malfunction. The client's family speaks very little English. The interpreter has arrived and the nurse is obtaining a health history from the parents and learns that the client received the shunt at birth after a menigocele repair. Based on this data, which product should be avoided when providing care to this client?

A) Synthetic rubber gloves
B) Latex gloves
C) Non-powdered nitrile gloves
D) Polyethylene gloves


Question 29

A community health nurse is providing education to a group of adults regarding myocardial infarction (MI). When discussing ways to decrease the number of MI-related deaths, which statement by the nurse is inappropriate?

A) “Increase your knowledge of cardiac health and cardiac-related disease.”
B) “Seek immediate medical attention when you suspect an MI.”
C) “Be sure to take a baby aspirin every day to help prevent an MI.”
D) “It is important to learn how to perform cardiopulmonary resuscitation (CPR) techniques.”


Question 30

The nurse is providing care to a client who is experiencing a crisis. Which statement by the client indicates that the goals of care have not been met?

A) “I am not sure whom I am going to call when I start feeling like this again.”
B) “I came up with some ideas on how to cope when I am in this position.”
C) “I feel like I am in control and can begin managing things now.”
D) “I can deal with this, I am a strong person, and I have a lot of friends and family.”


Question 31

The nurse is analyzing data collected after assessing a child with a congenital heart defect that decreases pulmonary blood flow. Which nursing diagnosis would be applicable for this client?

A) Excess Fluid Volume
B) Decreased Cardiac Output
C) Acute Pain
D) Ineffective Breathing Pattern


Question 32

The charge nurse, who is a member of Generation X, is training a new nurse, who happens to belong to the Millennial generation. Which aspects of
Question 33
The nurse is caring for a client who just had amniocentesis and was told that the fetus has Down syndrome. What is an appropriate outcome goal for this client?
A) To complete the work of grieving during the hospital stay
B) To accept the upcoming birth of a baby with special needs
C) To begin the process of grieving the loss of a normal baby
D) To consider the possibility of a therapeutic abortion

Question 34
A novice nurse is providing care to clients on a urology unit. When providing care to a group of clients, which client does the novice nurse identify as being at the greatest risk for developing renal stones?
A) A 65-year-old male with a recent history of myocardial infarction
B) A 50-year-old male with type II diabetes mellitus
C) A 25-year-old female with several episodes of urinary infection
D) A 35-year-old female with quadriplegia from an auto accident

Question 35
A client with a respiratory rate of 8 breaths per minute has an oxygen saturation of 82%. Which nursing diagnosis is a priority for this client?
A) Risk for Infection
B) Decreased Cardiac Output
C) Impaired Spontaneous Ventilation
D) Risk for Acute Confusion

Question 36
The nurse is completing an assessment interview with a client being seen for a yearly physical examination. Which client statement would indicate a possible diagnosis of diabetes mellitus?
A) "I'm slightly winded when I walk up a flight of stairs, but it passes quickly."
B) "I feel a bit tired by mid-afternoon and take a 30-minute nap most days."
C) "I've been experiencing increased thirst during the past several months."
D) "I sometimes have muscle aches in my upper legs at night."

Question 37
The nurse educator prepares to speak to a group of nursing students about direct and indirect insults to the lungs that may lead to the development of acute respiratory distress syndrome (ARDS). Which conditions will the nurse include in the teaching session? Select all that apply.
A) Septic shock
B) Angioplasty
C) Aspirin overdose
D) Head injury
E) Viral pneumonia

Question 38
The nurse suspects a client with one functioning lung is developing chronic respiratory acidosis. Which manifestation did the nurse most likely assess in this client?
A) Warm, flushed skin
B) Daytime sleepiness
### Question 39

An oncology nurse educator is teaching staff nurses about advance directives. Which elements will the nurse include in the teaching session? Select all that apply.

- A) The surrogate decision maker has the authority to authorize admission only to medical facilities and not long-term care facilities.
- B) The surrogate decision maker has the authority to consent to only life-saving medical treatments.
- C) The surrogate decision maker has the authority to have access to all medical records.
- D) The surrogate decision maker has the authority to refuse any medical treatment or diagnostic procedure.
- E) The surrogate decision maker has the authority to consent to any medical treatment or diagnostic procedure.

### Question 40

The nurse is presenting a talk on spinal cord injury for a community health fair. Which statement indicates that the attendees understand the risk factors and prevention methods associated with spinal cord injury?

- A) “There isn’t much I can do to prevent a head injury when another vehicle hits my car.”
- B) “I’m going to spend extra time discussing this talk with my Boy Scout troop because of their higher risk for spinal cord injury.”
- C) “Due to their high risk, I’d like you to present this talk to the Native American population.”
- D) “As long as my grandson wears a helmet, he will be safe on his motorcycle.”

### Question 41

Victims of a boating accident were admitted to the hospital with the diagnosis of hypothermia. Which method of losing body temperature will the nurse plan for when providing care to these clients?

- A) Convection
- B) Insensible water loss
- C) Insensible heat loss
- D) Vaporization

### Question 42

A nurse is caring for a client with glossitis secondary to nutritional deficiencies. Based on this data, which is the priority focus of this client’s care?

- A) Uvula
- B) Tongue
- C) Upper teeth
- D) Upper lip

### Question 43

A client admitted with a cardiac dysrhythmia reports being easily fatigued and frustrated with the inability to perform normal daily activities. Which nursing diagnosis should the nurse select to address this client’s issue?

- A) Depression
- B) Excess Fluid Volume
- C) Situational Low Self-Esteem
- D) Activity Intolerance

### Question 44

The nurse is conducting a class for a group of pregnant clients. Which topics should the nurse include when teaching this group about safety of the fetus?

- A) Suffocation in the crib
- B) Alcohol consumption
- C) Pedestrian accidents
- D) Drowning
### Question 45
The nurse is caring for a client in a long-term care facility. The client has some cognitive impairment that interferes with the ability to independently complete activities of daily living. The nurse has identified Self-Care Deficit as an appropriate nursing diagnosis for this client. Based on this data, which expected outcome is the most appropriate for the nurse to include in the plan of care?

| A) The client, with supervision, will brush teeth twice per day. |
| B) The nurse will stress the importance of adequate fluid intake. |
| C) The client will eliminate safety hazards in the environment. |
| D) The client will be able to name the staff that works on the day shift. |


### Question 46
The sibling of an adolescent client with Down syndrome was hit by a car and killed. The mother plans to hold the funeral before the client gets out of the hospital. Which is the most appropriate response by the nurse when the mother asks if this is the right decision to make?

| A) "You should let the client choose to attend the funeral or not." |
| B) "You should make the decision when you are feeling better." |
| C) "You should let the rest of the family decide on whether the client should attend the funeral." |
| D) "You made the right choice in holding the funeral now." |


### Question 47
The nurse is planning care for a pediatric client diagnosed with human immunodeficiency virus (HIV). The nurse selects Risk for Infection as a priority nursing diagnosis for this pediatric client. Based on this nursing diagnosis, which actions by the nurse are appropriate? Select all that apply.

| A) Assessing the health status of all visitors |
| B) Instructing on the importance of consuming ample fresh fruits and vegetables |
| C) Monitoring hand-washing techniques used by the family |
| D) Teaching proper food-handling techniques to the family |
| E) Administering tuberculosis skin tests every six months |


### Question 48
A client reports an open area on the penis. Which question will help the nurse with data collection?

| A) "Do you think you have a disease?" |
| B) "When did you initially notice this open area?" |
| C) "Have you had sexual intercourse recently?" |
| D) "Are you promiscuous?" |


### Question 49
The nurse has identified the nursing diagnosis Disturbed Sensory Perception: Visual as appropriate for a client with glaucoma. Which intervention should be added to this client's plan of care?

| A) Assess coping mechanisms. |
| B) Provide assistance with meals and eating. |
| C) Turn off lights when leaving the client's room. |
| D) Keep bed rails in the low position. |


### Question 50
A nurse working in the pediatric intensive care unit (PICU) is caring for a child with leukemia. What is the most common type of leukemia in children?

| A) Acute myeloid (myeloblastic) leukemia |
| B) Acute lymphocytic (lymphoblastic) leukemia |
| C) Chronic myeloid (myelogenous) leukemia |
| D) Chronic lymphocytic leukemia |


### Question 51
A client who has been undergoing treatment for chronic back pain has been considering complementary and alternative therapies to manage the pain.
The nurse has assessed the client's needs and discussed the use of available methods with the client. Which client statement indicates the need for further instruction?

A) "I may have some stomach upset associated with glucosamine sulfate."
B) "Chondroitin sulfate is a dietary supplement that I can get over the counter."
C) "Glucosamine sulfate is a medication that must be prescribed by my physician."
D) "Caution is needed with alternative therapies, as they have not been tested by the FDA."


**Question 52**

A client recovering from surgery to repair a fractured hip has a history of osteomyelitis. Which actions by the nurse may reduce this client's risk in the postoperative period? Select all that apply.

A) Assess for pain every 1-2 hours.
B) Use sterile technique for dressing changes.
C) Assess wound for size, color, and drainage.
D) Administer anticoagulants as prescribed.
E) Administer antibiotics as prescribed.


**Question 53**

A client with osteoarthritis tells the nurse about having difficulty walking to the bathroom first thing in the morning. Which nursing action would assist this client?

A) Consult with Physical Therapy for an assistive walking device such as a walker or cane.
B) Discuss the option of residing in an assisted-living facility.
C) Suggest using a bedside commode at home.
D) Suggest a family member provide the client with a bedpan.


**Question 54**

A client with hyperaldosteronism is admitted to the unit and is at risk for impaired gas exchange. Which position should this client be placed to enhance gas exchange?

A) Fowler's position
B) Right Sims position
C) Left side-lying position
D) Prone position


**Question 55**

The nurse is caring for a client who is 3 days postoperative following an emergency appendectomy. The nurse is reviewing the client's lab values and notes that the client's calcium levels have increased since before surgery. Which intervention should the nurse implement to decrease the client's possibility of developing hypercalcemia?

A) Assist the client to ambulate around the room at least three times daily.
B) Measure vital signs every 8 hours.
C) Assist the client to turn, cough, and deep breathe every 2 hours.
D) Irrigate the client's Foley catheter daily.


**Question 56**

The nurse is providing care to a client who is diagnosed with benign prostatic hyperplasia (BPH). The client's primary concern is burning and difficulty when urinating. Based on this data, which nursing diagnosis is the priority for this client?

A) Deficient Knowledge
B) Acute Pain
C) Fluid Volume Overload
D) Fluid Volume Deficit


**Question 57**

The nurse is providing care to clients on a medical-surgical unit. Which independent nursing interventions are appropriate for a client who is experiencing an alteration in oxygenation? Select all that apply.
A) Prescribing bronchodilators  
B) Assisting with positioning  
C) Encouraging deep breathing exercises  
D) Providing suctioning  
E) Monitoring activity intolerance  

**Question 58**

An older adult client with no history of cognitive impairment is showing signs of increased confusion. Which health problem should the nurse suspect is causing this client's confusion?  
A) Lower back strain  
B) Cataracts  
C) Hypertension  
D) Urinary tract infection  

**Question 59**

The nurse is providing care for a client diagnosed with bulimia. The health care provider has prescribed medication to decrease the incidence of binding and purging behavior. Which medication classification will the nurse include in the teaching plan for this client?  
A) Antipsychotic  
B) Mood stabilizer  
C) Anxiolytic  
D) Antidepressant  

**Question 60**

An adolescent client is brought to the emergency department (ED) with fatigue, weight loss, a dry cough, and night sweats. The family just recently immigrated to the United States. Based on this data, for which potential risk should the nurse include when planning care for this client?  
A) Renal failure  
B) Pneumothorax  
C) Pneumonia  
D) Septicemia  

**Question 61**

A client admitted to the hospital with a diagnosis of gout has also been diagnosed with uric acid renal calculi. When planning meals for this client, which diet will the nurse anticipate?  
A) A diet high in calcium  
B) Low-purine diet  
C) Low-sodium diet  
D) A diet low in calcium  

**Question 62**

The nurse is caring for a child with decreased level of consciousness secondary to increased intracranial pressure (ICP) from a head trauma. Which prescription from the healthcare provider should the nurse question?  
A) Administering oxygen at 2 L nasal cannula to keep saturation above 95%  
B) Elevating the head of the bed to 30°  
C) Vital signs and neuro checks every hour  
D) Passive range-of-motion exercises  

**Question 63**

A client is complaining of pain in the lower-left quadrant of the abdomen. The nurse prepares to percuss the abdomen and notes that the client has a great deal of hair on the lower abdomen. Which action by the nurse is appropriate prior to percussing the client's abdomen?  
A) Moistening the abdominal hair  
B) Documenting that the client has hirsutism  
C) Discontinuing the use of percussion, palpate the abdomen only
**Question 64**

The home health nurse visiting a client to complete a wound dressing notes that the client has a flat affect and is not as responsive as during previous visits. The nurse calls the primary healthcare provider for a psychiatric referral. By recognizing the signs and symptoms of possible depression, the nurse is exhibiting which concept of evidence-based practice?

A) Accountability  
B) Professional behaviors  
C) Clinical decision making  
D) Advocacy  


**Question 65**

The nurse is providing care to a client admitted to the emergency department with the diagnosis of acute respiratory distress syndrome (ARDS). When educating the client's family on the disease progress, in which order will the nurse present the material?

A. Initiation of ARDS  
B. Onset of pulmonary edema  
C. End-stage ARDS  
D. Alveolar collapse  


**Question 66**

The nurse is assigned to a postpartum client who had an anesthetic block during labor and delivery. When providing care for this client, which does the nurse anticipate?

A) Risk for hyperkalemia  
B) Nocturnal enuresis  
C) Residual urine  
D) Glycosuria  


**Question 67**

During a home care visit, an older adult client states to the nurse, "my wife died 3 years ago." Which client action is a possible indicator that the client is experiencing complicated grief?

A) The client tells the nurse that his wife was an awful cook and that he has eaten better meals since she died.  
B) The client has an album of photographs of his wife open on the living room table.  
C) The client shows the nurse his wife's craft room and states that it remains just as she left it before she died.  
D) The client indicates that he sends his laundry out to be done because he had never figured out how the washer works.  


**Question 68**

The nurse provides postoperative teaching to a client recovering from cataract removal surgery. Which client statement indicates that preoperative teaching has been effective?

A) "I will be hospitalized for several days recovering from this surgery."  
B) "I will need to return to activity as soon as possible."  
C) "I will notify the doctor if I have itching or redness of the eye after the surgery."  
D) "I will use the eye drops if I have eye pain"  


**Question 69**

A client has a documented stage III pressure ulcer on the right hip. Which nursing diagnosis is most appropriate for this client?

A) Ineffective Peripheral Tissue Perfusion  
B) Impaired Skin Integrity  
C) Impaired Tissue Integrity  
D) Risk for Injury  

Question 70
A client informs the nurse, “My mother keeps telling me to get over the death of my spouse, but I'm having a hard time doing that.” Which action by the nurse is appropriate to assist the client and family?
A) Telling the client that arguing with a parent never ends in a good way
B) Agreeing with the client's mother
C) Refusing to get involved with a family conflict
D) Reminding the client and family that the grief process is different for everyone, and that no time limit can be set

Question 71
The nurse is providing discharge teaching to a postpartum client recovering from deep venous thrombosis (DVT). Which instructions are appropriate for the nurse to include in the teaching session? Select all that apply.
A) Avoid crossing the legs.
B) Avoid long car trips.
C) Avoid prolonged standing or sitting.
D) Take a daily aspirin dose of 650 mg.
E) Take frequent walks.

Question 72
A client has completed the full course of antibiotics prescribed to treat otitis media. Which primary manifestation of the disorder will be relieved as evidence that treatment has been effective?
A) Pain
B) Nausea and vomiting
C) Dizziness
D) Impaired hearing

Question 73
A client plans to use oral contraceptives for birth control. Which client behavior would cause the nurse the most concern?
A) The client is being treated for bipolar disorder.
B) The client drinks two glasses of wine a day.
C) The client has several sexual partners.
D) The client smokes one-half pack of cigarettes a day.

Question 74
The nurse is caring for an adolescent client with cystic fibrosis who is intubated with an endotracheal tube and is breathing with the assistance of a ventilator. The client is currently alert and oriented to surroundings but has been told by the parents that survival may not be likely. Which is the most appropriate nursing diagnosis for this client?
A) Potential for Imbalanced Nutrition, More Than Body Requirements related to inactivity
B) Anxiety related to leaving chores undone at home
C) Potential for Fear of Future Pain related to medical procedures
D) Powerlessness related to inability to speak to or communicate with friends

Question 75
The nurse is providing care for several clients on a medical-surgical unit. The nurse anticipates that the client with which condition may require surgery?
A) Fecal impaction
B) Hepatitis
C) Pyloric stenosis
D) Pancreatitis

Question 76
A client newly diagnosed with type 1 diabetes mellitus tells the nurse that the diagnosis must be wrong because the client is not overweight, eats all of the time, and is thin. Which response by the nurse is most appropriate?
A) "Your lab tests indicate the presence of diabetes."
B) "Thin people can be diabetic, too."
C) "Your condition makes it impossible for you to gain weight."
D) "You are eating large quantities because your condition makes it difficult for your body to obtain energy from the foods taken in."

Question 77

The nurse on third shift missed the last chance for the unit competency, stating, "Oh well, it's not like I don't know what I'm doing." Which is the most accurate description of this nurse's behavior?
A) Pessimism, which endangers the nurse's professionalism
B) Optimism, which helps the nurse realize that things will turn out for the best
C) Arrogance, which keeps the nurse from developing and from accurate assessment of her strengths and weaknesses
D) Sarcasm, which threatens the nurse's job performance

Question 78

The nurse is assigned to a 4-month-old infant with vomiting and diarrhea who is brought to the pediatric clinic. The infant's vital signs are temperature: 37° C, apical HR: 130, R: 40/min. The abdominal assessment reveals a soft, concave abdomen, 10 gurgles auscultated in 1 minute in all four quadrants, and tympani to percussion. Which collaborative care action does the nurse anticipate?
A) Complete a thorough digestion assessment interview with the mother.
B) Prepare a milk-based infant formula to replace fluids.
C) Place the infant NPO for a barium swallow.
D) Check the surgical call schedule and reserve an operating suite.

Question 79

The nurse working on a medical unit is admitting a client diagnosed with heart failure. During the admission process, the client states, "I do not want to be put on a ventilator because I had to watch my mother die on a ventilator. I want information on making out a will." When planning care for this client, which intervention is the most appropriate?
A) Educate the client on the purpose of mechanical ventilation.
B) Educate the client on the process and purpose of a living will and arrange for one to be created should the client choose to do so.
C) Encourage the client to allow for mechanical ventilation.
D) Refer the client to a therapist to deal with the death of her mother.

Question 80

The nurse is planning a teaching seminar for parents of school-age children that focuses on eye safety. What should the nurse include in this educational session?
A) Keep household products within easy reach.
B) Keep sharp objects out of reach of young children.
C) Wear eye goggles when playing outdoors at all times.
D) Supervise when lighting fireworks.

Question 81

During a home visit, the family of a client with fibromyalgia asks the nurse what they can do to help the client with painful episodes. What should the nurse suggest to the client and family?
A) Protect the client from injury.
B) Divide household chores among each member of the family.
C) Keep the client in bed.
D) Plan a family reunion.

Question 82

A nursing instructor is teaching a group of student nurses about the different theories of cognition. Which cognitive development theory proposes that all children progress through the same stages of development?
Question 83
A nurse is conducting a health history on an older adult client in a medical practice. Which assessment finding places the client at risk for osteoporosis?
A) Drinking three glasses of skim milk daily  
B) Eating 3-5 servings of shrimp and liver per week  
C) Using corticosteroids for ten years due to a chronic lung disorder  
D) Having a BMI that indicates obesity  

Question 84
A local health system implemented a number of health promotion policies and plans to prioritize health problems. The system must now evaluate the effectiveness of the interventions. Which groups are stakeholders in this initiative and would be involved in the evaluation process?
A) Only consumers who were directly affected by the services provided  
B) Consumers, community leaders, and politicians  
C) Healthcare providers employed by other health systems  
D) Only hospital and clinic personnel who administered healthcare needs  

Question 85
The nurse is caring for a client recovering from a total hysterectomy. What should the nurse include when instructing this client prior to discharge?
A) The importance of returning to normal activities of daily living as soon as possible  
B) The importance of douching after intercourse for at least 6 weeks  
C) The risks and benefits of hormone replacement therapy  
D) Why bed rest is indicated for at least a month after the surgery  

Question 86
The nurse is collecting a health history for a client being seen in an outpatient clinic who complains of joint pain and swelling that have lasted for about 2 months. The client is diagnosed with rheumatoid arthritis (RA). When planning care for this client, which statement supports the nursing diagnosis of Activity Intolerance?
A) "I seem to get tired early in the day and require a nap."  
B) "I take ibuprofen for the pain as needed."  
C) "My joints are stiffest at night before I go to sleep."  
D) "I find it difficult to move when I first get up in the morning."  

Question 87
The nurse is planning care for a young school-age client newly diagnosed with type 1 diabetes mellitus. The child's mother appears unconcerned with the diagnosis and is complaining about the cost of medication, as three additional children in the family have needs. On which nursing diagnoses should the nurse focus when planning this client's care? Select all that apply.
A) Chronic Pain  
B) Risk for Injury  
C) Knowledge Deficit  
D) Ineffective Coping (Family)  
E) Risk for Unstable Blood Glucose  

Question 88
The nurse is providing care for a client who was the victim of sexual abuse 8 months ago. Which ongoing, long-term treatment goal is appropriate? Select all that apply.
A) Become aware of legal rights.  
B) Establish rapport and build a trusting nurse-client relationship.
C) Demonstrate effective coping strategies.
D) Move from victim to survivor status.
E) Involve significant others in the treatment plan.


Question 89
The community nurse visits the home of a young child who is home from school because of sudden onset of nausea, vomiting, and lethargy. The nurse suspects acute renal failure. Which clinical manifestations support the nurse's suspicions? Select all that apply.
A) Hematuria
B) Edema
C) Wheezing
D) Postural hypotension
E) Elevated blood pressure


Question 90
The nurse is providing care to a client who admits to smoking 2 packs of per day for 34 years. The client also has a history of intermittent claudication, chronic bronchitis, and emphysema. After 6 weeks of smoking cessation the client reports, "yelling at my spouse" and "flying off the handle." Which effects of cigarette smoking are associated with the data collected from the client? Select all that apply.
A) Tar causes the mucus production seen in chronic bronchitis.
B) The release of epinephrine causes vasoconstriction.
C) Nicotine causes destruction of the alveoli.
D) Dopaminergic processes are implicated in withdrawal symptoms.
E) Tobacco use causes atherosclerosis.


Question 91
The nurse is documenting in the electronic medical record (EMR) after providing care in the client's room. The client asks the nurse why a computer is being used. Which response by the nurse is appropriate?
A) "Computers improve client care because information is readily available."
B) "Computers allow you access to your medical record."
C) "The information that is uploaded is available for anyone to view."
D) "The computer decreases documentation time for nurses."


Question 92
The nurse is caring for a client who has a continuous bladder irrigation running following a prostatectomy. During the shift, a total of 1500 mL of irrigant is infused. The Foley bag is emptied twice for the shift with totals of 850 mL and 950 mL. What is the client's actual urine output for the shift?
A) 300 mL
B) 100 mL
C) 250 mL
D) 950 mL


Question 93
A client with H. pylori asks the nurse why bismuth (Pepto-Bismol) has been prescribed along with oral antibiotics for treatment. What should the nurse explain about the use of bismuth (Pepto-Bismol) for treatment of this health problem? Select all that apply.
A) "It keeps bacteria from sticking in your stomach."
B) "It helps prevent the side effects of antibiotics."
C) "It increases stomach acid to help kill bacteria."
D) "It is effective with inhibiting bacterial growth."
E) "It helps relieve ulcer-related constipation."


Question 94
A client admitted with chronic venous insufficiency has an infected wound of the left lower extremity. Which clinical manifestations does the nurse anticipate during the client's assessment? Select all that apply.
A) Ulceration that is pale in color
Question 95
The nurse is caring for a client whose spouse died 3 years ago. The client states to the nurse, “I have dinner with my wife every Saturday night.” The client tells the nurse that he includes a table setting for her and prepares their “usual” steak dinner. He also lights a candle for her each week marking the time of her death. Based on this data, which nursing diagnosis is most appropriate for this client when planning care?
A) Ineffective Coping
B) Risk for Bereavement
C) Death Anxiety
D) Complicated Grieving


Question 96
A nurse is caring for a client in the intensive care unit who is intubated and mechanically ventilated. Upon assessment, the nurse notes the client has cheilosis. Based on this data, which is the priority intervention for this client?
A) Lubricating the lips using an antimicrobial ointment
B) Providing oral care
C) Suggesting an increase in fluid intake
D) Checking for ill-fitting dentures


Question 97
The nurse is caring for an older adult client on a medical-surgical unit. The client tells the nurse, “I don’t get any sleep at night because I have to get up and use the bathroom every couple of hours!” When providing an explanation for the nocturia, which statement by the nurse is the most appropriate?
A) “As you get older, you may have a decrease in bladder capacity.”
B) “As you get older, there is a decrease in cardiac output, which can cause your symptoms.”
C) “As you get older, there is a decrease in number of nephrons.”
D) “As you get older, there is a decrease in the blood supply to your bladder.”


Question 98
A preadolescent client is recovering from spinal fusion surgery for scoliosis. Which interventions would be appropriate related to movement restrictions and pain? Select all that apply.
A) Encourage and assist with ROM exercises every 4 hours while awake.
B) Administer pain medication around the clock.
C) Encourage incentive spirometer use every 4 hours while awake.
D) Monitor intake and output.
E) Reposition every 2 hours.


Question 99
A nurse working in an outpatient OB-GYN clinic is asked to assume care coordination for the clinic’s adolescent clients. Which skills will the nurse need to perform this work?
A) Force field analysis
B) Accounting
C) Critical thinking
D) Relaxation training


Question 100
Which intervention would help a client who is demonstrating stress about being hospitalized and concerned about the needs of the children at home?
A) Find out if the children can be sent to a grandparent’s home until the client fully recovers.
B) Suggest the client be transferred to a long-term care facility to ensure a full recovery.
C) Ask the client if there is anything that is needed once discharged to home.
D) Ask the client if there is anyone who would be able to help with the family needs at home during recuperation.

Question 101
A client tells the nurse, "My mother spent many years in a mental institution, and my father would abuse me when my mother was not around." Based on this data, which is the client at greatest risk for developing?
A) Substance abuse
B) An eating disorder
C) A personality disorder
D) Poor relationships with the opposite sex

Question 102
During the fourth stage of labor, a client's blood pressure is 110/60 mmHg, pulse 90, and the fundus is firm, midline and halfway between the symphysis pubis and the umbilicus. Based on this data, which is the primary action by the nurse?
A) Place the bed in the Trendelenburg position.
B) Turn the client onto the left side.
C) Continue to monitor.
D) Massage the fundus.

Question 103
A client in the manic phase of bipolar disorder will not sit down to eat. Which can the nurse do to ensure adequate nutrition and improved self-care of this client? Select all that apply.
A) Use a jacket restraint at meal times.
B) Provide a sedative before meals.
C) Discuss finger-food options with the dietitian.
D) Provide frequent nutritious snacks.
E) Ask the healthcare provider if intravenous feedings would be applicable.

Question 104
The nurse is caring for an older adult client who is receiving intravenous fluids at 150 mL/hr. Upon assessment, the nurse notes crackles, shortness of breath, and jugular vein distention. Based on this data, which complication of IV fluid therapy does the nurse anticipate?
A) Speed shock
B) Pulmonary embolism
C) Fluid volume excess
D) An allergic reaction

Question 105
The nurse is planning care for a client with a below-the-knee amputation. How will the use of informatics help the nurse plan this client's care?
A) Look for standardized nursing language
B) Find out what was done on the previous admission
C) Search for research to support evidence-based practice
D) Search the Internet for information about the surgical procedure

Question 106
The nurse is planning care for a client in the acute stage of a burn injury. Based on this data, the nurse will include interventions in the plan of care that address which areas? Select all that apply.
A) Wound care
B) Fluid resuscitation
C) Nutrition
D) Pain management
E) Psychosocial support
Question 107
The nurse is evaluating instructions provided to a client with glaucoma. Which client statement indicates that teaching has been effective?
A) "I must use my eye drops as prescribed for the rest of my life."
B) "I can stop the eye drops when the glaucoma has resolved."
C) "I will need to continually increase the dose of my eye drops."
D) "The eye drops only need to be used when my eyes hurt."

Question 108
The nurse is evaluating medication teaching for a client who recently started taking fluoxetine (Prozac) for anxiety. Which statement by the client indicates appropriate understanding of the information presented?
A) "My medication will take 1 week to become effective."
B) "My medication will become effective immediately after I start taking it."
C) "My medication will take 4 weeks to become effective."
D) "My medication will not begin to work for 12 weeks."

Question 109
A client is surprised to learn of being pregnant because the home pregnancy test was negative when it was used a month ago. Which response by the nurse is appropriate?
A) "Home pregnancy tests are unreliable and should not be used without a blood sample being drawn afterward."
B) "Home pregnancy tests can provide a false negative and should be repeated in a week if your period has not yet started."
C) "Home pregnancy tests are unreliable and should not be used without an ultrasound afterward to confirm pregnancy."
D) "Home pregnancy tests lose their effectiveness after 6 months, and your kit was probably old."

Question 110
A client with a history of frequent outbursts and fighting has been receiving treatment to help control emotions and anger. Which client statement shows that treatment has been effective?
A) "As long as my mother doesn’t hit me first, I will not hit her."
B) "My brothers are the only ones I can fight with and not get in trouble."
C) "Hitting people is only justified sometimes."
D) "There are other ways to deal with anger, and I will use them instead of fighting."

Question 111
The charge nurse is observing a newly licensed nurse conduct an abdominal assessment on a client admitted with an abdominal mass that is affecting bowel elimination. Which actions by the newly licensed nurse would require the charge nurse to intervene? Select all that apply.
A) Using deep palpation during the assessment process
B) Using only inspection, percussion, and palpation during the abdominal assessment of the client
C) Performing auscultation before palpation
D) Using inspection, auscultation, percussion, and palpation during the abdominal assessment of the client
E) Performing palpation before auscultation

Question 112
The client with a history of alcohol abuse is being discharged for a treatment facility. Which prescription does the nurse anticipate for this client?
A) Naloxone
B) Bupropion hydrochloride
C) Varenicline
D) Disulfiram

Question 113
A client in the ambulatory care clinic tells the nurse about experiencing frequent diarrhea. The nurse inquires about the client's diet. Which statement from the client would be of greatest concern for the nurse?
Question 114

The client with an anxiety disorder is ready to be discharged from the unit. What should the nurse plan to teach this client and family in preparation for discharge? Select all that apply.
A) Refer the client for counseling.
B) Instruct the client to breathe slowly.
C) Advise the client to breathe into a paper bag when feeling anxious.
D) Instruct the client to eat foods high in acid.
E) Teach the client the signs of impending panic attack.

Question 115

The nurse caring for an adult client from another country notices that the client consults with her mother on all healthcare decisions. What action by the nurse is the most culturally competent?
A) Confront the client's mother to state the importance of the client making her own decisions.
B) Accept the behavior of the client and family member.
C) Ask the client's mother to leave the room to provide the client with more privacy.
D) Ask the client why the parent is being consulted for every decision.

Question 116

The nurse is preparing care for a client recovering from surgery for colorectal cancer. Which interventions should the nurse use when creating a pain management plan for this client? Select all that apply.
A) Assess surgical site for inflammation.
B) Administer pain medication after painful procedures.
C) Assess bowel sounds.
D) Instruct to use a pillow to splint when deep breathing and coughing.
E) Provide pain medication upon request.

Question 117

An older adult client is recovering in the intensive care unit (ICU) from septicemia. Which intervention will help prevent further infection for this client?
A) Sterile wound care
B) Foley drainage on the bed at the client's feet
C) Turn, cough, and deep breathe q shift.
D) Oral and skin care

Question 118

A child weighing 33 lbs. who is diagnosed with dehydration is prescribed to receive 50 mL/kg of oral fluids for the next 4 hours. How many total mL of fluid should the nurse provide to the client? Calculate to the nearest whole number.

Question 119

A newly licensed nurse is attending the hospital orientation training class. Which statement made by the newly licensed nurse indicates understanding of the term "point of care"?
A) "Point of care refers to interventions or testing that takes place using a transportable, portable, or a handheld device near or at the bedside of the client."
B) "Point of care refers to the name of the handheld device."
C) "Point of care interventions and testing do not include any type of specimen testing."
D) "Point of care refers only to testing that takes place using a handheld device near the client."
Question 120
Friends of a client hospitalized with asthma would like to bring the client a gift. Which gift would the nurse recommend for this client?
A) A stuffed animal  
B) A basket of flowers  
C) A book  
D) Fruit and candy  

Question 121
The nurse is providing care to a client in the healthcare clinic. The client's brother was recently diagnosed with benign prostatic hyperplasia (BPH) and wants to know if he is also at risk. Which item in the client's history increases the risk for BPH?
A) Increased levels of estrogen  
B) Increased levels of progesterone  
C) Testicle removal due to cancer  
D) 35 years of age  

Question 122
A nurse manager is working with staff nurses regarding the types and frequency of documentation required for clients being cared for in long-term care facilities. Which laws contribute to the specific documentation required for client's in long-term care facilities? Select all that apply.
A) Minimum Data Set (MDS)  
B) Omnibus Budget Reconciliation Act (OBRA)  
C) Health Care Financing Administration Act  
D) Charting by exception (CBE)  
E) Kardex  

Question 123
A nurse is preparing an educational program for clients in a long-term care facility regarding methods for coping with age-associated cognitive changes. Which information should the nurse include? Select all that apply.
A) Playing board games  
B) Making lists, posting appointments on calendars, and writing notes to self  
C) Becoming involved in activities such as reading that keep the mind active  
D) Using assistive devices such as a pill box for medications  
E) Not relying on habits; challenging your mind to remember new things  

Question 124
The nurse is caring for a child with intellectual deficits who is diagnosed with failure to thrive (FTT). The family is expressing difficulty with managing the child's care needs. Which nursing diagnosis would be appropriate for this situation?
A) Compromised Family Coping related to the child's developmental variations  
B) Dysfunctional Family Processes related to a child with mental retardation  
C) Hopelessness related to terminal condition of the child  
D) Impaired Parenting related to poor parenting skills  

Question 125
The nurse performing an admission assessment on a client must inform the client of client rights and responsibilities. Which client rights are considered standard by many healthcare agencies? Select all that apply.
A) You have the right to be appointed a personal advocate by the healthcare provider.  
B) You have a right to be informed about the care you receive.  
C) You have the right to know the names of your caregivers.  
D) You have the right to refuse care.  
E) You have the right to be treated with courtesy and respect.  
Question 126
A charge nurse notices that a staff nurse assigned for the evening shift has come to work with a black eye. Which action by the charge nurse is appropriate in this situation?
A) Ask the other staff members if abuse is involved.
B) Notify security to approach the nurse about the situation.
C) Discuss the situation with the nurse in a private setting.
D) Ignore the situation until the nurse shows a willingness to talk.

Question 127
The nurse decides to use a standardized plan of care to address a client's health problems. Which criterion differentiates this plan of care from other types? Select all that apply.
A) Has various shapes connected with lines
B) Includes different colors
C) Has blank lines
D) Preprinted
E) Has checklists

Question 128
The nurse is providing care to a client diagnosed with type 2 diabetes mellitus. The client wishes to take Communion but must fast for one hour prior to receiving it. Which action by the nurse is most appropriate?
A) Contact the healthcare provider to suggest an alternative form of nutrition because the client is refusing to eat or drink.
B) Find out when the hospital clergy will be distributing Communion and adjust the client's medications and breakfast accordingly.
C) Suggest that because the client is hospitalized, eating and drinking will not affect the Communion.
D) Provide the client with breakfast and morning medication and encourage the client to eat and take Communion some other time.

Question 129
A preschool-age child is seen in a pediatric oncology clinic. The nurse assigned to care for the client anticipates a diagnosis of cancer. Which reactions are considered common for the preschool-age child to experience with illnesses and hospitalizations? Select all that apply.
A) Acceptance, especially if able to discuss the disease with children their own age
B) Confusion as to why a parent is unable to make the illness go away
C) Understanding of what cancer is and how it is treated
D) Unawareness of the illness and its severity
E) Thoughts that they caused their illness and are being punished

Question 130
A nurse manager is educating a group of staff nurses on recognizing the differences between confusion and delirium. Which statements will the nurse manager include? Select all that apply.
A) "Older adult men are at higher risk for developing delirium."
B) "Adolescents are more prone to developing delirium than young children."
C) "Delirium is a reversible condition while dementia is not."
D) "Delirium is seen only in older adults."
E) "Younger adult females are at higher risk for developing delirium."

Question 131
The nurse conducts education for a client who is experiencing urinary incontinence. Which statement by the client indicates the need for further education?
A) "Reduced urethral resistance can be a cause of incontinence."
B) "Relaxation of pelvic muscles may be a factor in incontinence."
C) "Incontinence is normal with aging."
D) "A disturbance of my bladder is a factor in the development of incontinence."
Question 132
The nurse is planning care for a client who is experiencing confusion. Which action by the nurse ensures safety for this client?
A) Keep the windows in the client's room closed.
B) Place the call bell next to the client.
C) Keep the side rails up on the bed when the client is with a staff member.
D) Administer ordered medication.

Question 133
The local clinic staff has noticed an increase in the flu this season and request more vaccine from the Centers for Disease Control and Prevention (CDC). The nurse knows that the CDC will control the vaccine distribution by considering which factors? Select all that apply.
A) The speed at which the vaccine becomes available
B) Who gets the available vaccine
C) Ensuring that only babies and military personnel receive the vaccine
D) The amount of vaccine being requested by local health departments
E) Ensuring that only medical personnel can receive the vaccine

Question 134
The nurse is assessing a young adult college student who is experiencing red, swollen eyes that are oozing a yellowish drainage. The client is complaining of photophobia. Which is the most appropriate question for the nurse to ask the client?
A) "Have you been exposed to HIV?"
B) "Did you get sand in your eye recently?"
C) "Have you had extra caffeine this week?"
D) "Have any of your friends experienced these symptoms?"

Question 135
A nurse faculty member is speaking to prospective students of the Bachelor of Science in Nursing (BSN) program at their educational institution. Which is a major incentive for students to select a BSN program over an Associate Degree in Nursing (ADN) program? Select all that apply.
A) Better opportunity for career advancement
B) Ability to work in critical care areas
C) Easier transition to graduate school
D) Greater autonomy in the practice setting
E) Liberal arts education

Question 136
The hospice nurse reviews the care provided to a dying client. Which observations indicate that outcomes have been reached for this client? Select all that apply.
A) The family is informed of any changes in the client's condition.
B) The client expresses the intention to recover from the illness.
C) The client is medicated for pain as needed.
D) The client discusses fears regarding death.
E) The client is resting comfortably.

Question 137
A client is admitted with airway edema, bronchoconstriction, and increased mucus production after being exposed to an allergen. Which nursing interventions are appropriate to address this inflammation to the respiratory system? Select all that apply.
A) Restrict fluids.
B) Monitor lung sounds.
C) Monitor oxygen saturation.
D) Administer oxygen as prescribed.
E) Turn and reposition every 2 hours.
Question 138

A young adolescent client is in the hospital preparing for major surgery for the removal of a tumor on the kidney. The client's mother tells the nurse that she doesn't want the child to receive narcotics for pain postoperatively. Which is the best response by the nurse?
A) "Okay, I'll tell the healthcare provider not to order any. Are you sure you want to do this?"
B) "You do not have a choice of medication. Decisions involving pain relief are up to the healthcare providers."
C) "The pain for your child will be severe after surgery. Can you tell me why you feel this way?"
D) "The pain will be severe. Why don't we ask your child about this?"

Question 139

During a health history, the nurse learns that a client has a recent onset of impotence. Which question will help identify a potential cause of this manifestation?
A) "For what diseases and disorders have you been treated?"
B) "Are you on any medications?"
C) "Does this occur often?"
D) "How does your partner feel about this problem?"

Question 140

During an assessment of a child in the urgent care clinic, the nurse notes that the child has a swollen and split lip. When asking the parent how the child's lip injury occurred, the parent responds, "We are here for my child's ear not my child's lip." Which is the rationale for reporting this incident?
A) The nurse can be sued if there is no abuse.
B) Suspected abuse must be reported.
C) The lip injury is unrelated to the ear infection.
D) The child reports that a parent caused the injury.

Question 141

After a mammogram, a client is told that she needs a fine needle aspirate of a breast mass. Which actions by the client demonstrates engagement in a primary appraisal of the stressful situation?
A) Asking the nurse if she has cancer
B) Scheduling the procedure in 6 weeks, which is the earliest possible appointment
C) Holding her breath while the nurse is talking
D) Sitting in the dressing room and cries

Question 142

The nurse is evaluating the success of a bowel retraining program with a client recovering from a lower motor neuron spinal cord injury. Which observations indicate that this teaching has been successful? Select all that apply.
A) One episode of bladder incontinence in 8 hours
B) Maintains a high-fluid, high-fiber diet.
C) Performs self-urinary catheterization every 4 hours while awake
D) Transfers to use bedside commode after breakfast to evacuate bowels
E) Two episodes of impacted stool in 1 week

Question 143

What should the nurse do to assist a client brought to the emergency department as a victim of a gunshot wound?
A) Preserve the chain of evidence.
B) Ask the client where the weapon is.
C) Bathe the client and provide a clean gown.
D) Ask the client who shot him.

Question 144

The nurse receives shift change report on infants born within the last 4 hours. Which newborn should the nurse assess first?
Question 145

A client shows the nurse an area of erythema, swelling, and lesions under a wedding ring. Based on this data, which condition does the nurse suspect?
A) Eczema
B) Irritant contact dermatitis
C) Psoriasis
D) Allergic contact dermatitis

Question 146

The nurse is planning care to address ineffective airway clearance for a client with lung cancer. Which interventions should the nurse include in the client's plan of care? Select all that apply.
A) Administer pneumococcal vaccine.
B) Smoking cessation education
C) Chest percussion every 8 hours
D) Increase fluid intake to 3000 mL per day.
E) Turn, cough, and deep breathe every 2 hours.

Question 147

A postoperative client is transferred to the medical-surgical unit from the intensive care unit (ICU). The client asks the assigned nurse why unlicensed assistive personnel (UAP) help with range-of-motion exercises. Which is the best response by the nurse?
A) "I assigned all of your care to the UAP."
B) "Your condition has improved so I delegated that part of your care to the UAP."
C) "The charge nurse made the decision to have the UAP assist you when walking."
D) "You do not need me to ambulate you."

Question 148

The nurse is assessing a client who is in the third trimester of pregnancy. Which finding would require immediate intervention by the nurse?
A) Weight gain of 16 oz per week
B) Respiratory rate of 24 per minute
C) Blood pressure of 142/92 mmHg
D) Pulse of 92 beats per minute

Question 149

The nurse is planning care for a client with a history of sexually transmitted infections. What should be included in this plan of care?
A) Need to increase fluids and rest
B) Plan for the client to contact sexual partners regarding the diagnosis
C) Importance of adequate nutrition
D) Instruction to limit sexual contact until recovered from illness

Question 150

A nurse educator is explaining the term hyperplasia to a group of nursing students. Which statement, made by a nursing student, indicates an understanding of why hyperplasia occurs with myocardial infarction?
A) "The cells of the heart are metaplastic in response to muscle damage."
B) "The cells of the heart muscle are responding to metabolic needs."
C) "The cells of the muscle experience hyperplasia with the prolonged need for oxygen."
D) "The cells of the heart muscle have lost fluid."
Question 151

The wife of a patient with end-stage chronic obstructive pulmonary disease (COPD) tells the nurse that she wishes her husband were eligible for hospice care but she thinks that hospice is only available for cancer patients. She is also concerned that, even if he were eligible for hospice care, they couldn’t afford it, they’d have medical personnel constantly underfoot, and her husband would have to switch healthcare providers. Which responses by the nurse are appropriate? Select all that apply.

A) Inform her that hospice care is very expensive.
B) Tell her that, even though her husband has end-stage COPD, he is not eligible for hospice care.
C) Inform her that a diagnosis of cancer is not required for hospice care.
D) Inform her that all hospice programs provide 24/7 care.
E) Tell her that, even if her husband receives hospice care, he can remain under the care of his current physician.


Question 152

A client diagnosed with a stroke is going to receive treatment with fibrinolytic therapy using the recombinant tissue plasminogen activator alteplase. Which information will the nurse include when performing medication teaching for the client’s family?

A) Indicated if the stroke symptoms have occurred within the last 6 hours
B) Not associated with serious complications
C) Used to treat thrombotic and hemorrhagic strokes
D) Administered to dissolve the clot that is occluding the cerebral circulation and reestablish circulation to the involved part of the brain


Question 153

A nurse working in a community health center is counseling an adolescent regarding a suspected eating disorder. The adolescent is of normal weight but admits to periods of overeating, especially when experiencing stress. Based on this data, for which potential health problem should the nurse counsel the adolescent?

A) Anorexia
B) An emaciated body
C) Obesity
D) Hunger pangs


Question 154

The nurse is providing care to a client diagnosed with respiratory syncytial virus (RSV) bronchiolitis. Which assessment finding indicate that treatment has been effective?

A) Client ingesting small amounts of clear fluids when encouraged
B) Client resting in bed with limited interest in play or activities
C) Client coughing copious amounts of green sputum and requires occasional suctioning
D) Client respiratory rate within normal limits for age


Question 155

An older Spanish-speaking adult client who recently moved to a new city makes an appointment for a routine annual assessment with a new primary care provider. Which action by the nurse is appropriate when conducting the health history?

A) Having a medical translator available during the health history
B) Asking the client’s adult son to translate during the assessment
C) Providing the client with educational material in English
D) Speaking in a loud tone when addressing the client.


Question 156

The nurse is caring for a client with erectile dysfunction (ED). Which medication should the nurse anticipate being prescribed for this client? Select all that apply.

A) Sildenafil (Viagra)
B) Vardenafil (Levitra)
C) Tadalafil (Cialis)
D) Methylphenidate (Ritalin)
E) Buspirone (BuSpar)
Question 157

A 6-month-old infant is underweight and not meeting developmental goals. Based upon this information, which prescription by the healthcare provider does the nurse anticipate?
A) An assessment by child protective services
B) Speech therapy
C) Physical therapy to promote development
D) Growth hormone

Answer: A)

Question 158

The nurse is conducting a clinic visit with a mother and an adolescent client. Both the mother and the adolescent report that the adolescent does not go to sleep until late at night and then wakes up late in the morning. The mother states, "I don't know what to do." Which response by the nurse is the most appropriate?
A) Inform her that adolescents experience changes in the body's internal clock associated with puberty.
B) Tell her to avoid giving her son any herbal preparations such as melatonin.
C) Recommend a polysomnography (PSG).
D) Inform them that the son's sleep habits, such as bringing electronic devices to bed, have no effect on his sleep pattern.

Answer: A)

Question 159

The nurse is providing care to a client who is diagnosed with hypertension. Which response by the nurse is an appropriate example of informational confrontation with the client?
A) "It is 3 p.m. and time to take your blood pressure before I give you your medication."
B) "I heard raised voices when I was coming down the hall to your room. Are you upset?"
C) "I noticed you rubbing your head and your eyes, are you hurting? Let's take your blood pressure."
D) "Is the blood pressure medication making your head hurt?"

Answer: A)

Question 160

The nurse is providing care to a postpartum client who gave birth 4 hours ago. The client has a mediolateral episiotomy, large hemorrhoids, and states pain is a 7 on a scale of 1-10. She has a history of anaphylactic reaction to Tylenol. Based on this data, which nursing action is appropriate?
A) Offer the client 800 mg ibuprofen (Advil) orally with food.
B) Provide 2 oxycodone with acetaminophen (Percocet) by mouth.
C) Run very warm water into the tub and assist her into the bath.
D) Encourage use of benzocaine topical anesthetic spray (Dermoplast).

Answer: A)

Question 161

The nurse observes a client being treated for depression sitting with the head down and avoiding conversation with peers. Which nursing intervention is appropriate for this client?
A) Ask open-ended questions about the client's feelings.
B) Tell the client that lack of involvement leads to more depression.
C) Ask the client close-ended questions.
D) Encourage a peer to sit with the client and the nurse.

Answer: A)

Question 162

The results of a client's arterial blood gas sample reveal an oxygen level of 72 mmHg. For which associated health problem should the nurse assess this client?
A) Communication
B) Fluid and electrolyte imbalance
C) Cognition
D) Perfusion

Answer: A)
Question 163
A client is admitted to the emergency department with an incomplete spinal cord injury. Which prescription does the nurse anticipate to decrease inflammation and nerve damage?

A) Xylocaine (Lidocaine)
B) Hydrocodone (Vicodin)
C) Ibuprofen (Motrin)
D) Methylprednisolone (Medrol)


Question 164
A client with a burn injury is prescribed mechanical debridement of the wounds. Based on this data, which should the nurse include in the client's plan of care? Select all that apply.

A) Hydrotherapy
B) Application of wet-to-dry gauze dressings
C) Homograft
D) Irrigation of the burn wounds
E) Application of a topical agent to dissolve necrotic tissue


Question 165
The nurse is starting preoperative teaching when the client receives a phone call. When the nurse resumes teaching, the client is visibly upset and begins to cry. Which therapeutic initial response by the nurse is appropriate?

A) "Whatever is upsetting you can be dealt with once we have finished."
B) "I can see the phone call has upset you. Let's talk about why you are upset before we move on with teaching."
C) "What can you do to solve the problem?"
D) "It is very important to focus on this teaching so that you will recover quickly after surgery."


Question 166
A home health nurse is working with a client who has chronic obstructive pulmonary disease. Which nursing diagnosis will take the highest priority for implementing client education?

A) Ineffective Breathing Pattern
B) Activity Intolerance
C) Anxiety
D) Impaired Gas Exchange


Question 167
The nurse is providing care to a Catholic client. Which treatment option may cause this client spiritual distress?

A) Specialized cardiac diet
B) Blood transfusion for anemia
C) A below the knee amputation
D) Elective termination of pregnancy


Question 168
The nurse is teaching a client with a peptic ulcer on appropriate lifestyle alterations. The family voices questions as to why some of the recommendations have been made. Which explanation should be offered by the nurse?

A) "Alcohol stimulates gastric acid secretion, which can cause further irritation."
B) "Cigarette smoking doubles the risk of developing peptic ulcer disease and should be avoided."
C) "Alcohol acts to suppress gastric immunity and should be avoided."
D) "Caffeine intake is often associated with an increase in abdominal pain."


Question 169
The nurse determines that the diagnosis of Ineffective Airway Clearance is appropriate for a client with pneumonia who is experiencing copious
amounts of respiratory secretions. Which intervention should the nurse include in this client’s plan of care?
A) Provide the client with smoking cessation education.
B) Limit fluid intake to 1,000 mL per day.
C) Administer the pneumococcal vaccine prior to discharge.
D) Perform chest percussion every 4 hours and prn.

Question 170

The nurse is teaching a mother to administer ophthalmic ointment to her infant with conjunctivitis. The nurse determines that learning goals have been met when the mother performs which action?
A) Applies the ointment directly to the conjunctival sac.
B) Places the ointment on a swab and spreads it across closed eyelids.
C) Instills the medication to the lacrimal duct.
D) Uses sterile gauze to apply the ointment.

Question 171

A nurse is providing care to an infant who underwent a laparoscopic pyloromyotomy. After providing discharge instructions to the infant’s care givers, which statements indicate appropriate understanding? Select all that apply.
A) “I will hold my baby in an upright position for 15 minutes after each feeding.”
B) “I will burp my baby every 1-2 ounces during feedings.”
C) “I will clean the incision site with warm, soapy water twice per day.”
D) “It is important to slide the diaper under my baby when changing the diaper.”
E) “I will feed my baby 3 times per day.”

Question 172

The nurse is providing care of a client who ignores the urge to defecate when at work. The client states, “I don’t like to have a bowel movement anywhere but at home.” Which response by the nurse is the most appropriate?
A) “If you continue to ignore the urge to defecate, it can lead to problems.”
B) “You will get the urge later, so you should not worry about it.”
C) “It is better to suppress the urge than to suffer embarrassment at work.”
D) “This is a common practice, and it will strengthen the reflex later.”

Question 173

The nurse is reviewing the admission orders for an older adult client who is being admitted for a hysterectomy. The client, who has been diagnosed as having uterine cancer, has chronic pain caused by arthritis. The healthcare provider has prescribed long-acting oral narcotic medication to be administered every 4 hours. What should the nurse do when providing the medication to the client?
A) Administer the medication around the clock.
B) Administer the medication when the client requests.
C) Consult the physician to order intravenous pain medication.
D) Administer the medication sparingly to avoid narcotic addiction.

Question 174

A preschool-age client with myoclonic seizures has been on a ketogenic diet for the last 6 months to reduce seizure activity and is complaining of left-sided lower abdominal pain. Which complication of the ketogenic diet should the nurse suspect the client is experiencing?
A) Renal calculi
B) Urinary tract infection
C) Appendicitis
D) Bowel obstruction

Question 175

The nurse is conducting education regarding urinary health at an assisted living facility. When planning topics to include in the session, which are appropriate to the nurse to consider? Select all that apply.
A) Because of neuromuscular immaturity, voluntary urinary control is absent.
B) Urinary incontinence may occur because of mobility problems or neurological impairments.
C) The kidneys reach maximum size between 35 and 40 years of age.
D) Renal blood flow decreases because of vascular changes and a decrease in cardiac output.
E) Full urinary control usually occurs at 4 or 5 years of age.

Question 176
The nurse is planning care for several clients. Which client has the greatest risk of developing heart failure?
A) A 52-year-old Caucasian female with asthma
B) A 69-year-old African-American male with hypertension
C) A 50-year-old African-American female who smokes
D) A 75-year-old Caucasian male who is overweight

Question 177
The nurse is helping in discharge planning for a diabetic client who needs extensive rehabilitation and is on a complicated medication schedule. The client and spouse currently live with their eldest son and the family is very involved in the client's care. The nurse would want to coordinate the client's care by including which priority individuals? Select all that apply.
A) Client's spouse
B) Primary healthcare provider
C) Client's children
D) Pharmacist
E) Social worker

Question 178
The nurse is planning care for a client with upper body obesity. What teaching should the nurse include in this client's care? Select all that apply.
A) Behavior modification
B) Oxygen consumption
C) Exercise
D) Injury prevention
E) Diet

Question 179
A client diagnosed with cancer is receiving care through a facility that is 100 miles from the client's home. After explaining how telehealth will be used to enhance this client's care, which client statements indicate that teaching about telehealth has been effective? Select all that apply.
A) "This will help lower some costs of care."
B) "I can participate in the videoconference."
C) "I will have to change doctors."
D) "I will have to move closer to the provider."
E) "My health record can stay where I am."

Question 180
While completing a health history with an older adult client, the nurse learns that the client experienced a transient ischemic attack (TIA) several months ago. What does this information suggest to the nurse?
A) The client will not experience a stroke in the future.
B) The client is at high risk for a hemorrhagic stroke.
C) The client is at risk for an ischemic thrombotic stroke.
D) The client will have minimal symptoms should a stroke occur.

Question 181
A male Hispanic client has had a lung biopsy. The results indicate a poor prognosis for the client. The family is at the client's bedside and begins to moan and cry loudly. The health care provider has told the nurse that he needs to have the consent form signed for surgery. The client has asked the nurse to allow the family private time. What should the nurse do at this time?
A) Ask the family to come back later.
B) Take the client to another room.
C) Have the doctor get the consent with the family present.
D) Provide the client and family privacy.

**Question 182**

A 1-month-old infant is admitted to the hospital with a temperature of 102°F. For which reason will this infant receive a septic work-up?

A) Absence of sweat glands
B) Poor lung elasticity
C) Immature immune system
D) Inadequate red blood cells


**Question 183**

The nurse is evaluating care provided to a school-age client recently discharged from the hospital with a new diagnosis of type 1 diabetes mellitus. Which observations indicate that care outcomes have been achieved? Select all that apply.

A) The client watches brothers play Little League baseball on the weekends.
B) The client has a glucagon kit in school backpack and explains how it should be used.
C) The client is documenting blood glucose readings and associated insulin dosages in a notebook next to the glucometer.
D) The client correctly demonstrates drawing up and administering daily insulin dose.
E) The client spends attends school and completes homework before bedtime.


**Question 184**

An older adult client is informed that it is no longer safe for the client to drive at night due to the development of night blindness. Which client statement prompts the nurse to plan a family care conference for the client?

A) "In the summer, I will be able to drive longer."
B) "I will limit my driving to daytime hours."
C) "I guess I'll get help when I need to go out at night."
D) "I expected this to happen eventually, but I think I still see okay at night."


**Question 185**

A client with alcoholism is receiving court-ordered care in a residential treatment facility. After alcohol is discovered in the client's room, the client states, "It is not mine." Which responses by the nurse are appropriate in this situation? Select all that apply.

A) "You have violated our behavior contract."
B) "You will lose your day pass privileges for this Sunday."
C) "We have a video of you accepting the alcohol from your brother."
D) "You won't be allowed to go to dinner tonight."
E) "What do you think about sharing this at AA tonight?"


**Question 186**

The mother of a 1-month-old infant calls the nurse who works in the health clinic. The mother is concerned because the infant has had vomiting and diarrhea for 1 days. The nurse knows that this infant is at risk for metabolic acidosis. Which is the priority nursing action?

A) Instruct the mother to bring the infant to the clinic for evaluation.
B) Instruct the mother to measure the infant's urine output for 24 hours.
C) Instruct the mother to give the infant at least 2 ounces of juice every 2 hours.
D) Instruct the mother to provide the infant with 50 mL of glucose water.


**Question 187**

The nurse is providing care for a client who experienced a fracture requiring a plaster cast. Which nursing intervention is appropriate for this client?

A) Assessing neurovascular status
B) Prescribing opioid pain medication
C) Discouraging client ambulation
D) Encouraging the client to keep the cast damp

Question 188

The nurse suspects a young adult client is experiencing primary dysmenorrhea. Which did the nurse assess in this client? Select all that apply.

A) Fatigue  
B) Bleeding between menstrual periods  
C) Scant menses  
D) Headache  
E) Diarrhea  


Question 189

A nurse working in a psychiatric hospital is performing a suicide assessment on a client diagnosed with major depressive disorder (MDD). Which actions by the nurse are appropriate when conducting a suicide assessment? Select all that apply.

A) Assess the lethality of the suicide plan, if one exists.  
B) If the client has suicidal thoughts, assess whether or not the client would act on them.  
C) Ask if the client has any thought of suicide.  
D) Asking about suicide will "plant the idea" in the client's mind.  
E) Assess all clients for suicide risk by using indirect questioning.  


Question 190

The nurse is caring for a client with a urinary catheter. Which nursing diagnosis is a priority for this client?

A) Self-Care Deficit related to presence of urinary catheter  
B) Risk for Infection related to catheter placement  
C) Risk for Impaired Skin Integrity related to incontinence  
D) Chronic Pain related to an obstruction  


Question 191

During a home visit, the nurse inputs admission information into a computer-based medical record system. The client asks what prevents a neighbor from accessing the information when the nurse visits the client. Which response by the nurse is appropriate?

A) "A password is required to access your information."  
B) "I use a new computer for each client."  
C) "I keep the notebook computer in my hands at all times."  
D) "I send your information and then delete it."  


Question 192

A nurse is performing research on the etiology, pathophysiology, and treatment of adjustment disorder with depressed mood. Which findings does the nurse anticipate regarding the effects of exercise on depression?

A) Many studies specifically investigate the role of exercise in adjustment disorder with depressed mood or situational depression.  
B) Evidence suggests that physical exercise is as effective as cognitive-behavioral therapy (CBT) or medication in reducing depression.  
C) Evidence indicates that exercise is effective in reducing symptoms of depression; however, exercise must be aerobic and for 60 minutes or more per day.  
D) Resistance exercise is less effective in reducing symptoms of depression than aerobic exercise alone.  


Question 193

The nurse determines that a client is at risk for contracting hepatitis B because of intravenous drug use. What should the nurse teach to reduce the client's risk for this health problem?

A) Avoid contaminated food and water.  
B) Avoid alcohol consumption.  
C) Wash hands frequently, as the disease is transmitted via the fecal-oral route.  
D) Avoid sharing needles.  


Question 194

...
A school nurse is treating a school-age client who has fallen down a flight of stairs. The client is breathing but unconsciousness. After calling the ambulance, which is the priority action by the nurse?
A) Protect the client's neck and head from any movement.
B) Place the client on the side to prevent aspiration.
C) Try to rouse the client by gently shaking the shoulders.
D) Open the airway using the head tilt maneuver.

Question 195

A client recovering from an emergency appendectomy is a citizen of France. The client asks the nurse to explain why the United States has chosen such a different healthcare reimbursement system from other Western countries. Which American value could the nurse mention to explain the system in this country?
A) Individual accountability
B) Universality
C) Skepticism about markets and competition
D) Acceptance of the role of government

Question 196

The employee health nurse is providing care to an employee who was injured on the job. The client has a history of drug addiction and is currently enrolled in a 12-step recovery program. In order to determine whether the employee was impaired at the time of the accident, which diagnostic tool will the nurse use?
A) Stool guaiac
B) Urine toxicology testing
C) Hair testing
D) Liver enzymes

Question 197

The nurse is caring for an older adult client who is taking calcium for the treatment of osteoporosis. Which statements will the nurse include when educating the client about this medication? Select all that apply.
A) "Report symptoms of weakness, increased urination, and thirst."
B) "If you have a condition called ventricular fibrillation, this medication might help."
C) "Adults 50 years of age and over should obtain at least 500-750 mg per day of elemental calcium."
D) "The most common adverse effect is hypercalcemia caused by taking too much of the supplement."
E) "Oral calcium supplements are best taken on an empty stomach."

Question 198

The nurse is planning care to address pain in the client with genital herpes. Which intervention would be appropriate for this client?
A) Wear tight cotton clothing.
B) Clean lesions 2 or 3 times a day with warm water and soap.
C) Dry lesions with a hair dryer turned to the hot setting.
D) Increase the intake of cranberry juice.

Question 199

A client with the flu is experiencing tachypnea. What interventions should the nurse use to address the diagnosis of Ineffective Breathing Pattern related to the flu? Select all that apply.
A) Teach the client coughing, deep breathing, and hydration.
B) Keep the head of the bed elevated.
C) Prepare the client for the possibility of a tracheostomy tube.
D) Maintain adequate hydration.

Question 200

A client is prescribed metoprolol for a heart disorder. What should the nurse teach the client about this medication?
A) Expect a rapid heart rate.
Question 201
A nurse working in labor and delivery is aware that newborns have several physiologic mechanisms that increase heat production to prevent hypothermia. What is true regarding newborn thermogenesis?
A) Shivering occurs when skin receptors perceive a drop in the environmental temperature and transmit sensations to stimulate the sympathetic nervous system.
B) Brown fat produces heat generation, and heat transfer to the peripheral circulation.
C) Shivering thermogenesis uses the newborn's stores of brown fat to provide heat.
D) The extra muscular activity by the infant in cold stress produces a large amount of body heat.

Question 202
The nurse is positioning a client with left-sided heart failure in bed. Which sleeping position is most appropriate for this client?
A) Seated in a recliner with 2-3 pillows under feet
B) Seated in a recliner with 2-3 pillows under head
C) Lying on either side with the head of the bed elevated 30°
D) Lying on the left side with the head of the bed elevated 30°

Question 203
An adult client is admitted to the hospital with a diagnosis of kidney stones. The healthcare provider prescribes IV fluids, x-rays, blood work, and a Foley catheter for the client. The nurse is caring for the client 3 days after admission and documents morning vital signs of 101°F, heart rate 92, respirations 25, and blood pressure 120/80. The urinary output has decreased, and the urine is cloudy and dark amber. Based on this data, which conclusion by the nurse is the most appropriate?
A) The client is in acute renal failure.
B) The client has developed a respiratory infection.
C) The client has passed the kidney stones.
D) The client has a probable urinary tract infection.

Question 204
The nurse is providing care to a client with alcohol and opioid dependency. A family member states, "I don't understand why Naltrexone treatment is prescribed because it causes a high too, right?" Which response by the nurse is appropriate?
A) "Naltrexone diminishes the cravings your daughter will feel for alcohol and opioids."
B) "Naltrexone will prevent your daughter from getting drunk when she drinks."
C) "Naltrexone will cause your daughter to become violently ill if she drinks alcohol or abuses drugs."
D) "Naltrexone is less potent than the street drugs your daughter is currently taking and therefore safer."

Question 205
While reviewing exercises to do when pregnant, a client of European descent tells the nurse that she was taught never to reach over the head because this will harm the baby. Based on this data, which action by the nurse is appropriate?
A) Suggest limiting exercise to household chores.
B) Provide dietary instruction to ensure the client does not gain excessive weight.
C) Assure that reaching over the head will not harm the baby.
D) Provide alternative activities to do instead of exercise.

Question 206
A client wants to visit family members who live in Asia but has a fear of flying. Which strategy is an appropriate treatment option for this client?
A) Physical exercise
B) Cognitive restructuring
C) The use of antianxiety medication
D) Meditation
**Question 207**
An older adult client with terminal liver disease is concerned about going home and living alone. The client is currently independent with care. The client is afraid of dying alone and does not want to lose control of body functions. Which should the nurse recognize about the client’s concerns?
A) Unrealistic fears because the client shows no symptoms at present  
B) Common fears and concerns of the dying client  
C) Appropriate for the situation and will obtain an order for hospice care  
D) Signs of depression

**Answer:** https://biology-forums.com/index.php?topic=406987

**Question 208**
The nurse is discussing follow-up care with a client who is being discharged. The client and family cross their arms and state angrily that the team's suggestions are not acceptable. Which response by the nurse is appropriate?
A) "Perhaps you did not understand the recommendations."  
B) "We only want what's best for you."  
C) "Let's discuss other options that might work well for you and your family."  
D) "We will leave you alone to discuss your options."

**Answer:** https://biology-forums.com/index.php?topic=407642

**Question 209**
The family of a terminally ill client requests that the client not be informed of the diagnosis. Which moral principle does the request violate?
A) Nonmaleficence  
B) Justice  
C) Beneficence  
D) Veracity

**Answer:** https://biology-forums.com/index.php?topic=407208

**Question 210**
A nurse is caring for a newborn who is suspected of having cerebral palsy (CP). Which should the nurse recognize is the most common cause of cerebral palsy?
A) Decreased levels of cerebral spinal fluid (CSF) in fetuses and premature infants  
B) Injury to the immature periventricular white matter in fetuses and premature infants  
C) Increased levels of cerebral spinal fluid (CSF) in fetuses and premature infants  
D) Injury to the developing neurotransmitters in fetuses and premature infants

**Answer:** https://biology-forums.com/index.php?topic=406820

**Question 211**
The nurse is preparing to triage victims of a train derailment who are being transported to the emergency department. Which victims would need immediate care? Select all that apply.
A) Holding broken arm, sitting in a chair  
B) Respiratory rate of 8 and irregular  
C) Walking with a slight limp, asking for something to drink  
D) Bleeding from fractured limb with a blood pressure of 78/40 mmHg  
E) Bleeding from superficial facial wounds and talking to family

**Answer:** https://biology-forums.com/index.php?topic=407638

**Question 212**
Which risk factors exhibited by the client presenting in the emergency department (ED) would place the client at risk for metabolic acidosis? Select all that apply.
A) Hypovolemic shock  
B) Abdominal fistulas  
C) Chronic obstructive pulmonary disease  
D) Acute renal failure  
E) Pneumonia

**Answer:** https://biology-forums.com/index.php?topic=405795
Question 213
When planning the care for a preterm infant with ineffective thermoregulation, the nurse should include which intervention?
A) Rinse hands with cold water before providing care to the infant.
B) Allow skin-to-skin contact with the mother to maintain warmth.
C) Keep the baby's head uncovered.
D) Place incubator near a window or source of fresh air.

Question 214
The nurse is reviewing the medical record for a school-age client prior to a scheduled health maintenance visit. Which data indicates the client is overweight?
A) A BMI of > 85th percentile.
B) A BMI of > 95th percentile.
C) A 35 percentage points in 6 months is categorized as being overweight, regardless of the baseline (e.g., 6 month's previous) percentile.
D) A 25 percentage point increase in weight in 6 months is categorized as being overweight, regardless of the baseline (e.g., 6 month's previous) percentile.

Question 215
The nurse understands that some factors affect health care delivery by creating new opportunities for the healthcare sector. Which would affect healthcare delivery?
A) Managed care frameworks that coordinate clients and insurance plans
B) Healthcare literacy programs
C) Changing demographics that increase the need for new jobs
D) Advances in technology requiring specialized personnel

Question 216
The nurse is providing care to an adolescent client who presents at the clinic for a routine health assessment. Which immunizations does the nurse anticipate administering to the adolescent during this visit? Select all that apply.
A) MMR booster
B) Meningococcal vaccine
C) TDaP booster
D) Hepatitis B vaccine
E) Papillomavirus vaccine

Question 217
The nurse is assessing an older adult client with a cardiac dysrhythmia. Which finding would the nurse identify as contributing to this client's dysrhythmia?
A) Drinks caffeinated coffee in the morning and for lunch.
B) Takes antihypertensive medication as prescribed.
C) Plays golf three times a week and gardens daily.
D) Does not smoke or ingest any alcohol.

Question 218
An adolescent client with terminal cancer tells the nurse that she does not want any more treatment, even though her parents are planning for her to participate in a study trial that involves aggressive chemotherapy. Which action by the nurse is the most appropriate?
A) Tell her that, at 16, she can make her own decisions no matter what her parents want.
B) Request that the parents and daughter meet together with the healthcare team to discuss options and the implications of various choices.
C) Tell her not to worry, that she knows her parents want the best for her.
D) Tell the client that the decision is her parents’ and she has to participate in the study.

Question 219
A client with Parkinson disease (PD) ambulates with a shuffling gait and leans slightly forward. When seated, the client conducts a conversation, reads, and is able to self-feed without assistance. Which diagnosis is a priority for this client?

A) Anxiety  
B) Ineffective Coping  
C) Imbalanced Nutrition: More than Body Requirements  
D) Impaired Physical Mobility  

Question 220

The nurse is preparing discharge instructions for an older adult client with cellulitis of the leg. What should the nurse teach the client and family regarding ways to prevent this health problem from occurring in the future?

A) "Do not allow the client to walk without assistance."  
B) "Bring the client to the doctor if there is a fall."  
C) "Maintain a healthy diet."  
D) "Keep the client off her leg as much as possible."  

Question 221

Staff at the hospital have decided to strike in order to try to improve working conditions. Which are some of the ethical issues that a nurse working in the hospital will have to consider when deciding whether or not to honor the picket line? Select all that apply.

A) The need for higher pay  
B) The need to support coworkers in their efforts to improve working conditions  
C) The need to ensure that clients receive care and are not abandoned  
D) The desire to take some time off  
E) Loyalty to the nurse's employer  

Question 222

The nurse is providing care to a client diagnosed with chronic obstruction pulmonary disease (COPD) after years of experiencing emphysema. Which clinical manifestation does the nurse anticipate when assessing this client?

A) Wheezing  
B) Cough  
C) Tachycardia  
D) Barrel chest  

Question 223

A male client tells the nurse that he has no idea why his wife wants to stay married to him because he has not been able to "perform" sexually since his prostate surgery. Which diagnosis would be appropriate for this client?

A) Ineffective Coping  
B) Situational Low Self-Esteem  
C) Sexual Dysfunction  
D) Hormonal Imbalance  

Question 224

The nurse is assessing clients in the eye clinic who have eye infections. For which client with conjunctivitis should the nurse be most concerned?

A) The client from New York City  
B) The client from Brazil  
C) The client from Florida  
D) The client from Iran  

Question 225

The nurse manager is discussing the preparedness phase of a revised emergency management plan for the emergency department. Which resources will the nurse manager utilize to help nurses understand their roles and responsibilities during an emergency response? Select all that apply.

A) The AMA  
B) The Federal Emergency Management Agency (FEMA)
C) The Red Cross
D) The American Nurses Association (ANA)

Question 226

A client is hospitalized for suicidal ideations as a response to complicated grief. Which collaborative interventions would be appropriate for this client's care? Select all that apply.
A) Bereavement group
B) Psychotherapy
C) Antidepressant medication
D) Sleep medication
E) Social service consult

Question 227

An adult client is admitted to the emergency department with symptoms of acute pancreatitis. Which nursing diagnoses are appropriate for this client? Select all that apply.
A) Impaired Swallowing
B) Acute Pain
C) Deficient Fluid Volume
D) Imbalanced Nutrition, less than body requirement
E) Nausea

Question 228

The nurse is assessing an older adult client in a long-term care facility after a fall. Which finding requires priority action?
A) The injured leg is shortened and externally rotated.
B) Pain is relieved by moving the affected extremity.
C) Redness and severe swelling are found at the hip joint.
D) The patient is repeatedly flexing the injured leg at the hip.

Question 229

An older adult client with bilateral cataracts, arthritis, and a hearing deficit is scheduled for cataract surgery. Which is the priority nursing diagnosis for this client?
A) Decisional Conflict
B) Risk for Ineffective Health Maintenance
C) Disturbed Sensory Perception: Visual
D) Ineffective Coping

Question 230

The multidisciplinary care team is meeting to discuss care for a client who exhibits symptoms of the prodromal phase of hepatitis. Lab results include a positive anti-HAV IgM. The nurse creates an action plan to present to the team. Which interventions are appropriate? Select all that apply.
A) Referral to the liver transplant team
B) Family teaching for transmission prevention.
C) High-fat, low-calorie, and no-alcohol diet teaching
D) Early treatment with lamivudine
E) Patient education on acceptable pain medication

Question 231

After receiving the morning report, the nurse prioritizes care needed by several clients. Which factors should the nurse keep in mind when creating this priority list? Select all that apply.
A) Client preferences
B) Time of day
C) Safety
D) Time available
Question 232
The nurse is providing care to a client who is diagnosed with benign prostatic hyperplasia (BPH). Which items in the client's health history may have contributed to this diagnosis? Select all that apply.
A) 70 years of age
B) Diet high in meat and fats
C) Diet high in milk
D) Excessive exercise
E) African-American ethnicity

Question 233
A client with severe metabolic alkalosis is admitted to the unit. Which is the priority for the client?
A) Teaching the client the risk factors for metabolic alkalosis
B) Monitoring oxygen saturation
C) Setting goals for the client with metabolic alkalosis
D) Administering medication for metabolic alkalosis

Question 234
Which instruction by the nurse to a client prescribed diazepam (Valium) for anxiety and stress is appropriate?
A) “This medication works best if taken with a meal.”
B) “Take this medication every time feelings of stress become overwhelming.”
C) “This medication is good to use for the short term only.”
D) “This medication will be good to take for a long time.”

Question 235
A nurse is interviewing a client at a clinic near a shelter for the homeless. Understanding the lack of resources this client has available, which should the nurse assess during the intake phase of the health history? Select all that apply.
A) Access to medication
B) Access to nutritious meals
C) Any personal resources
D) Social support available
E) Number of times married

Question 236
The nurse on the transplant organ team encounters new ethical dilemmas with the advent of social and technological changes. Which dilemmas might the transplant team encounter today? Select all that apply.
A) Cloning
B) Genetic alteration of disease
C) Healthcare provider loyalty to insurance companies
D) Staffing issues
E) Determining who "deserves" treatment

Question 237
The nurse is caring for an African-American client who had a myocardial infarction and is receiving atorvastatin (Lipitor). The nurse assesses the client's diet to be very high in fat. Which is the best plan by the nurse to improve the client's diet and reduce the risk that the client may need additional medications?
A) With the client's permission, discuss the dietary with whoever prepares meals for the family.
B) Ask another nurse to speak to him about a low-fat diet.
C) Give the client information specific to African Americans about low-fat diets.
D) Consult a dietician to teach the client about low-fat diets.
Question 238

A client with cardiomyopathy receiving diuretic therapy has a urine output of 300 mL in 8 hours. What should the nurse do to assist this client?
A) Notify the healthcare provider, as the client could be dehydrated.
B) Assist the client to ambulate.
C) This is a normal urine output and the client does not need anything.
D) Measure abdominal girth as a true assessment of the client's fluid status.

Question 239

A nurse is teaching a mother of an infant who has been diagnosed with failure to thrive (FTT) about the treatment for the condition. Which statement by the nurse is appropriate?
A) "A home care nurse will be visiting to see how your child eats."
B) "If your child is breastfeeding, you must stop and feed your child formula."
C) "Appetite stimulant medications will be prescribed to help your child gain weight."
D) "A home care nurse will be visiting to insert a nasogastric feeding tube in your child."

Question 240

The nurse is preparing to assess a client who has chronic obstructive pulmonary disease (COPD). The client is currently experiencing difficulty breathing. Before palpating the client's abdomen, which action is appropriate by the nurse?
A) Having the client remain upright
B) Placing the client in a modified Sims position
C) Asking the client to bend over a table
D) Administering 6 L of oxygen to the client

Question 241

The nurse caring for a homeless client at risk for tuberculosis (TB) will include which symptoms of the disease when educating the client? Select all that apply.
A) Weight loss
B) Productive cough that later turns to a dry, hacking cough
C) Low-grade morning fever
D) Night sweats
E) Fatigue

Question 242

The nurse is planning care for a young child who is admitted with sickle cell crisis. The parents are with the child, and neither has much information about the disease. When planning care for this family, the nurse will set which goal with this family?
A) The family will plan vacations in high-altitude areas.
B) The child will play outside in the sun.
C) The child will drink adequate amounts of fluid each day.
D) The family will not have the child vaccinated.

Question 243

A nurse is providing discharge instructions to a client recently diagnosed with obsessive-compulsive disorder (OCD) and prescribed Fluvoxamine (Luvox). Which statement made by the client indicates to the nurse that the client understands the instructions?
A) "I should continue taking this medication and in 1-2 years my physician may taper me off gradually."
B) "I am glad the physician chose this medication because it does not have any side effects."
C) "I should continue taking this medication and in 1-2 years I can stop taking it."
D) "Even though I don't think this medication is for my OCD I will take it because the physician wants me to."

Question 244

The nurse is creating a pain management plan using the three-step approach for a client with intractable pain. Which interventions should the nurse
Question 245
A student nurse is reviewing the pathophysiology and etiology of Alzheimer disease (AD). Which is true regarding the pathophysiology and etiology of this disease? Select all that apply.
A) Damage to the limbic system results in speech decline and slowed movements.
B) Familial Alzheimer disease (FAD) is also called delayed-onset Alzheimer disease.
C) Sporadic Alzheimer disease is more common than familial Alzheimer disease.
D) Sporadic Alzheimer disease usually manifests before age 65.
E) In Alzheimer disease, neuronal cells die in a characteristic order.

Question 246
A client is undergoing surgery for a fractured hip. The surgeon has expressed that careful attention will be paid to preserving the epiphyseal plate. Which client will require this precaution during surgery?
A) An 85-year-old woman with osteoporosis
B) A post-menopausal paraplegic
C) A 32-year-old competitive body builder
D) A prepubescent girl who is a vegetarian

Question 247
The healthcare provider prescribes misoprostol (Cytotec) for a female client for the treatment of peptic ulcer disease. What should the nurse ask the client prior to administration of this medication?
A) “Are you currently sexually active?”
B) “Do you plan on becoming pregnant in the next few months?”
C) “Is there any chance that you are pregnant?”
D) “Are your menstrual cycles irregular?”

Question 248
A client with peripheral vascular disease (PVD) is experiencing pain. Which nursing intervention addresses the client’s pain?
A) Keep the extremities warm with blankets.
B) Elevate legs in bed with pillows under the knees.
C) Apply cool compresses to the extremities.
D) Encourage to ambulate and stand on legs 4 times each day.

Question 249
A client is prescribed an oral contraceptive with estrogen and progesterone. What should the nurse instruct the client about this contraceptive? Select all that apply.
A) Acne and oily skin can occur because of the progesterone.
B) Breast tenderness occurs because of the estrogen.
C) An increase in blood pressure is caused by the progesterone.
D) An increase in appetite and weight gain is caused by the estrogen.
E) Headaches and nausea are caused by the progesterone.

Question 250
A client recovering from surgery to place a permanent colostomy as treatment for colon cancer is concerned that her spouse will no longer find her sexually attractive. Which response by the nurse is the most appropriate?
A) “Would you like me to speak with your husband for you?”
Question 251
The nurse in an orthopedic outpatient clinic expects to see several clients with fractures for follow-up. After reviewing the clients’ medical records, which client is at the highest risk of a delayed union?
A) 62-year-old bartender with a history of peptic ulcer who sustained a fractured clavicle breaking up a fight at work. He was upset about abstaining from upper body resistance training.
B) 49-year-old teacher with osteoporosis who sustained an open ulnar fracture in a motor vehicle accident. Reports that she has cut down smoking to 10 cigarettes per day.
C) 55-year-old accountant who sustained fractures to the 4th and 5th right metatarsals. He has a history of hypertension under good control with medication.
D) 20-year-old college student with type I diabetes mellitus who sustained a fractured tibia in a bicycle accident. Nutrition recall tool completed during the last visit was consistent with American Diabetic Association (ADA) guidelines.

Question 252
The nurse is providing care to a client on a medical-surgical unit. The client’s arterial blood gas analysis is as follows: PaO2 of 82, PaCO2 of 49, HCO3 of 26, and pH of 7.55. Which acid-base imbalance is this client experiencing based on this data?
A) Metabolic acidosis
B) Respiratory alkalosis
C) Metabolic alkalosis
D) Respiratory acidosis

Question 253
The nurse is instructing a group of women between the ages of 40 and 50 about early detection of breast cancer. What should the nurse include in this teaching?
A) See a healthcare provider if there is a strong family history of breast cancer.
B) Have a yearly mammogram.
C) Perform monthly breast self-exams.
D) Have a clinical breast exam performed by a healthcare provider every 5 years.

Question 254
A client is admitted to the intensive care unit with disseminated intravascular coagulation (DIC). Which clinical manifestations does the nurse anticipate? Select all that apply.
A) Thick, tenacious bronchial secretions
B) Increased blood glucose level
C) Decreased breath sounds
D) Confusion
E) Tachycardia

Question 255
The nurse is prioritizing care for a client with several problems. List the order in which the nurse should address the client’s needs.
A) Bleeding through nasogastric tube
B) Audible wheezes
C) Not understanding how to complete the menu
D) Requesting medication for arthritis pain
E) Dyspnea
F) Asking questions about teaching provided the other day

Question 256
A nurse educator is teaching a group of nursing students about the American Nurses Association (ANA) Code of Ethics for professional nurses. Which...
student nurse response describes the ANA code of ethics?
A) "It reflects legal judgments in professional nursing practice."
B) "It alleviates suffering for those cared for by professional nurses."
C) "It provides standards for professional nursing practice."
D) "It serves as legal standards for professional nursing practice."

Question 257
The nurse is providing discharge teaching to a client recovering from pneumonia. Which client statement indicates that additional teaching is needed?
A) "I will get the influenza vaccine every year."
B) "I will get the pneumococcal vaccine as soon as I recover from this pneumonia."
C) "I will get the pneumococcal vaccine every fall."
D) "I can't get the influenza vaccine due to my allergy to eggs."

Question 258
During a health history a client becomes upset because the nurse is asking many questions. Which response by the nurse is the most appropriate in this situation?
A) "I will skip the questions that bother you."
B) "I cannot help you if you do not answer me."
C) "I am sorry the questions disturb you."
D) "I use the answers you provide to determine what your current health needs are."

Question 259
The nurse is providing care to a client with a compromised immune system. Which independent nursing intervention is appropriate for the nurse to include in the client's plan of care?
A) Prescribing prophylactic antibiotic therapy
B) Administering corticosteroids, per order
C) Educating on the importance of a nutritious diet
D) Recommending gene transfer therapy

Question 260
A female client complains of having a "strange discharge" from the vagina and "stinging" when voiding urine. Which diagnostic test(s) would be useful to aid in the diagnosis of this client's disorder? Select all that apply.
A) Serum hormone levels
B) Papanicolaou smear
C) Urinalysis
D) Biopsy
E) Complete blood count

Question 261
The nurse caring for a client recovering from a suicide attempt. Which client statement indicates that the plan of care was effective to eliminate the risk of future suicide attempts?
A) "I am not looking forward to going home with my parents."
B) "I am looking forward to going to school and seeing my friends."
C) "Even though I failed this time, I lived to think about it again."
D) "I now know that threatening suicide will help me get what I want from my parents."

Question 262
A pediatric client is diagnosed with gastroesophageal reflux disorder (GERD). The nurse is observing a return demonstration of the mother preparing and feeding the infant formula. Which observation demonstrates correct procedure for preventing GERD symptoms?
A) Thinning the formula with water prior to feeding
B) Warming the formula prior to feeding
C) Burping the infant after 4 ounces of formula are taken

D) Positioning the infant upright for a minimum of 30 minutes

**Question 263**

The nurse is answering questions from participants after a presentation on preventing fractures at an assisted-living facility. Which resident is at highest risk for the development of fractures?
A) The resident who line dances twice a week and has a glass of wine with dinner
B) The resident who hikes in the woods once a week and smokes 14 cigarettes per day
C) The resident who participates in resistance training exercises 3 times a week and takes a calcium supplement
D) The resident who teaches yoga four times per week and is lactose-intolerant

**Question 264**

The nurse identifies the diagnosis of Excess Fluid Volume as appropriate for a client with cardiomyopathy. Which interventions should the nurse emphasize when planning this client's care? Select all that apply.
A) Assess respiratory status and lung sounds every 4 hours and as needed.
B) Monitor intake and output.
C) Provide information about activity upon discharge.
D) Provide oxygen as prescribed.
E) Monitor brain natriuretic peptide (BNP) level.

**Question 265**

Upon delivery of the newborn, which nursing intervention promotes parental attachment?
A) Placing the newborn under the radiant warmer
B) Taking the newborn to the nursery for the initial assessment
C) Placing the newborn on the bed next to the mother
D) Placing the newborn on the maternal abdomen

**Question 266**

A nurse is working at a healthcare clinic serving the needs of an inner-city, predominantly African-American population. A neighbor says the nurse must be brave because most of "those" people have guns and are in gangs. Which response by the nurse is appropriate?
A) "It's okay because I'm not a gang member so I will be okay."
B) "It's very difficult for me when you discriminate like that."
C) "Hey, it's a job like any other job. All jobs have problems."
D) "That's an unfortunate stereotype. Can we talk about the reality?"

**Question 267**

A preadolescent student asks the school nurse to explain why the student keeps getting urinary tract infections. The school nurse determines that the diagnosis of Deficient Knowledge is appropriate based upon the student's response to which question?
A) "Do you have a family history of urinary problems?"
B) "How often do you shower?"
C) "In what direction do you wipe after a bowel movement?"
D) "When was your last UTI?"
Question 269

A client is admitted to the emergency department for treatment of an overdose. The client's arterial blood gas results indicate acute respiratory acidosis. Which substance found on the nurse's review of the toxicology analysis is most likely the cause for the client's current condition?

A) PCP  
B) Cocaine  
C) Oxycodone  
D) Marijuana


Question 270

A young adult client complains of blurred vision and muscle spasms that have come and gone over the past several months. On what information from the client's history should the nurse focus to help identify the specific problem?

A) Family history of Parkinson disease  
B) Family history of epilepsy  
C) Has been depressed  
D) Is an immigrant from Germany


Question 271

The nurse is concerned that a client with an alteration in perfusion is at risk for inadequate oxygenation. What should the nurse consider when planning for this client's potential health problem?

A) Positioning to increase blood return  
B) Encouraging ambulation every thirty minutes  
C) Instructing on deep breathing  
D) Administering medications appropriate to increase heart rate


Question 272

A client tells the nurse about plans to become pregnant. What should the nurse provide to ensure healthy sensory functioning of the newborn?

A) Testing for rubella  
B) Importance of ingesting zinc  
C) The need to limit vitamin A intake  
D) Avoiding foods high in folic acid


Question 273

A nurse is caring for a client with who is experiencing leukocytosis. When providing care to this client, which action by the nurse is the most appropriate?

A) Assess for bleeding and bruising.  
B) Place the patient in reverse isolation precautions.  
C) Instruct the client on the use of an electric razor and soft toothbrush.  
D) Assess for source of infection.


Question 274

The quality assurance officer notes that one particular nursing unit has received a higher-than-usual number of negative client responses about aspects of the nursing care during the previous quarter. Based on this data, which benchmarking issue should the quality assurance officer pay particular attention during the review process?

A) Process  
B) Structure  
C) Outcome  
D) Competency


Question 275

A client with a bipolar disorder arrives at the emergency department disheveled, arguing with family members. The nurse recognizes that the family is
suffering from an objective family burden. To which is this burden related?
A) Family conflict
B) The client's symptomatic behaviors
C) Caregiving problems
D) Anger

Question 276

An instructor is teaching the class about cost-conscious nursing practice. The instructor knows that the students understand this concept when the students make which statements? Select all that apply.
A) "Nurses must search for more efficient ways to deliver nursing care."
B) "Careful use of supplies will reduce waste and save money."
C) "A new emphasis has been placed on health promotion and disease prevention."
D) "There are insufficient healthcare workers to meet the need right now."
E) "I do have to take short cuts every now and then."

Question 277

Nursing students are discussing the uninsured and the underinsured in the United States. The students believe that clients should have access to the healthcare system when needed. One student plans to relocate from Massachusetts to Mississippi for which reason?
A) Salaries for nurses are higher in Mississippi than elsewhere in the United States.
B) More older adults live in Mississippi than elsewhere in the United States.
C) Massachusetts clients have fewer healthcare needs than those living elsewhere in the United States.
D) The need for services is greater in Mississippi than elsewhere in the United States due to a decreasing number of healthcare providers.

Question 278

The nurse is teaching the family of a child who is prescribed amphetamine mixed salts (Adderall) for attention-deficit/hyperactivity disorder (ADHD). Which is the best time for the nurse to teach the family to administer the medication?
A) At bedtime
B) Early in the morning
C) Before lunch
D) With the evening meal

Question 279

A rural home health nurse is caring for a client recovering from a myocardial infarction. The client is concerned that the community clinic does not have the ability to provide the necessary monitoring for the health problem. Which response by the nurse is most appropriate?
A) "Through technological advances such as telehealth, we can send your information to the cardiologist."
B) "It is not necessary for you to be monitored after a myocardial infarction."
C) "We use an intranet in this facility."
D) "You are right. We will be sending you to the city every month."

Question 280

A nurse educator is teaching a group of student nurses regarding heat and cold injuries. Which statement will the nurse include about thermoregulation?
A) "All muscle activity, regardless of location, produces heat."
B) "Chemical thermogenesis occurs with the increase of cortisol."
C) "Core temperature varies widely depending on the outside environment."
D) "The body's surface temperature remains relatively constant."

Question 281

The nurse is instructing a client who is at 10 weeks' gestation on smoking cessation and avoiding substance abuse. Which is the rationale for why these should be avoided during pregnancy?
A) Facilitates the transfer of viruses and other diseases into the developing fetus.
B) Stops the synthesis of protein in the developing fetus.
C) Interferes with hormone excretion of the fetus.
D) Passes into the developing fetus through the placenta very easily.


**Question 282**

A pediatric client is receiving chemotherapy for acute lymphocytic leukemia. While providing care for this client, which clinical manifestations would indicate tumor lysis syndrome? Select all that apply.

A) Thrombocytopenia  
B) Altered levels of consciousness  
C) Respiratory distress  
D) Upper-extremity edema  
E) Oliguria


**Question 283**

The nurse is conducting an assessment on an older adult client who is confused. The client is accompanied to the appointment with an adult child. When collecting data, who can provide primary sources of data during the assessment?

A) The confused older adult client.  
B) The primary healthcare provider.  
C) The client's adult child.  
D) The nurse who cares for the client at the retirement home.


**Question 284**

The nurse is planning care for an older adult client diagnosed with age-related macular degeneration (AMD). Which prescriptions does the nurse anticipate for this client? Select all that apply.

A) Laser surgery  
B) Antioxidants  
C) Eye drops  
D) Eye patches  
E) Zinc


**Question 285**

A client with peripheral neuropathy who is prescribed vitamin B12 injections asks the nurse how this will help the numbness in his legs and feet. Which response by the nurse is appropriate?

A) "It will give you more energy to exercise."  
B) "It provides a supplement of a vitamin known to be low in people with numbness in their feet and legs."  
C) "It will cause you to want to eat a better diet."  
D) "It will make you sleep better."


**Question 286**

A client who is in the first trimester of pregnancy tells the nurse that she is constantly nauseated and can vomit at any time. To assist this client, the nurse should instruct her to do which of the following?

A) Take a multivitamin without iron each day.
B) Take over-the-counter Benadryl for the nausea.
C) Drink a glass of water every time nausea occurs.
D) Take a multivitamin with iron each day.


**Question 287**

A nurse identifies the seven components of wellness as a useful tool in assessing health. Which are some of the components of wellness? Select all that apply.

A) Spiritual  
B) Environmental  
C) Physical  
D) Financial
E) Emotional

**Question 288**
A client prescribed an antidepressant tells the nurse that the pill causes dizziness upon standing or changing position too quickly. Which medication does the nurse suspect the client is taking for the treatment of depression?
A) Monoamine oxidase inhibitor
B) Tricyclic antidepressant
C) Selective serotonin reuptake inhibitor
D) Serotonin-norepinephrine reuptake inhibitor

**Question 289**
A community health nurse is educating a group of adolescent clients regarding the prevention of date violence and rape. Which statement will the nurse include in teaching?
A) "Although previous violence in a teenage male is a problem, it is not associated with an increased risk of dating violence."
B) "A decreased use of birth control is associated with an increased risk of dating violence and rape."
C) "Girls who report dating violence are less likely to report other at-risk behaviors, such as using illegal substances."
D) "Caucasian girls report dating violence more commonly than Hispanic or African American girls."

**Question 290**
A client recovering from a cesarean section is afebrile but is experiencing tenderness, localized heat, and redness of the left leg. Which intervention is the most appropriate based on this data?
A) Place on bed rest.
B) Encourage to ambulate freely.
C) Provide aspirin 650 mg by mouth.
D) Provide Methergine IM.

**Question 291**
An adolescent client with a sexually transmitted infection (STI) says to the nurse, "Promise you won’t tell my parents about my condition." Which action by the nurse is appropriate?
A) Respecting the client's privacy and confidentiality
B) Honoring the client's wishes
C) Disclosing information to the parents
D) Communicating only necessary information

**Question 292**
A student nurse is trying to explain nursing to family members. Which contemporary aspects of nursing might the student nurse include in the explanation? Select all that apply.
A) Nursing is a science.
B) Nursing is holistic.
C) Nursing is focused on illness.
D) Nursing is a new profession.
E) Nursing is easy.

**Question 293**
A clinic nurse is providing care for several clients. Which client is at the highest risk for anorexia nervosa?
A) A 16-year-old male Caucasian client
B) A 16-year-old Hispanic female client
C) A 22-year-old male Caucasian client
D) A 21-year-old Hispanic female client
Question 294

The nurse, teaching a class to a group of community members about the importance of weight loss in decreasing the risk of type 2 diabetes mellitus, is asked why weight loss reduces the risk associated with the development of this health problem. Which response by the nurse is most appropriate?

A) "Thin people are less likely to become diabetic."
B) "The amount of food taken in by those who are overweight requires more insulin to adequately metabolize them, resulting in diabetes."
C) "The physical inactivity associated with obesity causes a reduced ability by the body to produce insulin."
D) "Excess body weight impairs the body's release of insulin."


Question 295

The nurse is admitting a client to an inpatient psychiatric unit. The client is speaking wildly in another language and is obviously very agitated. Which action by the nurse would be appropriate to calm the client?

A) Speaking to the client in a soft and calm tone
B) Using short sentences when talking to the client
C) Placing the client in a room, away from others
D) Administering a prn medication to sedate the client


Question 296

The nurse is providing care to a client diagnosed with a personality disorder. Which treatment options does the nurse anticipate for this client? Select all that apply.

A) Nutritional counseling
B) Cognitive behavioral therapy
C) Antidepressant medication
D) Weight management program
E) Antipsychotic medication


Question 297

The nurse, caring for a 1-year-old client recovering from a tonsillectomy, assesses the child for pain. If pain level is not addressed, what additional health problem could occur?

A) Bowel obstruction
B) Respiratory compromise
C) Bradycardia
D) Urinary retention


Question 298

A nurse is caring for a client who is perimenopausal who states that she has recently had frequent bacterial vaginal infections. Which reason for these infections will the nurse include in the response to the client?

A) Decreased vasomotor stability
B) Increased vaginal pH
C) Decreased vaginal pH
D) Increased estrogen level


Question 299

An African-American client tells the nurse of plans to bask in the sun on an upcoming vacation. The nurse questions the client about sunscreen use. Which response indicates the client needs further education?

A) "I can still experience sun damage despite my dark skin tones."
B) "I will avoid the sun between the peak hours of 10 am and 4 pm."
C) "The melanocytes in my skin provide me with increased protection from the sun."
D) "I don't need sunscreen because I am dark-skinned already."


Question 300
The nurse in an inner city clinic is providing a health screening for a homeless client with a history of drug abuse. The client has a chronic non-productive cough. For which should the nurse expect to screen this client?

A) Herpes zoster  
B) Sickle cell disease  
C) Tuberculosis  
D) Sick sinus syndrome  

**Question 301**

A client is receiving verteporfin treatment for macular degeneration. Which instruction by the nurse is appropriate based on this data?

A) Do not lift heavy objects for 2 weeks after the treatment.  
B) Flush the eyes with warm water twice a day.  
C) Avoid sunlight or bright indoor light for 5 days after treatment.  
D) Use artificial tears to keep the eyes moist.  

**Question 302**

A nurse who is working at an obstetrics clinic is caring for a client who desires more information regarding fertility awareness-based contraceptive methods. Which statement made by the nurse provides the client with correct information?

A) "To use the calendar rhythm method, the woman must record her menstrual cycles for 6 months to identify the shortest and longest cycles."  
B) "The calendar method is the most reliable of the fertility awareness methods."  
C) "The calendar rhythm method is based on the assumption that ovulation tends to occur about 7 days before the start of the next menstrual period."  
D) "Maximum fertility for the woman occurs approximately 2 days before ovulation and decreases rapidly the day after."  

**Question 303**

The nurse is instructing a client on lifestyle changes to prevent the onset of heart disease. Which should be included in this teaching session? Select all that apply.

A) Reduce saturated fats in the diet.  
B) Limit exercise to 15 minutes a day.  
C) Limit fluid intake.  
D) Avoid cigarette smoking.  
E) Wear elastic hose.  

**Question 304**

The nurse is caring for a client diagnosed with discoid lupus erythematosus. The nurse is collaborating with the client to set goals for the nursing plan of care. Which is an appropriate goal for this client?

A) Report pain no higher than 4 on a scale of 1-10.  
B) Work through the stages of death and dying.  
C) Gain weight to within 10 pounds of normal for height.  
D) Compliance with a sun protection plan.  

**Question 305**

The nurse is providing care to an older adult client with a history of alcohol abuse who is admitted to the hospital with acute pancreatitis. Which treatment options should the nurse plan for when caring for this client? Select all that apply.

A) Total parenteral nutrition  
B) Opioid analgesics  
C) Nasogastric tube to suction  
D) Pancrealipase administration  
E) High-fat diet  

**Question 306**

A client, recently diagnosed with rheumatoid arthritis (RA), asks the nurse whether RA will affect her in other ways. When responding to the client, which systems will the nurse include as possibly being affected by the diagnosis? Select all that apply.

A) Exocrine
Question 307
A client tells the nurse about continually reliving a situation of being robbed and shot by a gunman. Which nursing diagnosis is most appropriate for this client?
A) Anxiety
B) Fear
C) Ineffective Coping
D) Post-Trauma Syndrome

Question 308
A toddler who is admitted to the pediatric unit is crying and scared. No treatment has been initiated at this point. The nurse needs to start an IV, and the parent asks, "Can I stay with my child and help through the procedure?" In providing care for the family, which response by the nurse is appropriate?
A) "Be ready to hold the child down when I tell you to."
B) "I can teach you ways to help your child throughout the procedure if you would like to be involved."
C) "We do this all the time, so don't worry. I will come get you when we are done."
D) "I will be very quick so there is no need for you to stay for the procedure."

Question 309
The nurse working on the behavioral health unit is caring for a client with histrionic personality disorder. Which behaviors does the nurse anticipate when assessing this client? Select all that apply.
A) Dramatic
B) Arrogant
C) Competitive
D) Manipulative
E) Flamboyant

Question 310
Which nursing diagnoses would be applicable for a client who is experiencing a situational crisis? Select all that apply.
A) Ineffective Coping
B) Risk for Loneliness
C) Spiritual Distress
D) Risk for Self-Directed Violence

Question 311
A client who sustained a traumatic brain injury several weeks ago is in a chronic vegetative state and is no longer competent to make healthcare decisions. Who should the nurse expect to make care decisions for this client?
A) The physician
B) Social services
C) The agent named in the durable power of attorney
D) The client's spouse

Question 312
A client admitted with a personality disorder is observed pulling another client's hair and pushing clients out of their chairs. Which is the priority nursing intervention for this client?
A) Asking the client what purpose is served by disrupting others
B) Establishing a therapeutic nurse-client relationship
C) Placing the client in a jacket restraint
D) Removing the client from the room and addressing the behavior privately

**Question 313**

The nurse is caring for a premature baby who was born at 28 weeks' gestation. The baby's parents tell a visiting family member, "we will be able to bring the baby home in a few weeks." Which is the most therapeutic response by the nurse in this situation?
A) "Do you have the nursery ready yet?"
B) "Although your baby is doing quite well, he probably won't be ready to come home for a few months."
C) "I'm glad he's doing so well."
D) "A therapist could help you resolve your feelings of denial."

**Question 314**

A client, who is diagnosed with terminal pancreatic cancer, states to the nurse, "I do not want any further treatment but I am afraid my doctor will insist that I continue chemotherapy." Which role is the nurse performing when informing the healthcare provider of the client's choice to stop treatment?
A) Case manager
B) Teacher
C) Change agent
D) Advocate

**Question 315**

An older adult client is admitted with fractured femurs sustained in a motor vehicle crash. Once the client is stabilized, what should the nurse assess in this client?
A) The client's accident history
B) Car insurance carrier
C) Blood pressure
D) Need for assistance once discharged to home

**Question 316**

A client diagnosed with peripheral vascular disease (PVD) is obese, has a 30-year history of cigarette smoking, and works as a contractor. When discussing risk factors for PVD, which statement by the nurse is appropriate?
A) "Nicotine primarily affects coronary arteries and the lungs."
B) "Obesity is a factor in cardiovascular disease but not peripheral vascular disease."
C) "Nicotine is a vasoconstrictor."
D) "Your current occupation is a major risk factor."

**Question 317**

A nurse caring for a client with a pulmonary embolism expects to find which diagnostic result?
A) Patchy infiltrates on chest x-ray
B) Metabolic alkalosis on arterial blood gas
C) Tachycardia and nonspecific T-wave changes on EKG
D) Elevated CO2 level found on end-tidal carbon dioxide monitor

**Question 318**

A nurse is caring for a client who is confused and agitated. The nurse understands that the best method to determine if the client has reversible confusion is to use the Confusion Assessment Method (CAM). What is true regarding this diagnostic tool?
A) It is also effective in screening for depression.
B) It consists of five parts and is a lengthy test.
C) It measures the severity of the client's delirium.
D) It is effective in screening for cognitive impairment and reversible confusion.

**Question 319**
The nurse is planning care for a client with a large area of erythema, swelling, and pruritic lesions on the hands and arms. Which nursing diagnosis should the nurse use to guide this client's care?
A) Situational Low Self-Esteem  
B) Impaired Skin Integrity  
C) Impaired Social Interaction  
D) Anxiety  

**Question 320**

The home health care nurse is planning care for the older adult client. Which interdisciplinary program would best support the needs of an older adult client within the community? Select all that apply.
A) Programs of All-Inclusive Care for the Elderly (PACE)  
B) Assertive Community Treatment (ACT)  
C) YMCA  
D) Meals on Wheels  
E) Outpatient clinic  

**Question 321**

A client asks the nurse, "How am I going to pay for a surgery? I'm broke, but I've been so sick." Which statement regarding the Affordable Care Act (ACA) may be applicable to this client's situation?
A) "Unfortunately, you will probably be denied coverage because of your existing condition."  
B) "The ACA extends coverage to the working poor who do not qualify for public assistance and whose employers do not offer health insurance."  
C) "Most insurance premiums will be more and some less; you will have to shop around."  
D) "Because the rate of inflation is slowing, the ACA will also help curb medical costs."  

**Question 322**

A pediatric client being treated for acute lymphocytic leukemia (ALL) has a white blood cell count of 1,000/mm³. Which nursing diagnosis would be a priority for this client?
A) Readiness for Enhanced Immunization Status  
B) Activity Intolerance  
C) Risk for Infection  
D) Impaired Gas Exchange  

**Question 323**

The nurse manager is interested in initiating self-scheduling on the medical surgical-unit. Which are stages of the planning process for the initiative that the nurse manager will use? Select all that apply.
A) Establish objectives (goals).  
B) Convert the plan into an action statement.  
C) Coordinate the work to be done.  
D) Formulate a planning statement (means).  
E) Evaluate the present situation and predict future trends and events.  

**Question 324**

A nurse is caring for a client in crisis. While providing care it is imperative that the nurse communicates effectively with this client. Which is true when communicating with clients in crisis? Select all that apply.
A) Communication should be detailed.  
B) Communication should be frequent.  
C) Communication should be simple.  
D) Communication should be brief.  
E) Communication should be directive.  

**Question 325**

A client is admitted to the emergency department with signs of drug use. The client reports having ingested Percocet and is experiencing respiratory
Question 326

The nurse is conducting a home safety class for a group of parents in the community. Which should the nurse teach families that would contribute to maintaining safety in the home?
A) Remove labels from containers and refill for recycling.
B) Keep plants in the home.
C) Always pull a plug at the plug-in from the wall outlet.
D) Use overloaded outlets only when necessary.

Question 327

A home health nurse is admitting a new client to the agency who was recently discharged from the hospital with a new diagnosis of pulmonary fibrosis. Which does the nurse recognize as a priority for the client's initial follow-up care?
A) The client will have a positive attitude about the diagnosis by the end of the month.
B) The client will be able to set up and administer a nebulizer treatment by the end of the day.
C) The client will be able to do activities of daily living (ADLs) without shortness of breath in 3 days.
D) The client will have increased activity level by the end of the week.

Question 328

The nurse delegated unlicensed assistive personnel (UAP) to assist a client with performing a simple dressing change. The client was formerly able to do the procedure, but because of painful arthritis is now unable to perform the redressing. The UAP has done this procedure before. Which must the nurse emphasize to the UAP?
A) The UAP should do health teaching while performing the procedure.
B) Make the client do most of the procedure and report the expected output.
C) Report to the nurse immediately anything unusual, such as bleeding or infection.
D) The nurse should demonstrate the steps of the procedure.

Question 329

The nurse is providing care to a client who is diagnosed with obsessive-compulsive disorder. Which nursing intervention is most appropriate when providing care to this client?
A) Confront the client and ask what purpose the behavior serves.
B) Discuss the need to incorporate the behavior with other hospital routines.
C) Interrupt the ritualistic behavior when observed.
D) Tell the client that the behavior is unacceptable and must end.

Question 330

A nurse is providing discharge teaching for a client with iron deficiency anemia. The client has been prescribed ferrous sulfate and has been told to increase the intake of foods that are naturally high in iron. Which client statements indicate a need for further education? Select all that apply.
A) "I will increase my fluid intake while I am taking my ferrous sulfate."
B) "I will take my ferrous sulfate tablet with my morning oatmeal."
C) "I will decrease milk intake while taking my ferrous sulfate tablet."
D) "I will decrease my intake of green leafy vegetables while taking my ferrous sulfate tablet."
E) "I will take my ferrous sulfate tablet on an empty stomach."

Question 331

The nurse is discharging a client, who was admitted for surgery for a compound ulnar fracture that occurred during a conflict with the client's spouse. When the client states, "I hope this cast comes off before summer. Last night my husband promised me he is going to take me to Hawaii this summer. After he broke my jaw we went to Rome." Based on this data, which phase of violence is the client experiencing?
A) Reconciliation and healing
B) A honeymoon phase
C) An abusive phase
D) A tension phase

**Question 332**

The nurse is planning care for a client with Stage 1 Alzheimer disease. Which are the priority nursing diagnoses for the client and family?

A) Impaired Memory and Caregiver Role Strain
B) Hopelessness and Functional Family Processes
C) Pseudohostility and Ineffective Coping
D) Knowledge Deficit and Ineffective Coping


**Question 333**

Which clients are at the highest risk of being admitted to the emergency department with severe nausea and vomiting? Select all that apply.

A) A 47-year-old with a 3-hour history of chest pressure
B) A 61-year-old reporting sudden onset of vertigo
C) A 19-year-old who is 6 weeks pregnant
D) A 23-year-old who sustained a head injury in a fall
E) A 72-year-old with an asthma exacerbation


**Question 334**

The nurse decides to take a few days of personal time to invest in self-nurturing activities. Which activities indicate the nurse is taking steps to care for self? Select all that apply.

A) Participating in regular exercise
B) Eating one meal a day
C) Sleeping 4 hours each night
D) Participating in daily meditation
E) Being active in church


**Question 335**

A nurse is conducting an admission assessment on a client admitted for thoughts of suicide. Which assessment findings would indicate that the client is at a low level risk of suicide? Select all that apply.

A) Displays mild depression.
B) Discusses taking his or her life.
C) Discusses a plan to end his or her life in detail.
D) Admits planning to end his or her life.
E) Shows curiosity about death.


**Question 336**

The nurse is caring for a premature infant diagnosed with patent ductus arteriosus (PDA). Which medication should the nurse plan to provide this client?

A) Insulin
B) Indomethacin
C) NSAIDS
D) Antidepressant


**Question 337**

A nursing working in an outpatient women's health clinic is caring for a client in menopause. When discussing hormone replacement therapy (HRT) with the client, the nurse should include which statement?

A) "If vaginal dryness and painful intercourse are the only symptoms, then low-dose vaginal estrogen is preferred."
B) "HRT is the least effective treatment of menopausal hot flashes and vaginal dryness."
C) "The risk of blood clots in the legs or lungs is further increased by using transdermal patches, gels, or sprays."

D) "Most healthy, recently menopausal women should not use HRT for relief of hot flashes and vaginal dryness."

Question 338

An emergency department nurse is caring for a child in a sickle cell crisis. The nurse suspects the etiology of the crisis as being thrombotic in nature due to which clinical manifestations? Select all that apply.
A) The client is in extreme pain.
B) The client has profound hypotension and shock.
C) The client has profound pallor and fatigue.
D) The client has a fever.
E) The client's chest CT reveals a pulmonary infarct.

Question 339

A client with multiple sclerosis is observed transferring from the bed to a motorized wheelchair and applying splints to the lower extremities before entering the bathroom to perform morning self-care. What could the nurse conclude regarding this observation?
A) The client needs instruction to conduct morning care before applying splints to lower extremities.
B) The client is reliant upon assistive devices for independence.
C) The client is dependent upon assistive devices.
D) The client uses assistive devices to optimize autonomy.

Question 340

The nurse has been working in a long-term care facility for 1 week. The nurse notes that during the evening meal, an unlicensed assistive personnel (UAP) takes a tray to a client who is unable to cut up and eat the food independently. After the nurse assists the client with eating the meal, which action is appropriate to advocate for this client?
A) Notify the healthcare provider.
B) Call the client's family to have them assist with evening meals.
C) Discuss the situation with the director of nursing.
D) Report the UAP for neglect.

Question 341

A client with acute renal failure is complaining of a metallic taste in the mouth and has no appetite. Based on this data, which intervention by the nurse is the most appropriate?
A) Encourage the intake of protein, salt, and potassium.
B) Restrict fluids.
C) Provide mouth care before meals.
D) Administer an antiemetic as prescribed.

Question 342

A pregnant adolescent client asks for information about the pregnancy and the baby because she cannot afford prenatal care. Which action by the nurse is the most appropriate?
A) Ask the client if her parents are aware that she is pregnant and if she is covered by their medical insurance.
B) Instruct the client on aspects of pregnancy, fetal development, and labor and delivery.
C) Provide the client with information on resources to assist with medical care during the pregnancy and after delivery.
D) Tell the client that the father of the baby is responsible to pay for medical care for her during the pregnancy and after delivery.

Question 343

The nursing is caring for a client who is hospitalized for cellulitis of the foot. Which nursing diagnoses should the nurse use to plan this client's care? Select all that apply.
A) Disturbed Sleep Pattern related to skin infection
B) Acute Pain related to skin infection
C) Altered Skin Integrity related to skin infection
D) Powerlessness related to inability to control the infection
E) Social Isolation related to skin infection
Question 344

The nurse is planning care for a child who is diagnosed with cerebral palsy (CP). What are appropriate nursing diagnoses for this child? Select all that apply.
A) Deficient Diversional Activity
B) Caregiver Role Strain
C) Impaired Mobility
D) Risk for Injury
E) Anxiety


Question 345

The nurse is providing supportive care for the parents of an infant who died from sudden infant death syndrome (SIDS). Which action by the nurse are appropriate?
A) Sheltering the parents from their grief by not giving them any personal items of the infant, such as footprints.
B) Allowing the parents to hold, touch, and rock the infant.
C) Interviewing the parents to determine the cause of the SIDS incident.
D) Advising the parents that an autopsy is not necessary.


Question 346

The home health nurse is providing care to a client with a history of constipation. The healthcare provider prescribed psyllium mucilloid (Metamucil) for the client. After providing medication teaching for this client, which statement indicate the need for further education?
A) “This medication is a lot more natural than other laxatives.”
B) “I don't need to drink extra fluids while I take this medication.”
C) “I may be able to stop my Lipitor with this medication.”
D) “This medication takes several days to work.”


Question 347

The nurse is planning care for the client with Cushing's syndrome who has been admitted for complications related to the disease process. Which intervention should the nurse plan for this client to improve the impaired gas exchange?
A) Administer IV fluids per practitioner order.
B) Schedule nursing activities to allow for periods of rest.
C) Monitor serum electrolytes.
D) Assess input and output accurately.


Question 348

The nurse manager is encouraging staff on the unit to go back to school and "become professionals, not just workers" by "increasing" their knowledge through education and networking. Which criteria for nursing to be recognized as a profession is the nurse manager highlighting? Select all that apply.
A) Conducting ongoing research
B) Joining professional organizations
C) Having autonomy
D) Following a code of ethics
E) Having specialized education requirements


Question 349

An older adult client complains of periods of confusion and forgetfulness, but reports clear thought process at most times of the day. Which is the appropriate response from the nurse?
A) "Are you having trouble hearing?"
B) "Everybody has a few problems with memory as they get older."
C) "You should probably have an MRI of your brain."
D) "You probably have nothing to worry about. It's most likely stress-related."

Question 350
The nurse is caring for an adolescent client who has been non-adherent with the medical plan of care to treat Crohn disease. In order to increase adherent behavior, which complication associated with Crohn disease will the nurse include in the client’s teaching plan?
A) Diarrhea  
B) Bowel perforation  
C) Intestinal obstruction  
D) Vomiting  

Question 351
A nursing student, who is preparing to compose a paper, chooses to research an organization that promotes excellence in all levels of nursing education. Which organization will the student likely research based on this data?
A) American Association of Colleges of Nursing (AACN)  
B) National League for Nursing (NLN)  
C) National Student Nurses Association (NSNA)  
D) American Nurses Association (ANA)  

Question 352
The nurse is teaching a client with infertility about the medication clomiphene (Clomid). Which client statement indicates that teaching has been effective?
A) “This medication increases my estrogen levels so I can ovulate.”  
B) “This medication stimulates gonadotropin-releasing hormone.”  
C) “This medication stimulates follicle-stimulating hormone (FSH).”  
D) “This medication stimulates luteinizing hormone (LH).”  

Question 353
The pulmonary rehabilitation nurse is teaching a group of clients about both isotonic and isometric exercises. At the conclusion of the session, which client statements indicate effective teaching has occurred? Select all that apply.
A) “Isometric exercises are useful for endurance training.”  
B) “Isotonic exercises are static movements.”  
C) “Isometric exercises involve exerting pressure against a solid object.”  
D) “Isotonic exercises are also called dynamic exercises.”  
E) “Isotonic exercises produce a mild increase in heart rate and cardiac output, but no appreciable increase in blood flow to other parts of the body.”  

Question 354
The nurse is caring for a client with sickle cell anemia. The nurse teaches the client that the inherited alteration of which type of hemoglobin causes the abnormal shape to the red blood cell?
A) Hgb E  
B) Hgb S  
C) Hgb A  
D) Hgb B  

Question 355
The charge nurse assesses clients during a mass casualty incident (MCI) and transfers some to other units and some are discharged to home. In planning for the admission of critically ill clients from the emergency department, which nurses will the charge nurse assign the new clients to when admitted to the unit?
A) Impeccable ethics  
B) Exceptional self-care methods  
C) Advanced assessment skills  
D) Risk-reduction knowledge  
Question 356

The school nurse is leading a discussion on violence with a group of adolescents. Which factors could the school nurse indicate as protective factors that may decrease the risk of violence? Select all that apply.

A) Academic failures at a young age  
B) Participation in family activities  
C) Involvement in the community  
D) Residing in an impoverished community  
E) Success in school


Question 357

A client is admitted to determine the cause of secondary hypertension. Which diagnostic tests should the nurse suspect the client will be prescribed and need to include in the client's teaching plan? Select all that apply.

A) Cerebral angiogram  
B) Intravenous pyelogram  
C) Myelogram  
D) Cardiac catheterization  
E) Renal angiogram


Question 358

A client recovering from a penetrating eye injury tells the nurse that some shadows and movement can be seen with the eye. Based on this data, which conclusion by the nurse is appropriate?

A) A deterioration in vision  
B) The need for artificial tears  
C) An indication of poor nutrition  
D) An improvement in vision


Question 359

The nurse is providing postpartum care to a client from a different culture. What nursing actions are appropriate to include in the client's plan of care? Select all that apply.

A) Ask if there are any specific customs the client wants to follow.  
B) Assess for any assistance required during breastfeeding.  
C) Limit client visitors to the immediate family.  
D) Restrict interactions with the client.  
E) Assess for any specific foods or fluids to hasten recovery.


Question 360

A client explains that before leaving for work, the children need to be taken to daycare and dinner needs to be prepared for that evening. Based on this data, the nurse plans care for which item?

A) Role conflict  
B) Role ambiguity  
C) Self-esteem  
D) Role mastery


Question 361

A spouse expresses frustration when trying to communicate with a client with Parkinson disease (PD). What can the nurse do to facilitate communication between the client and spouse?

A) Suggest the spouse obtain a hearing aid.  
B) Suggest communicating by writing.  
C) Consult with Speech Therapy for exercises to aid with speech and language.  
D) Recommend that the client and spouse learn sign language.

Question 362
The nurse is reviewing the results of laboratory tests conducted on a client admitted with a respiratory disorder. Which laboratory finding would be most significant for this client?
A) Blood pH 7.32
B) Hemoglobin level 12 mg/dL
C) Serum sodium 140 mg/dL
D) Oxygen saturation 96%

Question 363
The nurse is preparing discharge instructions for a client with macular degeneration and type 1 diabetes mellitus. What should the nurse include in this client's teaching plan?
A) Referral to home care to ensure safety with administering insulin at home
B) Information on the need to have routine eye examinations every 5 years
C) Information on Medic-Alert bracelets
D) Information on assisted-living facilities

Question 364
The nurse is providing care to a client who is a victim of interpersonal violence. Which interventions are appropriate for this client? Select all that apply.
A) Educating the client on how to avoid future incidents of violence
B) Distracting the client to avoid overwhelming feelings about the situation
C) Helping the client identify intra- and interpersonal strengths
D) Using a supportive, nurturing approach
E) Maintaining objectivity and offering short, to-the-point responses

Question 365
The nurse is planning the care for a client diagnosed with a personality disorder. Which goals address the client's antisocial behavior? Select all that apply.
A) The client will interact socially with others.
B) The client will take all medications as prescribed.
C) The client will engage in individual therapy without disruptions.
D) The client will share meals with others in the community dining area.
E) The client will refrain from violent behavior.

Question 366
The postoperative nurse is planning care for a client recovering from major thoracic surgery. Which nursing diagnoses should the nurse select to plan for this client's immediate care needs? Select all that apply.
A) Risk for Imbalanced Fluid Volume
B) Risk for Impaired Gas Exchange
C) Risk for Ineffective Airway Clearance
D) Risk for Decreased Cardiac Output
E) Risk for Imbalanced Nutrition: Less than Body Requirements

Question 367
An adolescent client at 34 weeks' gestation states to the nurse, "I am stressed out about becoming a mother. I hope that I can get back to my normal day to day activities after the baby is born." In order to elicit the appropriate information from the client, which question by the nurse is the most appropriate?
A) "Have you been able to get enough rest while keeping up with your studies?"
B) "Are your friends excited about the baby coming and planning a shower for you?"
C) "Have you done anything to prepare for the baby coming home after delivery?"
D) "Do you miss going out with your friends on the weekends?"
Question 368
An older adult male is transported to the emergency department after a motor vehicle crash. Which risk factors are most common for this age group? Select all that apply.
A) Speeding
B) Preexisting health condition
C) Texting
D) Reduced sensory perception
E) Unsafe driving practices

Question 369
The nursing instructor is speaking to a group of nursing students about standards of care. Which comment made by the nursing student indicates the need for further education about the standards of care?
A) "Process standards focus on the steps used to lead to a particular outcome."
B) "Outcome standards focus on the performance of a process."
C) "Standards of care are based on models of high-quality performance."
D) "Process standards focus on human resources, and general organizational structure."

Question 370
A client has been receiving treatment for hypothermia. Which assessment finding indicates nursing interventions have been successful?
A) Blood pressure of 88/54 mmHg
B) Continues to shiver
C) Current temperature of 95°F
D) Heart rate of 72 and regular

Question 371
A nurse in a rural community is employed in a facility that has had a shortage of nurses for several years. As a result, several nurses have left the institution citing "burnout." To avoid risking burnout, the nurse regularly works out, practices yoga, socializes with friends once or twice a week, and participates in at least one annual national or state nursing conference. This approach to work-life balance reflects which concept within the framework of Caring Interventions?
A) Self-actualizing
B) Self-care
C) Self-control
D) Self-compassion

Question 372
A client is abstaining from meat and dairy products during Lent and refuses to select these items when making meal choices. Which actions by the nurse support the client's nutritional and religious needs? Select all that apply.
A) Provide soy milk products as supplements.
B) Consult with a dietitian for food choices to meet the client's needs.
C) Add powder protein supplements to the client's water pitcher.
D) Ask the client what foods are typically consumed during this period of time.
E) Ask the healthcare provider to discuss the impact of the restricted diet on the client's health.

Question 373
The nurse assesses a client's temperature to be 99.8°F. Which nursing diagnosis would be appropriate for the client at this time?
A) Hyperthermia
B) Risk for Imbalanced Body Temperature
C) Anxiety
D) Deficient Fluid Volume
Question 374

A client who has attempted to commit suicide in the past tells the nurse about feeling better since being prescribed an antidepressant medication. Which conclusion by the nurse is appropriate based on the assessment data?
A) Improved sleep
B) Improved appetite
C) Improved mood
D) Improved feelings of guilt

Question 375

A client presents with delayed wound healing. During the physical assessment, which nutrient deficiency does the nurse anticipate based on the data?
A) Digestive enzymes
B) Insulin
C) Protein
D) Carbohydrates

Question 376

A client complaining of mouth soreness had gastric bypass surgery 1 year ago. During the assessment, the nurse notes the client’s tongue is beefy, red, and smooth and the client’s skin appears yellowish. Which additional information is most likely needed before diagnosing this client?
A) Vitamin B12 levels
B) Vitamin B6 levels
C) Iron levels
D) Potassium levels

Question 377

The home health nurse is visiting a client who is 2 weeks postoperative from a coronary artery bypass surgery. The client has lost 10 pounds, is continuing to experience pain, and is not eating. What should be the nurse's next action?
A) Examine the current interventions for pain relief.
B) Revise the goals in the current plan of care.
C) Refer the client to social services.
D) Contact Meals on Wheels so that the client will eat.

Question 378

A client is experiencing weight gain and foamy dark urine 4 weeks after being treated with antibiotics for a sore throat. Which client statement, made during the health history assessment, should the nurse provide further instruction?
A) "I have changed to a more nutritious diet."
B) "I have gained weight in the last 2 weeks."
C) "I felt better after 1 week of the antibiotics, so I stopped taking them."
D) "I have been trying to get plenty of rest since I have been sick."

Question 379

The nursing instructor is educating a group of nursing students on sports-related injuries. Which comment made by a student nurse would indicate to the nursing instructor the need for further instruction?
A) "Adolescents are at the greatest risk for not reporting sports-related injuries."
B) "Clients who have been injured playing a sport need to be counseled on the risks of unreported concussions."
C) "Clients who participate in sports, strenuous exercise, or athletics of any kind should be educated about the dangers of unreported head injuries."
D) "Young adults are at the greatest risk for not reporting sports-related injuries."

Question 380

A nurse working in the emergency department is caring for a client who has overdosed on cocaine. The nurse receives a prescription to administer an antipsychotic medication from the healthcare provider. Which symptom would this medication help to manage? Select all that apply.
Question 381
The nurse is assigned to provide care to a client who is diagnosed with chronic obstructive pulmonary disease (COPD). Overnight, the client's oxygen saturation levels decreased and the client was placed on oxygen by the respiratory therapist. To review specific information about the care received from the respiratory therapist, which portion of the medical record will the nurse review?
A) The diagnostic report
B) The nurses' notes
C) The medication record
D) The consultation report


Question 382
The nurse is educating a family who is planning an ice fishing trip on ways to prevent hypothermia. Which recommendation by the nurse is appropriate?
A) All family members should wear skid-proof footwear.
B) All family members should light rain jackets.
C) If someone becomes hypothermic, keep the clothing on, cover the person with damp blankets, and have the person drink a cool liquid.
D) If someone becomes hypothermic, remove any wet clothing, wrap the person in blankets, and have the person drink a warm liquid.


Question 383
The nurse is caring for a client who is prone to falls. Which nursing diagnosis would be most appropriate for this client?
A) Risk for Disuse Syndrome
B) Risk for Suffocation
C) Risk for Injury
D) Deficient Knowledge


Question 384
A preschool-age client's IV has infiltrated and must be restarted immediately for medication administration. There is no time for placing local anesthetic cream on the skin to decrease the pain associated with the procedure. Which complementary therapy would be most helpful when placing the IV for this pediatric client?
A) Anesthesia
B) Distraction using bubbles
C) Restraint using a "Mummy Wrap"
D) Moderate sedation


Question 385
A client is admitted to the emergency department complaining of the inability to feel the hands and feet after waiting for 2 hours for transportation in 20°F weather. Which action by the nurse is appropriate?
A) Warm the hands and feet in tepid water for 2 hours.
B) Rub and massage the hands and feet.
C) Provide an antipyretic.
D) Warm the hands and feet in 104°F water for 20 to 30 minutes.


Question 386
A nurse is overseeing a group of students who are completing a clinical rotation on a medical-surgical unit. The students are providing direct client care with the assistance of the nurse. The nurse who is overseeing the students is functioning in which capacity?
A) Nurse entrepreneur
B) Nurse educator
C) Nurse practitioner
D) Clinical nurse specialist

Question 387
The charge nurse for a medical-surgical unit is notified that a client with tuberculosis (TB) is being transported to the unit. Which actions for infection prevention are the most appropriate in this circumstance? Select all that apply.
A) Stock the client's supply cart at the beginning of each shift.
B) Wear a mask and gown when caring for the client.
C) Perform hand hygiene only after leaving the room.
D) Test all staff members for TB immediately.
E) Have the client wear a mask when coming from admissions.

Question 388
A nurse is caring for a child diagnosed with childhood traumatic grief after witnessing the death of a family member. Which clinical therapy or therapies will be most appropriate for the client? Select all that apply.
A) Bereavement groups
B) Grief counseling
C) Psychotherapy
D) Complicated grief treatment
E) Provision of reassurance

Question 389
The nurse is planning discharge teaching to a client with a diabetic wound. Which is the priority action for the nurse prior to initiating teaching with this client?
A) Assessing the client's ability to self-administer insulin
B) Determining the client's reaction to being a diabetic
C) Asking the client to state what is known about the current dressing changes
D) Teaching the client how to take blood sugars

Question 390
The spouse of a client being treated for depression believes the client is not responding to prescribed medication. Which statements by the nurse are appropriate when responding to the client's spouse? Select all that apply.
A) "Stop the medication immediately."
B) "Learn to live with the depression."
C) "A trial-and-error period is the best way to determine which medication is the most effective."
D) "Stay on the medication for 6 months to see if there is a response."
E) "A trial of 4 to 6 weeks is usually done to see how people respond to the medication."

Question 391
The nurse is conducting a physical assessment for a middle-age adult female client during an annual exam. When discussing the importance of diet and exercise, which with the nurse include in the teaching session? Select all that apply.
A) Encouraging adequate calcium intake
B) Decreasing the intake of grains, fruits, and vegetables
C) Increasing fat and cholesterol intake
D) Increasing caloric intake
E) Engaging in regular physical activity

Question 392
A nurse is caring for a client recovering from a wedge resection of the left lung for a tumor. What would be appropriate goals for the nursing diagnosis of ineffective airway clearance? Select all that apply.
A) Maintain current weight.
B) Minimize accumulation of fluid.
C) Participation in care by the client
D) Express feelings and concerns.
E) Maintain a patent airway.

Question 393

The family of a victim of a gunshot wound is asking emergency department personnel if they could find out the status of their family member. Which action by the nurse is appropriate?
A) Suggest they go to the cafeteria to get something to eat or drink.
B) Suggest they return home, and the hospital will phone them with any information.
C) Escort the family to see the client.
D) Contact social services or the hospital chaplain to provide support while they wait.

Question 394

The home health nurse talking with the parent outside the bathroom door while the toddlers are playing in the tub. Which client statement would require further safety teaching?
A) "Let me get the children out of the tub so we can talk."
B) "I often bathe the children together."
C) "I do not like to leave the children alone in the bathroom."
D) "Why don't we talk in the living room?"

Question 395

A nurse is caring for a client who is prescribed a selective phosphodiesterase type 5 inhibitor for the treatment of erectile dysfunction. The nurse should include which statement when educating the client regarding this medication?
A) "You should take this medication about 30 minutes before sexual activity."
B) "The action of this medication will last up to 36 hours."
C) "This medication should not be taken more than twice daily."
D) "This medication will enhance erections with or without sexual stimulation."

Question 396

A female client tells the nurse about wanting to wait to start a family even though the spouse has been "hinting" about it for some time. What is the best response by the nurse?
A) "Maybe you should babysit a friend's child for a while to see if you really want children."
B) "What would you do if you became pregnant now?"
C) "You and your spouse need to discuss the decision to start a family."
D) "If you don't want to start a family then you don't have to."

Question 397

A middle-age adult client states to the nurse "I do want to have liver spots like my parents did as they got older". Which instruction by the nurse is appropriate?
A) Avoid the sun or use a sunscreen to reduce skin damage.
B) Increase the intake of calcium.
C) Increase the intake of dietary fat.
D) Spend at least 15 minutes each day in the sun.

Question 398

While attending a community health fair, the nurse observes the children of one family walking quietly behind the father with their mother and periodically shyly asking the father questions. The father responds gruffly and continues walking while the children and mother scurry behind to keep up. What does this observation indicate to the nurse? Select all that apply.
A) The father is in a hurry.
B) The children need discipline.
C) The children are not to bother the father.
D) The father is the leader in the family.
E) The mother's role is to care for the children.

Question 399
The nurse is providing care to a client, with a history of rheumatoid arthritis (RA), who is 5 months pregnant. Which nursing actions are appropriate when providing care to this client? Select all that apply.
A) Telling the client there is an increased risk for preterm delivery because of salicylate therapy
B) Educating the client that medication therapy may be discontinued due to remission
C) Teaching the client that RA may be contracted by the fetus during pregnancy
D) Monitoring the client for anemia due to salicylate therapy
E) Suggesting the client begin supplemental pyridoxine

Question 400
The nurse educator is teaching a group of students about health promotion and disease prevention. Which nursing activities promote health and health maintenance? Select all that apply.
A) Teaching parents how to perform pulmonary drainage and cupping on their ill child
B) Administering the flu vaccine for an infant who is 9 months of age
C) Treating a child diagnosed with pneumonia
D) Helping a mother determine a daily feeding schedule for her infant
E) Teaching a school-age child how to use dental floss

Question 401
The nurse admits a client to the medical unit for a urinary disorder. Which questions are appropriate for the nurse to include when assessing the client's voiding pattern? Select all that apply.
A) Does your urine have any type of odor?
B) How often do you get out of bed at night to urinate?
C) How many times do you urinate in a 24-hour period?
D) What color is your urine?
E) Has your pattern of urination changed recently?

Question 402
The nurse is caring for a client who is experiencing auditory hallucinations. Which is the priority nursing diagnosis for this client?
A) Individual Ineffective Coping
B) Impaired Verbal Communication
C) Risk for Violence, Self-Directed or Other-Directed
D) Disturbed Thought Processes

Question 403
A client with acute abdominal pain is scheduled for an appendectomy in 3 hours. While waiting for the surgery, the client reports that the pain has subsided. Which is the priority action by the nurse?
A) Contact the surgery department.
B) Contact the healthcare provider.
C) Determine when the client can be medicated for pain.
D) Notify the nursing supervisor.

Question 404
A client with multiple sclerosis is prescribed diazepam (Valium). What assessment finding indicates that the medication is effective for the client?
A) Blood glucose level is within normal limits.
B) Ophthalmologic examination shows no evidence of cataracts.
C) Muscle spasticity is reduced.
D) The client states that muscles are weak.
Question 405
The nurse is caring for a dying child. Which nursing action supports the primary goal for a dying child?
A) Administer pain medication as ordered.
B) Maintain a busy schedule for child and family members.
C) Keep the child entertained so she does not think about dying.
D) Ensure that a good relationship is maintained with the family.

Question 406
A school-age client loses consciousness after being hit in the head with a bat at baseball practice. The child was not wearing a helmet. The last set of vital signs showed heart rate 48, blood pressure 148/74 mmHG, and respiratory rate 28 and irregular. Based on this data, which conclusion by the nurse is the most appropriate?
A) Typical for a sleeping child at this age
B) Normal for this child
C) A sign of increased intracranial pressure
D) A sign that this child has a spinal cord injury

Question 407
The nurse is caring for a school-age client who will be discharged from the hospital after receiving a ventriculoperitoneal (VP) shunt as treatment for increased intracranial pressure (IICP). The nurse has taught the parents to monitor the child for shunt malfunction. Which statement by the parents regarding when to notify the healthcare provider indicates that learning goals have been met?
A) “If we notice our child's head is expanding, we will notify the doctor.”
B) “If our child develops an altered level of consciousness, we will notify the doctor.”
C) “If our child has a bulging soft spot, we will call the doctor.”
D) “If our child develops sunset eyes, it will be important to call the doctor.”

Question 408
A client with frequent urinary tract infections in seen in the urology clinic and is at risk for acute renal failure. The nurse reviews the client's medical history. Which item support the client's being at risk for acute renal failure? Select all that apply.
A) Dehydration
B) Ineffective wound healing
C) Low serum albumin
D) Renal calculi
E) Hypertension

Question 409
The nurse is selected to participate on a committee to write critical pathways for a specific set of medical diagnoses. Which are advantages of using this approach when providing client care? Select all that apply.
A) Link nursing diagnoses with specific assessment data
B) Identify interventions, time frames, and expected outcomes
C) Provide specific columns for diagnosis, interventions, and evaluation
D) List medical treatments to be performed by other providers
E) Sequence the care that is to be given on a particular day

Question 410
An older adult client diagnosed with chronic obstructive pulmonary disease (COPD) is scheduled for a total knee replacement. What should the nurse include in this client's plan of care?
A) Monitor urine output.
B) Restrict protein intake.
C) Assess postoperative wound healing.
D) Expect purulent drainage.
Question 411
The nurse is planning the care for a client with peripheral neuropathy. Which interventions would assist with disturbed sensory perception? Select all that apply.
A) Nutrition
B) Frequency of pain medication
C) Smoking cessation
D) Frequent rest periods
E) Relaxation techniques

Question 412
A nurse educator is teaching a group of new staff members recently hired on a behavioral health unit. Which examples of cognitive-behavioral therapy (CBT) does the educator include as expected when providing care to clients on the unit? Select all that apply.
A) Systematic desensitization
B) Reciprocal inhibition
C) Benzodiazepine administration
D) Cognitive restructuring
E) Relaxation techniques

Question 413
A community health nurse runs a clinic that provides health screening mainly to Mexican American and Filipino American clients. The nurse wants to have a class on smoking cessation for interested adults of this group. What action should the nurse take to adjust their time orientation?
A) Mail letters ahead of time to make sure clients are informed about the upcoming class.
B) Make posters and place them in areas of the community frequented by these groups.
C) Begin classes when a group of clients has gathered.
D) Make sure that the classes are held at specific times.

Question 414
The nurse is caring for a child diagnosed with autism spectrum disorder (ASD) who is being admitted to the hospital with dehydration. Which action by the nurse is appropriate when the child arrives to the care area?
A) Quietly orient the child to a single-bed hospital room.
B) Take the child to the playroom for arts and crafts.
C) Take the child on a tour of the pediatric unit.
D) Orient the child to a four-bed unit.

Question 415
The nurse is assessing a client who is 20 weeks pregnant. Which health issue should the nurse recognize as increasing this client’s risk for the development of eclampsia?
A) Treatment for vitamin D deficiency
B) Fibrocystic breast disease
C) Surgery for ruptured appendix 1 year prior
D) Obesity

Question 416
The nurse is working with a client to create a crisis care card in the event the client wants to attempt suicide in the future. Which should the nurse include on this card?
A) Name and address of friends to call in case of a crisis
B) Name of client
C) Address of client
D) Name of client’s healthcare provider
Question 417

The nurse is instructing a client with heart failure about a prescribed sodium-restricted diet. Which client statement indicates that additional teaching is required?

A) "I can use spices and lemon juice to add flavor to food when cooking."
B) "I have to read the labels on foods to find out the sodium content."
C) "I have to limit the intake of food with baking soda or baking powder."
D) "I can use as much salt substitute as I want."


Question 418

The nurse is preparing to provide care for a client who is newly admitted to the unit. Prior to assessing the client, which should the nurse review to determine care that may be needed?

A) The written care plan
B) The medication administration record (MAR)
C) The client’s medical record
D) The Kardex


Question 419

The nurse is providing care to a client diagnosed with chronic obstructive pulmonary disease (COPD). Which observation would indicate that care provided to this client has been effective?

A) Client conducts morning care and ambulates in room while maintaining an oxygen saturation of 92% on room air per oximetry reading.
B) Client leaves hospital unit to smoke outside 4 times a day.
C) Client needs assistance with morning care and meals due to shortness of breath.
D) Client states family members are discussing admission to a nursing home for continuing care.


Question 420

The nurse is completing a health screening for a school-age child with rheumatoid arthritis (RA). The parents ask the nurse to recommend activities that will promote exercise for their child. Which recommendation by the nurse is the most appropriate?

A) Softball
B) Basketball
C) Football
D) Swimming


Question 421

An 18-month-old toddler scheduled for routine vaccinations begins to cry when placed on the examination table. The parent attempts to comfort the toddler, but nothing is effective. Which action by the nurse is the most appropriate?

A) Allow the toddler to sit on the parent's lap and begin the assessment.
B) Instruct the parent to hold the toddler down tightly to complete the examination.
C) Ask another nurse in the office to hold the toddler, since the parent is not able to control the toddler's behavior.
D) Allow the toddler to stand on the floor until the crying stops.


Question 422

The nurse educator is speaking with a group of students about renal disorders. Which statement is appropriate for the educator to include regarding renal stones?

A) Young- or middle-adult men are at an increased risk for stones.
B) Women have a greater risk overall than men.
C) Frequency is greater in the northern United States.
D) Older adult clients are particularly at risk for urolithiasis.


Question 423

Which acculturation behavior will the nurse observe in a client who has emigrated from Mexico to the United States?
A) The client attends church in the neighboring community to meet new people.
B) The client lives in a neighborhood that is populated predominantly with people from Mexico.
C) The client speaks Spanish only.
D) The client buys all needed products from the local store owned by people from Mexico.

Question 424

A nurse is teaching a group of pregnant clients regarding seizures associated with eclampsia. The nurse will include which statement?
A) "Seizures are rare in eclampsia, but they occur sometimes."
B) "The clonic phase of a grand mal seizure is evidenced by muscular contraction and rigidity."
C) "The tonic phase of a grand mal seizure is evidenced by alternate contraction and relaxation of the muscles."
D) "Seizures do not occur in preeclampsia."

Question 425

A client who was diagnosed with diabetes mellitus 1 year ago is hospitalized in diabetic ketoacidosis after a religious fast. The client tells the nurse, "I have fasted during this season every year since I became an adult. I am not going to stop now." The nurse is not knowledgeable about this particular religion. Which nursing actions would be appropriate? Select all that apply.
A) Assess the meaning and context of fasting in the client's religion.
B) Ask family members of the same religion to discuss fasting with the client.
C) Encourage the client to seek medical care if signs of ketoacidosis occur in the future.
D) Request a consult from a diabetes educator.

Question 426

A nurse is preparing to educate a group of parents on sudden infant death syndrome (SIDS). Which should the nurse include when presenting significant stressors that contribute to SIDS? Select all that apply.
A) Side sleeping
B) Supine sleeping
C) Prone sleeping
D) Bed sharing
E) Face-down sleeping

Question 427

A nurse is providing care to an infant who underwent surgery for pyloric stenosis. Which actions by the nurse will decrease the risk for infection when caring for this infant? Select all that apply.
A) Place pressure on the incision.
B) Auscultate the lungs to assess for any adventitious sounds.
C) Inspect the incision for redness, swelling, or discharge.
D) Give the infant a tub bath.
E) Monitor temperature every hour.

Question 428

The nurse is providing care to an older adult client who was recently diagnosed with early osteoporosis. Which intervention is most appropriate for the nurse to implement with this client?
A) Instituting an exercise plan that includes weight-bearing activities
B) Protecting the client's bones with strict bed rest
C) Providing the client with assisted range of motion exercising twice daily
D) Increasing the amount of calcium in the client's diet

Question 429

A client asks the nurse if there are any conditions that can exacerbate systemic lupus erythematosus (SLE). Which response by the nurse is the most appropriate?
A) "Fever is a known trigger for an SLE exacerbation."
Question 430

The community health nurse reviews data collected during interviews with community members during a health fair and decides to create an approach to improve iron intake. On which community members is the nurse focusing with this plan? Select all that apply.

A) Males in the 35-50 age range
B) Older community members
C) Vegan community members
D) Adolescents
E) Children


Question 431

An adult client reports to the nurse an inability to tolerate usual exercise and the feeling of fatigue. The client states that these symptoms have been gradual over time. Which physical assessment findings, along with the client's verbal complaints, would indicate chronic lymphocytic leukemia (CML)? Select all that apply.

A) Splenomegaly
B) Abnormal bleeding
C) Joint pain
D) Pallor
E) Edema


Question 432

A client has a wound of the left lateral aspect of the thigh. Which action by the nurse promotes wound healing for this client?

A) Positioning to keep weight off of the wound
B) Restricting fluids
C) Enforcing strict bedrest
D) Positioning with weight directly on the wound


Question 433

A client tells the nurse about knowing when a vitamin B12 injection is due because there is an increase in tingling of the fingers and toes. What does this information provide to the nurse?

A) The client has poor nutrition, and the vitamin B12 injections are needed.
B) The client believes the vitamin B12 injections are helping the peripheral neuropathy.
C) The vitamin B12 injections are helping the peripheral neuropathy.
D) The client does not like to take vitamins, and having a monthly injection is easier.


Question 434

When caring for a client newly diagnosed with obsessive-compulsive disorder, which action by the nurse is appropriate?

A) Teach ritual interruption skills.
B) Interrupt the ritual.
C) Do not interrupt the ritual.
D) Teach about antianxiety foods.


Question 435

After conducting a physical assessment for an adult client, the nurse discusses the assessment with a co-worker and states that the client's beliefs and actions regarding common health practices seem "weird." Based on this data, which action by the nurse is the most appropriate?

A) Communicate the findings to the health-care team.
B) Determine the culture with which the client identifies.
C) Repeat the assessment later in the day.
D) Write a nursing diagnosis to address the "weird" beliefs and actions.
Question 436
An older adult client with bilateral osteoarthritis of the knees tells the nurse, "I know I need to lose weight but exercising makes my knees ache." What instruction should the nurse provide to this client?
A) Eat a reduced-calorie diet for several months before attempting exercise.
B) Discuss knee replacement surgery with the physician.
C) Stretch the muscles, because that is the only form of exercise that improves osteoarthritis.
D) Exercise the muscles so that they will protect the joints.

Question 437
A nurse has just been hired as a medical information system (MIS) trainer at a hospital where an electronic medical record is being installed. The nurse has been asked to assess the security of the client's medical records. According to the Security Rule of HIPAA, which recommendations by the nurse will enhance security? Select all that apply.
A) Assign each staff member a unique username and password.
B) Store computer-generated materials in a locked vault.
C) Install a firewall.
D) Turn monitors away from view when unattended.
E) Assign each unit unique passwords.

Question 438
The nurse is planning care for a client who has been admitted to the unit with a salicylate overdose. When preparing the plan of care, the nurse considers which to be a priority nursing diagnosis?
A) Risk for Injury
B) Ineffective Breathing Pattern
C) Powerlessness
D) Impaired Mobility

Question 439
An adult child brings a parent in to be evaluated and is told the client has Alzheimer disease. The adult child asks the nurse if all the children of the client are going to get the disease. Which risk factors will the nurse include when responding to the inquiry? Select all that apply.
A) Environmental exposure
B) History of hypertension
C) Genetic predisposition
D) Race
E) Age

Question 440
A novice nurse asks the preceptor why the staff spends time talking about the clients between shifts when the oncoming nurses can read the charts instead. Which is the best response by the preceptor?
A) "Change-of-shift report ensures that the oncoming staff knows the most critical information about the client requiring care."
B) "Maybe we should suggest primary nursing."
C) "It has always been done this way."
D) "You are right. It is a waste of time."

Question 441
A nurse in a busy outpatient pediatric clinic notes that a preschool-aged child who was due to be seen is a no-show. The child is not up to date on vaccinations. Which action by the nurse is appropriate?
A) Notify the healthcare provider that the child's immunizations are no longer up to date.
B) Plan to discuss the principles of health supervision at the next scheduled visit.
C) Call the parents and encourage them to bring the child for recommended care.
D) Speak firmly with the parents about the importance of being compliant.
Question 442

The nurse instructs a group of community members on the difference between benign and malignant neoplasms. Which participant statements indicate that teaching has been effective? Select all that apply.
A) "Benign tumors grow slowly."
B) "Benign tumors stay in one area."
C) "Malignant tumors push other tissue out of the way."
D) "Malignant tumors are easy to remove."
E) "Malignant tumors can grow back."

Question 443

A nurse educator for a medical-surgical unit is giving a demonstration of new equipment to the rest of the nursing unit and sets up models in the front of the classroom after initial efforts at having the class gather closely around the models was met with discomfort and inattention. Which level of proxemics would be ideal for this situation?
A) 4 to 12 feet
B) 12 to 15 feet
C) 1-1/2 to 4 feet
D) Up to 1-1/2 feet

Question 444

A client shows the nurse a new sore on the forearm that has been increasing in size and will not heal. Which characteristics could indicate to the nurse that this sore is a malignant neoplasm? Select all that apply.
A) Noncohesive
B) Immovable
C) Localized
D) Invasive
E) Slow-growing

Question 445

The nurse is providing care to a client recently extubated for treatment of aspiration pneumonia and respiratory acidosis. Which action by the nurse provides an optimum environment for this client?
A) Allowing family members to remain with client as much as possible
B) Restraining the client
C) Administering narcotics for pain
D) Placing the client in a side-lying position

Question 446

The nurse is reviewing diagnostic and laboratory studies performed for an older adult client with influenza. Which result should the nurse recognize as being consistent with influenza?
A) Fluid-filled lungs on chest x-ray
B) Decreased sodium level
C) Decreased white blood cell count
D) Increased BUN

Question 447

The nurse manager is evaluating the success of staff training on just culture. Which observations indicate that training has been successful? Select all that apply.
A) Staff members are taking responsibility for actions.
B) Staff members are reporting safety errors.
C) Staff members are reporting unsafe staffing conditions to the media.
D) Staff members are neglecting client safety initiatives.
E) Staff members are naming others responsible for errors.
Question 448
A school-age client is admitted to the hospital with respiratory acidosis. Which chronic lung illness in the client's health history does the nurse suspect is causing the current diagnosis?
A) Pneumonia  
B) Hyperthyroidism  
C) Aspiration  
D) Cystic fibrosis

Question 449
The nurse is caring for a client newly admitted to the hospital with uncomplicated cholelithiasis. Based on this data, which laboratory value does the nurse anticipate to be elevated?
A) Serum amylase  
B) Indirect bilirubin  
C) Mean corpuscular hemoglobin concentration (MCHC)  
D) Alkaline phosphatase

Question 450
The nurse is planning care for a number of clients who have been victims of a hurricane. Which is the priority nursing diagnosis to include in the plan of care for the victims?
A) Decreased Cardiac Output  
B) Risk for Post-Trauma Syndrome  
C) Chronic Confusion  
D) Fatigue

Question 451
A client complains about the stress of having to work long hours and missing daily exercise routines. Which response by the nurse is appropriate?
A) "Drinking a small glass of wine each day does help reduce stress."  
B) "There are other ways to reduce stress, such as meditation."  
C) "Maybe exercising, with all of the work, would be too much for your body anyway."  
D) "Exercise helps reduce the impact of stress on the body and would be a good thing."

Question 452
The nurse is caring for a client recovering from surgery to repair a detached retina. In which position should the client be placed?
A) Semi-Fowler on the affected side  
B) Semi-Fowler on the unaffected side  
C) Flat  
D) Prone

Question 453
During an assessment, the nurse notes that a client who was a victim of an industrial accident has a mildly elevated body temperature. When discussing the client's increased temperature, which will the nurse attribute it to?
A) Infection  
B) Exercise  
C) Stress  
D) Diet

Question 454
A group of nurses attend an in-service regarding emergency preparedness for the hospital. One of the nurses has three small children and lives in a two-story house in the suburbs. After the class, the nurse plans to initiate which action to enhance family safety?
A) Installing deadbolt locks on the doors
Question 455

During an assessment, the nurse notes the postpartum client is experiencing intense shaking and chills. Based on this data which conclusion by the nurse is appropriate? Select all that apply.
A) The client has a fever from a postpartum infection.
B) This is evidence of incomplete expulsion of the placenta.
C) This may be a reaction to epidural anesthesia.
D) This may be a reaction to maternal adrenal production during labor and birth.
E) The client has a full bladder.

Question 456

A nurse is planning a community health fair at a local community center. Which goals regarding health promotion does the nurse plan to highlight at the event? Select all that apply.
A) The ability for clients to be able to assess and evaluate their health needs
B) The ability to change and modify goals as health needs change
C) The ability for the client to promote health in other individuals
D) The ability to prevent disease by imitating nursing techniques
E) The ability to promote cost-saving techniques to healthcare providers

Question 457

The nurse assesses a young adult client who was involved in a swimming accident, resulting in tetraplegia. The client makes eye contact with the nurse and states, "I'm going to beat this and walk out of here." Based on this data, which nursing diagnosis is the most appropriate for this client?
A) Self-Care Deficit
B) Impaired Physical Mobility
C) Risk for Post-Trauma Syndrome
D) Noncompliance

Question 458

The urgent care clinic nurse is treating a client who is experiencing abdominal pain. The client states, "I think I ate tainted food last night." What should the nurse do after the client states that the food was tainted?
A) Ask the client open-ended questions to further assess the situation.
B) Advise the client to take an antacid.
C) Call an ambulance before assessing the client any further.
D) Tell the client the healthcare provider does not need to assess the client.

Question 459

The nurse is assessing a client with acute malaise and muscle aches. Which questions should the nurse ask to determine whether the client is experiencing influenza? Select all that apply.
A) "Are you having any trouble urinating?"
B) "Is your cough productive?"
C) "Have you been exposed to anyone with the flu?"
D) "Have you had a flu shot this year?"
E) "Do you have dizziness?"

Question 460

A client with schizophrenia is unable to complete activities of daily living. The client does not respond much to what is happening, and lacks interest in the environment. Based on this data, which conclusion by the nurse is appropriate?
A) The client is most likely hearing voices.
B) The client is most likely very depressed.
C) The client is experiencing positive symptoms.
D) The client is experiencing negative symptoms.

**Question 461**

The nurse is caring for a client who is admitted to the hospital with a diagnosis of pneumonia. The client is on a monitor, and vital signs are recorded from the monitor in order to leave the client undisturbed during the night. The nurse observes that blood pressure, heart rate, and respirations are below baseline for this client. Based on this data, which conclusion by the nurse regarding the changes in vital signs is the most appropriate?

A) The client is about to have a cardiac arrest.
B) The client's metabolic rate has increased.
C) The client is in stage II of NREM sleep.
D) The client is in stage IV of NREM sleep.

**Question 462**

During a home visit, the nurse learns that a new mother is fatigued because the baby is not sleeping well. Which suggestion should the nurse make to help decrease this client's fatigue?

A) Suggest that the client ask the neighbors to babysit one night a week.
B) Advise the client to alternate night feedings with the baby's father to allow each parent to rest.
C) Ask the physician for medication to restore energy.
D) Increase exercise time each week to promote energy.

**Question 463**

An older adult client with heart disease tells the nurse, “I am sick because I sinned by smoking cigarettes.” Which response by the nurse is appropriate?

A) “Cigarette smoking was desirable when you began smoking. We didn't know about the problems it could cause.”
B) “You are correct, but it is too late to do anything about it now.”
C) “Smoking cigarettes isn't a sin. There are many worse habits you could have.”
D) “Why don't we call the hospital chaplain and you can pray about your sins?”

**Question 464**

A client with terminal lung cancer is experiencing shortness of breath. The nurse notes bilateral crackles and wheezes, despite oxygen at 4 liters per minute via nasal cannula and diuretic therapy. What nursing interventions are most appropriate for this client? Select all that apply.

A) Place a fan in the room to move air around the client.
B) Move the client to a room closer to the nurse's desk for closer observation.
C) Administer morphine sulfate per physician order.
D) Elevate the head of the client's bed to a Fowler's position.
E) Change the client's oxygen therapy to a nonrebreathing mask.

**Question 465**

A rape victim is being seen in the clinic. Upon assessment it is discovered the client has contracted syphilis. Which prescription does the nurse anticipate for this client?

A) Ceftriaxone and azithromycin
B) Tinidazole
C) Penicillin
D) Doxycycline

**Question 466**

The postoperative care nurse reviews the documentation from the intraoperative phase and determines that several areas are missing. Which areas did the nurse identify as being missing from the intraoperative documentation? Select all that apply.

A) Start and stop times of anesthesia
B) Start and stop times of the procedure
C) Medication review
D) Antibiotic infusion times
Question 467
What are some reasons the nurse might withhold food and fluids from a client? Select all that apply.
A) A competent and informed client refuses them.
B) A schizophrenic client believes that they are being poisoned.
C) The nurse thinks that the client is in too much pain.
D) A son decides that it is his father's time to die.
E) It is determined to be more harmful to administer them than to withhold them.


Question 468
The nurse is working in a urology clinic and is providing care for a client with urinary stress incontinence. The nurse has chosen the diagnosis of Stress Urinary Incontinence related to sphincter incompetence. Which is the desired outcome for a client with this diagnosis?
A) The client will perform 4-5 squeezes (Kegel exercises) for 10-15 seconds.
B) The client will empty her bladder every time she voids.
C) The client will stop the flow of urine when voiding.
D) The client will improve her incontinence within 1 month.
E) It is determined to be more harmful to administer them than to withhold them.


Question 469
The nurse is instructing a new mother on the strategies to prevent the development of postpartum depression. Which instructions will the nurse include in the teaching session with the client? Select all that apply.
A) Instruct the client to recognize the signs and symptoms of postpartum depression and phone the health care provider if these occur.
B) Restrict fluids and eat a low-fat diet help to avoid the onset of postpartum depression.
C) The only way to avoid postpartum depression is to not have children.
D) Encourage the client to plan how to manage the baby's care needs at home to help adjust to motherhood.
E) Realize that feeling depressed after delivering a baby is normal and can last for months.


Question 470
An adolescent is brought into the emergency department (ED) with injuries sustained from a motor vehicle crash. What should the nurse ensure while caring for this client?
A) Intravenous access line
B) An adequate urine output
C) Stable blood pressure
D) Stabilization of the neck and spinal cord


Question 471
The nurse is taking care of a client with terminal lung cancer who is showing signs of imminent death. What changes should the nurse expect the client to exhibit? Select all that apply.
A) Initial increased heart rate followed by bradycardia
B) Diaphoresis
C) An increase in the volume of Korotkoff's sounds
D) An increase in cardiac output
E) Decreased blood pressure


Question 472
A nurse is working with a group of older adult clients at a community health center. Several clients report growing concerns about their dental health. They state they need to have dental work done despite continuing the same hygiene habits they have employed for years. They inquire about the underlying cause for these changes. Based on this data, which response by the nurse is the most appropriate?
A) "It is common for dental health to decline with aging."
B) "A decrease in bone density is associated with aging, which can result in tooth decay and breakage."
C) "Aging increases saliva production, which increase exposure of the tooth's enamel to corrosive agents."
D) "Metabolic changes in aging contribute to dental destruction."
Question 473

A nurse working on a medical-surgical unit has opted to return to school to earn a Bachelor of Science in Nursing (BSN) degree. After considering projected changes in health care and the population cared for in the community, the student might consider selecting which elective course?

A) A psychology course on young adults  
B) A course on medical Spanish  
C) A class on the effect of illness on a young child  
D) A personal finance class  


Question 474

The nurse identifies the diagnosis of Risk for Injury for a client who is disoriented. Which statement should the nurse identify as an expected outcome for this client's care?

A) The client sleeps through the night and stays awake most of the day.  
B) The client does not sustain injuries during wanderings.  
C) The client maintains continence on four out of five voidings.  
D) The client receives culturally appropriate care.  


Question 475

The nurse educator is presenting a lecture regarding advocacy in nursing. Which interventions will the nurse include as they exemplify client advocacy? Select all that apply.

A) Speaking out for safe practice conditions when threatened by budget cutbacks  
B) Supporting medical authority  
C) Educating clients and their families about their legal rights  
D) Questioning other healthcare professionals when they provide care that is based on stereotypic ideas rather than on an assessment of the individual client's needs  
E) Ensuring that clients have the necessary information to make an informed decision or give informed consent  


Question 476

The nurse identifies the diagnosis of Risk for Injury as appropriate for a client with preeclampsia. Which should the nurse include in this client's plan of care?

A) Limit phone calls and visitors.  
B) Provide stimulation with television and visitors.  
C) Place in a semiprivate room.  
D) Suggest family and friends phone frequently.  


Question 477

When planning interventions to address a client's crisis, which actions by the nurse are appropriate?

A) Focus on long-term problems.  
B) Determine follow-up.  
C) Conduct a complete assessment.  
D) Develop the plan prior to meeting with the client.  


Question 478

A nurse is caring for the 1-hour-old newborn of a diabetic mother. Which actions will the nurse include in the newborn's plan of care? Select all that apply.

A) Assess blood glucose hourly and then every 4 hours.  
B) Evaluate blood glucose levels at birth and at 6-hour intervals.  
C) Use formula for all feedings, avoiding 5% dextrose.  
D) Assess for hyperthyroidism.  
E) Assess the newborn's temperature hourly.  

Question 479

The nurse is providing care to a client who is diagnosed with acute respiratory distress syndrome (ARDS). Which clinical manifestation does the nurse anticipate for this client who is experiencing hypoxia as a result of the ARDS diagnosis?
A) Bradycardia
B) Hypertension
C) Dyspnea
D) Fluid imbalance


Question 480

The nurse is concerned that a client is at a high risk for a burn injury. Which data supports the nurse's concern? Select all that apply.
A) Diagnosis of hypertension
B) Age 71 years
C) Part-time employment at a convenience store
D) Utilizes public transportation for grocery shopping
E) Currently smokes 1 pack per day of cigarettes


Question 481

The nurse is providing care to a female client who is diagnosed with coronary artery disease. The client states to the nurse, “I don't know how this happened.” Which response by the nurse is the most appropriate?
A) “Women with a history of sexually transmitted infections are more likely to develop this disease.”
B) “Women who have children later in life often develop this disease.”
C) “Women who conceive through the use in in-vitro fertilization are more likely to develop this disease.”
D) “Women who take oral contraceptives are more likely to develop this disease.”


Question 482

The nurse is discussing hospice care with the family of a client dying of cancer. The spouse asks the nurse if Medicare will continue to pay if the client lives longer than 6 months. Which response by the nurse is appropriate?
A) “Please ask the doctor to explain the role of hospice before discharge.”
B) “It is unlikely your husband will live past 6 months.”
C) “I will call someone in the finance office to come speak with you about your question.”
D) “Are you concerned about paying for your spouse’s health care?”


Question 483

The nurse is providing care to a client who has a body temperature of 94°F, an irregular heart rate, and low blood pressure. Which is the priority intervention for this client?
A) Administer warmed intravenous fluids.
B) Elevate the head of the bed.
C) Provide a heating pad to the client's lower back.
D) Elevate the client's legs.


Question 484

The nurse conducts teaching for a client recently diagnosed with type 2 diabetes mellitus. At the conclusion of the session, which client statement shows that teaching has been effective?
A) “I will have to make dietary changes to manage this chronic disease.”
B) “This chronic disease will become worse and lead to death.”
C) “I will take medication for a week for this acute illness.”
D) “I will have to take insulin for this disease for my entire life.”


Question 485

A nurse is caring for a client with glaucoma who is prescribed a topical beta-adrenergic blocking agent. When teaching this client about the medication,
which will the nurse include?
A) When used long term, causes permanent darkening of the iris of the eye and eyebrows.
B) Relaxes the ciliary muscle, improving the outflow of aqueous humor and reducing intraocular pressure.
C) Reduces intraocular pressure by decreasing the production of aqueous humor in the ciliary body.
D) May cause blurred vision and stinging.


Question 486

A community health nurse is educating pregnant clients about the prenatal causes and risk factors associated with the development of attention-deficit/hyperactivity disorder (ADHD). Which statement will the nurse include in the educational session?
A) "ADHD has been linked to a specific gene, and genetic testing may help to diagnose this."
B) "ADHD has not been linked to prenatal exposure or disease."
C) "ADHD has been linked to childhood exposure to folate."
D) "ADHD has been linked to prenatal exposure to cigarette smoke."


Question 487

A client diagnosed with cardiomyopathy is being discharged to home. What client statement indicates discharge teaching has been effective?
A) "I will see the doctor to discuss implanting a cardiac defibrillator next week."
B) "I will eat foods containing sodium only if drinking water with them."
C) "I will exercise as much as possible, regardless of feeling weak and short of breath."
D) "My pants getting tight around the waist, means I'm eating too much and should cut back on food."


Question 488

The nurse instructs a client with Parkinson disease (PD) about carbidopa-levodopa (Sinemet). Which client statement indicates that teaching has been effective?
A) "I will sit up for several minutes to gain my balance before going from lying down to standing up."
B) "This medication will cure my Parkinson disease in time."
C) "I will take the medication with my meals."
D) "This medication will not affect my blood pressure medications."


Question 489

The parent of a child with autism spectrum disorder (ASD) asks why family therapy has been prescribed. Which response by the nurse is most appropriate?
A) "Family therapy will help you learn how to assess the child's potential."
B) "Family therapy will help you learn how to cope with your situation."
C) "Family therapy will provide the child with an opportunity to learn problem-solving skills."
D) "Family therapy will help you interact with your child."


Question 490

A nurse has taken a position in the hospital setting. The nurse knows one role of the professional nurse is that of client advocate. Which must the nurse be aware of in preparation to act as a client advocate? Select all that apply.
A) State and federal client rights legislation
B) The unit policy manual
C) The health department's client rights statement
D) The hospital's client rights statement
E) The rights of a client in a long-term care facility


Question 491

The nurse instructs a client with asthma on bronchodilator therapy. Which statement indicates client understanding?
A) "The medication widens the airways because it stimulates the fight-or-flight response of the nervous system."
B) "The medication widens the airways because it decreases the production of histamine that narrows the airways."
C) "The medication widens the airways because it acts on the parasympathetic nervous system."
D) "The medication widens the airways because it decreases the production of mucous that narrows the airways."
Question 492

While helping a client with the evening meal, the nurse observes the client close his eyes, bow his head, and murmur words of thanks and praise. What does this behavior indicate to the nurse?
A) The client was praying before eating.
B) The client was asking that the meal be better than the last.
C) The client is confused.
D) The client did not want the nurse to leave.

Question 493

A newly licensed nurse is passing medications with a nurse preceptor. Which action taken by the newly licensed nurse would be inappropriate and require the nurse preceptor to intervene?
A) The newly licensed nurse verifies tube placement prior to administering medications.
B) The newly licensed nurse has a second nurse check the medication order.
C) The newly licensed nurse checks for known allergies prior to administering medication.
D) The newly licensed nurse combines medications with the same active ingredient.

Question 494

An adult, who is returning to school for a second career, decides to become a nurse. Which program is recommended for this adult learner as entry-level education for professional nursing?
A) Nursing doctorate
B) Associate degree
C) Baccalaureate degree
D) Master's degree

Question 495

The nurse is creating a teaching plan for a client with allergic contact dermatitis. Which instructions are appropriate for the nurse to include for this client? Select all that apply.
A) Apply topical steroid once a day before sleep.
B) Apply a thick layer of steroid cream to dry skin area twice a day for 1 month.
C) Apply a thin film of steroid cream to damp skin area for 2 to 3 weeks.
D) Soak hand in Burow's solution.
E) Use the topical steroid for 2 to 3 weeks even when the skin is healing.

Question 496

A novice nurse is working with a client who is admitted to a medical-surgical unit. The nurse is establishing a therapeutic relationship with the client by conveying empathy. Which statement by the nurse best exemplifies empathy?
A) “You seem to be frightened by the procedure. Tell me how you are feeling.”
B) “I wouldn’t be afraid, if I were you.”
C) “You shouldn’t have done it that way.”
D) “I know just how you feel, as my mother has the same illness.”

Question 497

The nurse explains the purpose of an infusion of albumin 5% to a client recovering from hypovolemic shock. Which statement indicates that the client understands the instructions?
A) “It is a liquid that has electrolytes in it to pull water into my blood vessels.”
B) “It is a super-concentrated salt solution that helps me conserve body fluid.”
C) “It is a protein that causes my kidneys to conserve fluid.”
D) “It is a protein that pulls water into my blood vessels.”
Question 498

A nurse is developing a plan of care for a client who was recently diagnosed with human immunodeficiency virus (HIV). The client states, "I don't plan on giving up sex just because I am HIV positive." Based on this data, which nursing diagnosis is the priority for this client?

A) Risk for Infection  
B) Death Anxiety  
C) Social Isolation  
D) Deficient Knowledge


Question 499

A nurse is caring for an adult client recently diagnosed with hypothyroidism. After reviewing the nursing admission assessment, on which documented findings should the nurse plan care for this client? Select all that apply.

A) Nausea  
B) Hot flashes  
C) Tachycardia  
D) Hypothermia  
E) Fatigue


Question 500

The nurse is preparing to discharge a client who underwent lithotripsy in the treatment of a kidney stone. What should the nurse teach the client to prevent further complications of urinary calculi after discharge?

A) "You will need to increase your oral fluid intake to 1L/day."  
B) "You will need to monitor for the signs and symptoms of a urinary tract infection (UTI)."  
C) "It will be important that you not drive while taking pain medications."  
D) "It will be important to maintain a diet high in purines."  


Question 501

The nurse is preparing to teach a client who is newly diagnosed with type 1 diabetes mellitus on the preferred area to self-inject insulin. On which area should the nurse focus based upon insulin absorption rates?

A) Deltoid  
B) Abdomen  
C) Thigh  
D) Hip


Question 502

The clinic nurse is faxing a client's medical record to the local hospital. Which actions by the nurse are appropriate to ensure the client's confidentiality is maintained? Select all that apply.

A) Including identifiable client information on the cover sheet  
B) Using a fax cover sheet  
C) Signing an employee consent form  
D) Conducting a check of the fax number prior to transmitting  
E) Having signed client consent from the client


Question 503

A client with dementia is prescribed donepezil (Aricept). Which should the nurse consider when teaching this client about the medication?

A) Donepezil shortens the early stages of Alzheimer disease.  
B) Donepezil is an anticholinergic and has been known to eradicate some of the symptoms associated with Alzheimer disease.  
C) Donepezil should be taken on an empty stomach.  
D) Donepezil is a cholinesterase inhibitor and has been known to have positive effects when used in the early stage of Alzheimer disease.


Question 504
The nurse is taking the time to reflect on a care situation in which a client sustained a cardiac arrest and died. On which areas should the nurse focus when performing this reflection? Select all that apply.
A) Resources that were used at the time  
B) Resources that were needed but not available  
C) Things that could have been done differently  
D) Gut reactions to the situation  
E) Things that were done well  

Question 505

The nurse is planning care for a client with acute back pain who is a single mother of two small children and works part-time as a receptionist. Based on the data, which intervention is the priority?
A) Suggest that the client take time off from work until the back is healed.  
B) Instruct in appropriate body mechanics for lifting and ways to modify the work environment.  
C) Obtain an order for non-steroidal anti-inflammatory drugs (NSAIDs) from the client's healthcare provider.  
D) Suggest that the children be taken care of by an extended family member until the back is healed.  

Question 506

The parents of a preschool-age child diagnosed with autism spectrum disorder (ASD) ask what can be done to treat the disorder. When responding to the parents, which health care professionals should the nurse tell the parents will take part in their child's care? Select all that apply.
A) Laboratory  
B) Speech therapy  
C) Social services  
D) Public health agency  
E) Play therapy  

Question 507

The nurse managers in a community hospital have been charged with reviewing job descriptions of unlicensed assistive personnel (UAPs) and have questions about the delegation of certain client care activities to UAPs by nurses. To which group, organization, or individual would committee members direct their questions to obtain definitive answers about the parameters of nurse delegation to UAPs?
A) The state board of nursing  
B) The American Nurses Association  
C) The hospital's Chief Executive Officer  
D) The hospital's Chief Nursing Officer  

Question 508

The nurse is caring for an infant who is scheduled for surgery for pyloric stenosis. When planning the infant's care, which nursing diagnoses are appropriate? Select all that apply.
A) Deficient Fluid Volume related to inadequate intake and vomiting  
B) Imbalanced Nutrition, less than body requirements related to inadequate intake and vomiting  
C) Hyperbilirubinemia related to poor liver function  
D) Parental Anxiety related to surgery  
E) Sleep Pattern Disturbance related to discomfort and hunger  

Question 509

The nurse is providing care to the client during the second stage of labor. Which nursing action is appropriate?
A) Assessing fetal heart rate every 15 minutes in low risk clients  
B) Administering antibiotics for a positive group beta strep  
C) Assessing maternal temperature every 2-4 hours after amniotic membranes have ruptured  
D) Encouraging the client to void because a full bladder can interfere with fetal descent  

Question 510

The nursing instructor is evaluating the success of training provided to staff nurses on ways to reduce the incidence of pediatric medication errors.
Which observations indicate that training has been effective? Select all that apply.
A) Staff nurses are asking the pharmacy to prepare the exact doses.
B) Staff nurses are double checking medication calculations.
C) Staff nurses are using liquid preparations.
D) Staff nurses are asking each other to validate placement of decimal points.
E) Staff nurses are refusing to administer medications.

Question 511
The nurse is providing care to a client with a hearing deficit. Which intervention should the nurse use when providing care to this client?
A) Face the client during conversation.
B) Overarticulate words.
C) Use short phrases.
D) Vary the volume of voice through sentences.

Question 512
A young school-age client is in the hospital with acute renal failure following a streptococcus infection. The parents are Spanish-speaking and speak little English. The parents, through an interpreter, ask the nurse what mistake they made that caused the child to be so sick. Which response by the nurse is the most appropriate?
A) "Your child's recent infection may have caused the renal failure."
B) "Your child does not have enough dietary protein."
C) "Your child's renal failure has been caused by a low calcium level."
D) "Your child has a congenital defect that led to renal failure."

Question 513
The nurse is caring for the client with a history of anxiety who is experiencing chest pain, palpitations and dyspnea. Which intervention would be a priority for this client?
A) Asking Respiratory Therapy to set up a mechanical ventilator
B) Providing educational material for the client's medical diagnosis
C) Ordering a regular diet for the client
D) Reassuring the client that symptoms will resolve

Question 514
After completing an assessment, the nurse is concerned that a pregnant client is at risk for having a child with autism spectrum disorder (ASD). Which characteristics should the nurse recognize as increasing the risk for having a child with ASD? Select all that apply.
A) Smokes 1 ppd of cigarettes
B) Rides a stationary bicycle four times a week for 30 minutes
C) Drinks 2 glasses of wine on the weekends
D) Employed as a computer operator
E) Age 40

Question 515
A nurse is providing a series of educational workshops for caregivers of clients enrolled in an Alzheimer day treatment program. Which would be appropriate topics for this group? Select all that apply.
A) Caregiver stress relief
B) Understanding dementia behaviors
C) Support service information
D) Methods for curing the disease
E) Safety precautions

Question 516
The school nurse is preparing a class session for high school students on ways to maintain fluid balance during the summer months. Which interventions should the nurse recommend to decrease the risk of fluid imbalance? Select all that apply.
A) Drink flat cola or ginger ale if vomiting.
B) Drink more fluids during hot weather.
C) Reduce the intake of coffee and tea.
D) Drink diet soda.
E) Exercise during the hours of 10 am and 2 pm.

Question 517
A client’s serum sodium level is 150 mg/dL. Based on this data, which interventions should the nurse plan for this client? Select all that apply.
A) Elevate the head of the bed.
B) Monitor heart rate and rhythm.
C) Administer diuretics as prescribed.
D) Administer potassium supplement as prescribed.
E) Instruct on a low-sodium diet.

Question 518
The nurse is caring for a client who is experiencing hyperthermia. Which intervention is appropriate for this client?
A) Administering a prescribed antipyretic medication
B) Covering the scalp with a hat
C) Applying warm blankets
D) Keeping limbs close to the body

Question 519
The nurse is reviewing the laboratory test results for a client with an endocrine disorder. For which tests should the nurse expect to have current values on the medical record? Select all that apply.
A) Ammonia level
B) Hemoglobin and hematocrit
C) Prothrombin time
D) Liver functions studies
E) Albumin

Question 520
The nurse is assigned two clients. One client needs postoperative teaching in preparation for discharge and the other client with pneumonia has a PaCO2 of 85. Why does the nurse decide to see the client with pneumonia first?
A) The room of the client with pneumonia is closer than that of the client needing postoperative teaching.
B) The client with pneumonia needs more care than the client needing postoperative teaching.
C) The client with pneumonia may be experiencing respiratory distress.
D) The nurse can delegate postoperative teaching to unlicensed assistive personnel (UAP).

Question 521
The nurse is instructing the parents who delivered their first child at 34 weeks' gestation. Which statements made by the parents indicate that additional teaching is needed? Select all that apply.
A) "The growth of our baby will be slower than if he were term."
B) "Tube feedings will be required because his stomach is small."
C) "Breathing might be harder for our baby because he is early."
D) "Because he came early, he will not produce urine for two days."
E) "Our baby will be in an incubator to keep him warm."

Question 522
A nurse is caring for a client who was involved in a motor vehicle accident and has lost approximately 1,500 mL of blood. Based on this data, which type of hemorrhagic shock is the client experiencing?
A) Class I
B) Class II
**Question 523**

A client is experiencing symptoms of depression. Which laboratory or diagnostic test would be used to determine if depression is being caused by another health problem?

A) Cerebral angiogram  
B) Electrocardiogram  
C) MRI of the brain  
D) Thyroid function tests

**Answer:** https://biology-forums.com/index.php?topic=407035

**Question 524**

The client enters the outpatient clinic and states to the triage nurse, "I think I have the flu. I'm so tired, I have no appetite, and everything hurts." The triage nurse assesses the client and finds a butterfly rash over the bridge of nose and on the cheeks. Based on this data, which diagnosis does the nurse anticipate?

A) Gout  
B) Lyme disease  
C) Systemic lupus erythematosus  
D) Fibromyalgia

**Answer:** https://biology-forums.com/index.php?topic=406000

**Question 525**

A client with Alzheimer disease is scheduled to attend occupational therapy three times a week. Which is the purpose of the client attending this type of therapy?

A) Perform activities of daily living  
B) Improve access to community organizations  
C) Improve language deficits  
D) Improve muscle tone

**Answer:** https://biology-forums.com/index.php?topic=406471

**Question 526**

The nurse is providing care to an older adult client admitted to the medical unit for acute gastric and left upper abdominal pain radiating to the back. The healthcare provider has diagnosed the client with chronic pancreatitis. Which items are appropriate to include in the discharge teaching for this client? Select all that apply.

A) Eliminating alcoholic beverages  
B) Monitoring weight every week  
C) Properly administering pancrelipase  
D) Taking antacids  
E) Encouraging a high-fat diet

**Answer:** https://biology-forums.com/index.php?topic=406473

**Question 527**

A nurse working in an OB/GYN outpatient clinic finds that on a routine anemia screen a pregnant client in her second trimester has a hemoglobin of 10 g/dL and a serum ferritin level of 11 mg/L. The client confirms fatigue, but otherwise feels fine. Which actions by the nurse are appropriate when providing care to this client? Select all that apply.

A) Stress the importance of complying with an increase in iron supplementation to 100 mg per day.

**Answer:** https://biology-forums.com/index.php?topic=407203

**Question 528**

During a health history, the nurse learns that a female client has been trying to conceive for 2 years and does not understand why she cannot become pregnant. For which causes of infertility should the nurse assess in this client? Select all that apply.

A) Amount of alcohol consumed each day  
B) Dietary eating pattern  
C) Employment status  
D) Amount of exercise  
E) History of sexually transmitted infections

**Answer:** https://biology-forums.com/index.php?topic=407203
B) Have the client continue her usual daily prenatal vitamin dose.
C) Ask the client to return in 2 months for a repeat check of her serum iron levels.
D) Order a screening for sickle cell anemia.
E) Review a list of iron-rich foods and explore with the client how she can increase dietary iron.
F) Complete a further history and exam to carefully assess for any potential cause of bleeding.


Question 529

A client states, "I haven't left my house for 6 years." Based on this data, which diagnosis does the nurse anticipate for this client?
A) Hematophobia
B) Pathophobia
C) Agoraphobia
D) Social phobia


Question 530

A nurse educator is teaching a group of students about managed care. The educator knows that the students have understood the concept when they state that managed care has which emphasis? Select all that apply.
A) Integration of health care services
B) Bringing services to the client
C) Health promotion
D) Preventive services
E) Cost-effective care


Question 531

The nursing student is conducting an assessment for a client on a medical-surgical unit. Which findings are indicative of a client who is experiencing tachypnea? Select all that apply.
A) Chest pain
B) Rapid breathing at rest
C) Shallow breathing
D) Excessive rapid breathing
E) Cyanosis


Question 532

A psychiatric nurse is actively involved in the planning of a new children's mental health clinic. The nurse understands the importance of including a play area at this site because of the population it will serve. Which is the reason for the use of play and toys to assess children with suspected mental health disorders?
A) Only toys that are developmentally appropriate and specific to the child's biological age are used.
B) Pediatric clients do not usually relate to adults.
C) Pediatric clients express themselves through play.
D) Play enables the nurse to assess the cognitive ability of the pediatric client.


Question 533

The nurse is caring for a client receiving a blood transfusion. Ten minutes after the transfusion of a unit of packed red blood cells was initiated, the client complains of a headache. The nurse assesses that the client has slight shortness of breath and feels warm to the touch. Based on this data, which is the priority intervention for this client?
A) Decrease the rate of the transfusion.
B) Prepare to resuscitate the client.
C) Notify the client's health care provider.
D) Discontinue the transfusion.


Question 534

The nurse is caring for a client on a medical-surgical unit. The client tells the nurse that the healthcare provider has refused to treat the client further if the client continues to be noncompliant with the healthcare provider's recommendations. Which is the priority nursing action in this situation?
Question 535

The nurse is caring for a client diagnosed with benign prostatic hyperplasia (BPH) who is experiencing an increase in symptoms. Which statement by the client would best explain the source of the increased symptoms?

A) "I have decreased oral intake at night."
B) "I am taking over-the-counter saw palmetto."
C) "I am using an over-the-counter cold medication for a cold."
D) "I recently had a vasectomy."


Question 536

A client is admitted to the hospital with sudden, severe abdominal pain. The client is diagnosed with respiratory alkalosis. Which arterial blood gas value does the nurse document to support this diagnosis?

A) pH is 7.47 and PaCO2 is 25.
B) pH is 7.33 and PaCO2 is 36.
C) pH is 7.30 and HCO3 is 30.
D) pH is 7.35 and PaO2 is 88.


Question 537

At a local seminar discussing healthcare resources, the nurse discusses the phenomenon that healthcare resources are declining while costs for health care are increasing. An older adult in attendance asks the speaker why it has become so difficult to obtain needed care and services. Which response by the nurse is the most appropriate?

A) "There are plenty of nurses but not enough doctors."
B) "There are not enough medications produced for those who need them."
C) "There is a decrease in the number of adults needing care."
D) "There is increased cost due to the increased incidence of malpractice lawsuits."


Question 538

The nurse is providing care to an adolescent client who has a history of vomiting after eating. Which diagnostic tests does the nurse anticipate when providing care to this client? Select all that apply.

A) Urine drug screen
B) Barium enema
C) Complete blood count
D) Serum electrolytes
E) BUN and creatinine


Question 539

A nurse is assessing a client who recently returned from a camping trip. The client is experiencing edema in the right foot. When assessing the foot, the nurse notes a sore and suspects cellulitis. Which further data will the nurse assess to support the suspicion?

A) Blood cultures
B) BUN and creatinine
C) Redness, pain, and drainage at the site
D) Breath sounds


Question 540

A client admitted with an exacerbation of multiple sclerosis is demonstrating frustration with eating because hand and arm spasms prevent the proper use of utensils. What should the nurse do to assist this client?

A) Consult with Physical Therapy regarding hand and arm exercises.
B) Plan time to feed the client.
C) Consult with Occupational Therapy regarding assistive devices for meals.
D) Counsel the client to select finger foods for meals.

Question 541
The nurse is providing care to several client in an outpatient client. Which client is at high risk of developing gastroesophageal reflux disorder (GERD)?
A) A client who is morbidly obese
B) A client who drinks one glass of wine monthly
C) A client who follows a strict vegetarian diet
D) A client who is 6 weeks pregnant

Question 542
The nurse in the intensive care unit (ICU) is caring for a client diagnosed with acute respiratory distress syndrome (ARDS). Vital signs prior to endotracheal intubation: HR 108 bpm, RR 32 bpm, BP 88/58 mmHg, and oxygen saturation 82%. The client is intubated and placed on mechanical ventilation with positive pressure ventilation. Which assessment finding indicates a further decrease of cardiac output secondary to positive pressure ventilation?
A) Heart rate 110 bpm
B) Urine output 25mL/hr
C) Oxygen saturation 90%
D) Blood pressure 90/60 mmHg

Question 543
A home health nurse manager is instructing new staff regarding evidence-based practices of wound management. Which will the manager's teaching include? Select all that apply.
A) "Proper wound moisture management can reduce pain and improve the cosmetic outcome."
B) "Wounds should be kept dry and should not be covered until a scab forms."
C) "Allowing a wound to remain dry or applying a dry wound covering may slow the healing process."
D) covering, and ointment application."
E) "Wound covering helps maintain a dry environment, decreasing the chance of infection such as cellulitis."

Question 544
A child is admitted to the hospital with physical injuries. Which assessment findings would indicate that the child is a victim of abuse? Select all that apply.
A) Confusion
B) Missing teeth
C) Dehydration
D) Abrasions to the mouth, lips, and genitalia
E) Inappropriate response to pain

Question 545
The nurse is planning care for a client experiencing dyspnea and a subsequent activity intolerance. Which action by the nurse is the most appropriate?
A) Encourage dependence with activities of daily living.
B) Consult physical therapy for endurance and musculoskeletal function.
C) Consult a dietitian for low-calorie meals.
D) Encourage strenuous activity.

Question 546
During a follow-up home visit, the nurse is evaluating the success of a family’s ability to use internal resources to cope with the illness of a family member. Which does the nurse observe that indicates that internal resources are being accessed? Select all that apply.
A) Next-door neighbor helping with family chores
B) Church members stopping by with groceries
C) Center for Aging picking up the family member to take to a physician's appointment
**Question 547**

The nurse is designing a teaching plan for community members on ways to prevent chronic pain. Which information should the nurse include in this teaching plan? Select all that apply.

- A) Avoiding repetitive movements
- B) Limiting smoking before going to sleep
- C) Obtaining adequate sleep
- D) Eating a healthy diet
- E) Avoiding illicit drug use


---

**Question 548**

The nurse has completed discharge teaching for a client with an anxiety disorder. Which client statement indicates that client teaching about respiratory alkalosis has been effective?

- A) "I will see my counselor on a regular basis."
- B) "I will breathe faster when I am feeling anxious."
- C) "I will not take antacids when I have heartburn."
- D) "I will eat more bananas at breakfast."


---

**Question 549**

During an assessment, a client with congestive heart failure (CHF) and severe shortness of breath tells the nurse about not having enough money to purchase medications. What nursing diagnosis is of the greatest initial importance when planning care?

- A) Excess Fluid Volume related to shortness of breath
- B) Ineffective Family Management of Therapeutic Regime related to inability to purchase medications
- C) Activity Intolerance related to shortness of breath
- D) Fatigue related to shortness of breath


---

**Question 550**

During a sexual history, the client states, "I have always felt like a man trapped in a woman's body." Which conclusion about the client is accurate?

- A) Bisexuality
- B) Homosexuality
- C) Transsexuality
- D) Heterosexuality


---

**Question 551**

The nurse is providing care for a client with a history of depression. The client's psychiatrist recommended yoga to the client as a means of treating the depression. The client wants to know how this will help. Which will the nurse include in the response to the client regarding the benefits of yoga in treating depression? Select all that apply.

- A) Raises levels of endorphins
- B) Increases blood flow to the brain
- C) Promotes alertness and enthusiasm
- D) Improves physical energy
- E) Stimulates the production of serotonin


---

**Question 552**

The nurse is performing developmental assessments on several children in a pediatric clinic setting. Which children as exhibiting a delay in meeting expected developmental milestones? Select all that apply.

- A) A 2-year-old who cannot recite her phone number
- B) A 3-year-old who is unable to speak in sentences
- C) A 6-year-old who is unable to sit still for a short story
- D) A 5-year-old who is unable to button his shirt
A nurse working on a psychiatric unit is caring for a client who has been diagnosed with major depressive disorder (MDD). Upon assessment of the client, which clinical manifestations does the nurse anticipate?

- Anxiety, change in appetite, grief, altered nutrition
- Restlessness, fatigue, suicidal ideation, feelings of guilt
- Depressed mood or loss of interest occasionally for at least 1 week
- A depressed mood sporadically for at least 2 years

The mother of three teenagers is diagnosed with fibromyalgia and asks the nurse to how to keep up with all of the children's activities. Which suggestion by the nurse is the most appropriate?

- Attempt to attend the all the functions of the children.
- Ask the children to limit their activities.
- Avoid attending any afterschool functions for the children.
- Negotiate with the children to alternate attending their functions.

The nurse is caring for a child who is terminally ill with cancer. Which outcomes would be appropriate for this client's care? Select all that apply.

- The child will not experience anticipatory grief.
- The child will engage in age-appropriate play as often as possible.
- The child will eat three balanced meals each day.
- The airway will be free of secretions.
- The child will not experience pain.

A nurse is responsible for the care coordination of a client with multiple sclerosis who is being treated at a multiservice outpatient clinic. The nurse is informed by the occupational therapist that the client needs specialized assistive devices in order to prepare meals but does not have the money to purchase them. The client's insurance company has denied approval to cover the devices. Which is the appropriate action by the nurse?

- Tell the occupational therapist that she will have to come up with another plan to meet the client's needs.
- Explain to the client that she will have to find other methods to pay for the devices.
- Advocate with the insurance company to provide the appropriate coverage.
- Explain to the client that she will have to get family members or friends to prepare her meals.

A home healthcare case manager often receives documents that pertain to the care of clients on a shared fax machine. The case manager is aware of how important it is to protect each client's health information. Which action by the nurse ensures that the Health Insurance Portability and Accountability Act (HIPAA) requirements are met in this situation?

- Take relevant information over the phone.
- Have sending agencies call ahead before any information is sent.
- Have the client sign a consent form for information to be released.
- Do not utilize the fax machine; depend on the mail system.

The novice nurse working in an inner-city hospital that serves a diverse client population states "I want to learn everything possible about all of the clients." Which response by the seasoned nurse is appropriate?

- "You should always be nonjudgmental."
- "This will come with time as you get to know clients and then encounter problems."
- "You need to first understand who you are."
- "I will give you a great book that describes all of the critical factors."
Question 559
A client in the emergency department is being admitted for fluid volume deficit. When preparing to assess this client, on which body system should the nurse focus to determine the cause of the imbalance?
A) Gastrointestinal  
B) Cardiovascular  
C) Musculoskeletal  
D) Genitourinary  

Question 560
The nurse teaches a client who weighs 185 lb and is 5 feet, 3 inches tall on an eating plan to reduce the total intake of calories per day. The body mass index that the nurse calculated to identify the type of eating plan to use for this client is ________.

Question 561
A newly licensed nurse is hired at a local hospital and completes the hospital orientation program. During the hospital orientation process, which regulatory agency did the new nurse learn about which ensures the health and safety of Americans in the workplace?
A) Occupational Safety and Health Administration (OSHA)  
B) Department of Health and Human Services (DHHS)  
C) National Institutes of Health (NIH)  
D) Centers for Medicare and Medicaid Services (CMS)  

Question 562
The nurse is teaching a group of community members about preventing skin cancer. Which participant would be at the greatest risk for skin cancer?
A) A 60-year-old farmer who wears a cap when working  
B) A teenager who wears a ski outfit when skiing  
C) A baby underneath a large beach umbrella  
D) A 25-year-old lifeguard at the community pool who wears sunscreen  

Question 563
A nurse obtains certification to provide direct client care, educate others, consult, conduct research, and manage oncology care. Which expanded nursing role best describes this nurse's career position?
A) Nurse educator  
B) Nurse anesthetist  
C) Nurse researcher  
D) Clinical nurse specialist  

Question 564
A client with contact dermatitis tells the nurse about scratching the skin raw at night from the itching. Which response by the nurse is appropriate?
A) "You should restrict fluids during the day."  
B) "You should apply a lotion containing alcohol to the affected area."  
C) "You should bathe every day."  
D) "You should wear cotton gloves during sleep."  

Question 565
The nurse asks the client to repeat the information taught during the discharge teaching session. The client states, "I have forgotten everything you just said." Which action by the nurse would be appropriate at this time?
A) Assigning another nurse to provide the teaching for the client  
B) Having the client wait to ask questions until after the presentation  
C) Writing down and repeating the information as the nurse teaches  
D) Asking the client their preferred learning strategies  
Question 566
The nurse is reviewing data collected during a health history and physical assessment and determines that a client is at risk for developing breast cancer. Which data supports this client's risk for developing breast cancer? Select all that apply.
A) Body mass index 22
B) Sister had breast cancer
C) Breastfed both children
D) Age 60
E) Menopause at age 58

Question 567
The nurse is planning a teaching session for older community members about the risks for peptic ulcer disease (PUD) found with this age group. What should the nurse include when teaching this community group?
A) PUD in an older client causes less bleeding than in a younger client.
B) Peptic ulcer disease (PUD) is likely to be exacerbated by the bacterium H. pylori.
C) Older clients should undergo colonoscopy when diagnosed with PUD.
D) The elderly client experiences more severe abdominal pain than a younger client with PUD.

Question 568
The nurse is administering peritoneal dialysis to a client with acute renal failure. The nurse notes the presence of a cloudy dialysate return. After notifying the health care provider, which action by the nurse is the most appropriate?
A) Document the cloudy dialysate.
B) Measure abdominal girth.
C) Culture the dialysate return.
D) Increase dialysate instillation.

Question 569
An older adult client tells the nurse that he still has erections and wants to have sex with his wife, but she does not have the same interest as he does. What should the nurse do to assist this client?
A) Encourage the client to ask his wife to discuss the lack of interest with her healthcare provider.
B) Explain that women lose interest in sex as part of the aging process.
C) Suggest that he wait awhile and the urge to have sex will pass.
D) Ask what he has been doing to fulfill himself sexually.

Question 570
The nurse is planning care for a client who had a cesarean birth 4 hours ago. Which actions should be included in this client's plan of care? Select all that apply.
A) Encourage to ambulate to the bathroom to void.
B) Encourage deep breathing and coughing every 2 to 4 hours.
C) Encourage the use of breathing, relaxation, and distraction.
D) Discourage leg exercises.
E) Withhold all analgesics.

Question 571
The nurse provides a wellness program to a group of pregnant adolescents at risk for substance abuse. Which participant statement indicates that teaching has been effective?
A) "I need to take good care of myself by participating in vigorous exercise."
B) "I should seek prenatal care at some point in the pregnancy."
C) "My anemia and eating mostly fast food are not important."
D) "Drinking alcohol and smoking marijuana can harm my baby."
Question 572
The client admitted with benign prostatic hyperplasia (BPH) is prescribed an alpha-adrenergic blocker. The client is prescribed prazosin (Minipress) for the treatment of BPH. When providing care to this client, which is a priority assessment related to this medication?
A) Respiratory rate
B) Blood pressure
C) Temperature
D) Pain rating

Question 573
The nursing student providing care for an assigned client knows that the information documented in the client's nursing care plan could potentially be used in research to optimize client care. Which type of research is used to convert research knowledge into healthcare applications for improved outcomes?
A) Transformational research
B) Quantitative research
C) Qualitative research
D) Translational research

Question 574
A client experiencing menopause voices an interest in using alternative and complementary therapies to manage symptoms. What initial response by the nurse is indicated?
A) "Have you discussed this with your physician?"
B) "What types of therapies are of interest to you?"
C) "Many women report success with these measures."
D) "Those seldom work."

Question 575
A nurse is educating the parents of a child born with tetralogy of Fallot. Which statement will the nurse include regarding this defect?
A) "This disease consists of pulmonic stenosis, right ventricular hypertrophy, ventricular septal defect, and an overriding aorta."
B) "Your child has a decreased amount of red blood cells because of this disease."
C) "This disease consists of pulmonic stenosis, left ventricular hypertrophy, ventricular septal defect, and an overriding aorta."
D) "Increased pulmonary blood flow causes symptoms with this disease."

Question 576
The nurse is instructing new parents on ways to decrease the risk of sudden infant death syndrome (SIDS) with their newborn son. What should be included in these instructions? Select all that apply.
A) Do not smoke near the child and reduce all exposure to secondhand smoke.
B) Avoid placing the baby in the prone or side-lying position for sleep.
C) There is nothing that can be done, so requirements for toys and bedding are of no consequence.
D) Remind the parents that the syndrome is more common in females than males, and that they have a male child.
E) Instruct that it is more common in babies from ages 6 months to 18 months.

Question 577
The nurse working on the behavioral health unit is developing a plan of care for a client. The client does not interact with others, refuses to attend group sessions, and has a history of throwing things at other clients. Which is the priority nursing diagnosis for this client?
A) Social Isolation
B) Impaired Social Interaction
C) Risk for Other-Directed Violence
D) Ineffective Coping

Question 578
The nurse is caring for a school-age client who is scheduled to have major heart surgery the next morning. The nurse enters the room to administer a medication and finds the client crying. Which response by the nurse is most therapeutic?

A) "I'm going to go get the doctor."
B) "Would you like some toys from the playroom?"
C) "You shouldn't cry. You are not in pain."
D) "It is okay to cry. I know this is scary."


**Question 579**

A client is diagnosed with benign prostatic hyperplasia (BPH). Which topics are appropriate for the nurse to include in the teaching session related to the client's condition? Select all that apply.

A) Surgical approaches to treatment
B) BPH diet
C) Pharmacologic approaches to treatment
D) Permanent urinary catheterization
E) Prostate function and location


**Question 580**

A nurse is caring for a client who had a total hip replacement 14 days ago. The client is preparing for discharge in a few days. The nurse facilitates a care conference with the primary healthcare provider, occupational therapist, physical therapist, and the client and family to develop a plan of care for the client prior to discharge. Which roles are being demonstrated by this nurse? Select all that apply.

A) Team leader
B) Collaborator
C) Coordinator
D) Expert
E) Differentiated practitioner


**Question 581**

The nurse providing rapid triage and emergency treatment for clients in an effort to stabilize them knows that which is the primary purpose of the warm zone?

A) Emergency medical treatment
B) Reverse triage
C) Decontamination
D) Rapid triage


**Question 582**

A nurse is caring for a newborn who is being treated in the newborn intensive care unit (NICU) due to complications from exposure to illicit drugs in utero. The newborn has microcephaly, multiple cerebral infarcts and is inconsolable with a high-pitched cry. Which illicit drug is likely to blame for the newborn's symptoms?

A) LSD
B) Cocaine
C) Marijuana
D) PCP


**Question 583**

The nurse is planning care for a client with chronic kidney disease and osteoporosis. After reviewing the client's medical record, which is the priority nursing diagnosis for this client?

A) Anxiety
B) Risk for Injury
C) Risk for Bleeding
D) Disturbed Body Image


**Question 584**
The nurse manager is concerned that a staff nurse is having difficulty prioritizing client care needs. Which did the manager observe the nurse perform that caused these concerns? Select all that apply.
A) Not completing an assessment
B) Reviewing the medication administration record
C) Doing easiest tasks first
D) Relying upon another nurse’s assessment
E) Asking unlicensed assistive personnel to perform complicated care

Question 585
The nurse provides discharge teaching for a client with peptic ulcer disease (PUD). Which client statement indicates that teaching has been effective?
A) "I will take ibuprofen (Motrin) for my headaches."
B) "I will join a gym and increase my exercise."
C) "I will drink more milk and limit spicy foods."
D) "I will limit my intake of coffee."

Question 586
A novice nurse is planning care for an older adult client with a wound infection and systemic blood infection. The nurse completes the plan of care and decides to complete which action to enhance the skill of critical thinking?
A) Discuss the plan with the physician.
B) Request that the client review the plan.
C) Place the plan on the client's chart.
D) Request a review of the plan with the nurse's preceptor.

Question 587
Although a 3-month-old infant's height and weight measurements fall below the 5th percentile, the nurse is not concerned about the development of failure to thrive (FTT). Which information about this child assisted the nurse to make this decision?
A) The infant eats an appropriate amount each day.
B) The parents socialize two nights a week.
C) The child is of Asian-American descent.
D) The child sleeps the whole night through.

Question 588
The nurse is caring for a client admitted with a diagnosis of acute renal failure. The client asks the nurse, "Are my kidneys failing? Will I need a kidney transplant?" Which response by the nurse is the most appropriate?
A) "No, don't think that. You're going to be fine."
B) "When the doctor comes to see you, we can talk about whether you will need a transplant."
C) "Your condition can be reversed with prompt treatment and usually will not destroy the kidney."
D) "Kidney transplantation is highly likely, and it would be a good idea to start talking to family members."

Question 589
The client is admitted to the emergency department (ED) with symptoms of a panic attack, including hyperventilation. Based on this data, the nurse plans care for which health problem?
A) Hypoventilation
B) Vomiting
C) Memory loss
D) Respiratory alkalosis

Question 590
The healthcare provider prescribes aripiprazole (Abilify) for the client with schizophrenia. Which is the priority outcome for the client?
A) The client will report a decrease in auditory hallucinations.
B) The client will report symptoms of restlessness.
C) The client will be compliant with taking the medication as prescribed.
D) The client will consume adequate fluids and a high-fiber diet.

**Question 591**

The nurse is caring for a terminally ill pediatric client. The parents have decided to remove their child from life support. This decision was met with much opposition from other nurses on the unit. Which action by the nurse displays the role of client advocate?

A) Telling the parents they are making the right decision
B) Asking to be assigned to a different client
C) Respecting the parents’ decision
D) Referring the parents to social services


**Question 592**

The nurse is teaching the family of a school-age client diagnosed with inflammatory bowel disease on the administration of prednisone at home. At which time should the nurse instruct the parents to provide the medication to the client?

A) Between meals
B) 1 hour before meals
C) At bedtime
D) With meals


**Question 593**

The nurse is assessing an older adult client who is recovering following a cholecystectomy. Which factor would increase this client's susceptibility to infection?

A) Surgical incision
B) Active bowel sounds
C) Intact mucous membranes
D) Dry skin


**Question 594**

A nurse enters a client's room to evaluate the response to IV pain medication administered by request 20 minutes earlier. The nurse finds the client in the same position as when the medication was administered. The client states, "I do not want to move." The nurse asks the client to rate the current level of pain. Which aspects of the nursing process do these action represent? Select all that apply.

A) Implementation
B) Planning
C) Diagnosis
D) Evaluation
E) Assessment


**Question 595**

A nurse educator is teaching a group of nursing students about the function of the state board of nursing. Which information will the educator include in the teaching session? Select all that apply.

A) Investigating violations of the nurse practice act
B) Finding drug treatment centers for impaired nurses
C) Defining professional standards
D) Creating the NCLEX-RN examination
E) Suspending or revoking licenses


**Question 596**

A toddler-age client being prepared for a lumbar puncture begins to cry when carried into the treatment room by the mother. Which nursing diagnosis is most appropriate for the client at this time?

A) Ineffective Coping related to an invasive procedure
B) Anxiety related to anticipated painful procedure
C) Fear related to the unfamiliar environment
D) Knowledge Deficient of the procedure
Question 597

The nurse is reviewing content provided to a caregiver of an individual with Alzheimer disease. Which statement indicates that teaching has been effective?
A) "There aren't any drugs that are effective in treating this disease."
B) "There are effective drugs, but they cannot be used over a long period."
C) "The earlier the drugs are started, the greater the effect they will have on the disease."
D) "There are drugs that can control symptoms for many years."

Question 598

The nurse is assisting the healthcare provider with a bone marrow aspiration and biopsy on a client who has leukemia. The client also has thrombocytopenia. Upon completing of the test, which intervention is a priority for the nurse?
A) Label and refrigerate the specimen obtained by the physician.
B) Dispose of the equipment used, and clean the area properly.
C) Hold pressure on the wound for approximately 5 minutes.
D) Make certain the client understands the purpose of the test.

Question 599

The nurse is teaching the parents of an infant who is diagnosed with acute otitis media. Which is the priority teaching point for these parents?
A) Administer a decongestant for nasal congestion.
B) Administer acetaminophen to relieve pain and decrease fever.
C) Keep the baby in a flat position during sleep.
D) Place the baby to sleep with a pacifier.

Question 600

An occupational health nurse for a large corporation is planning programs to address health problems identified in the Healthy People 2020 report. Which programs should the nurse include for the company employees at the worksite? Select all that apply.
A) Depression screening for all employees
B) An immunization program
C) An abuse screening program
D) A substance abuse education program
E) Injury and violence prevention

Question 601

A parent of an adolescent client expressed concern to the nurse regarding the adolescent's sleeping habits. The parent states that the client wants to sleep all the time. The nurse believes that the adolescent is experiencing sleep deprivation. During the assessment, which clinical manifestations support this diagnosis? Select all that apply.
A) Refusal to participate in sport activities
B) Irritability and anxiety, especially on days with less sleep
C) Trouble initiating or persisting in projects, such as school assignments
D) Consumption of caffeinated soda
E) Difficulty waking in the morning for school

Question 602

The nurse is providing care to a client who is receiving treatment for sickle cell disease. The client is at risk for infection. Which medication does the nurse expect to administer to this client?
A) Tamoxifen
B) Acetaminophen
C) Penicillin
D) Morphine sulfate
Question 603

The home health nurse is visiting a 3-month-old infant diagnosed with congenital hypothyroidism who has been prescribed a daily dose of thyroxine. Due to digestive issues, the infant consumes soy formula and is at the 50th percentile for height and weight. Based on this data, which statement by the nurse to the mother is appropriate?
A) "The soy formula can interfere with the absorption of thyroxine."
B) "A dairy-based formula is contraindicated because your baby is prescribed thyroxine."
C) "As long as your baby is growing along the same growth curve, no interventions are necessary."
D) "You can stop the thyroxine as long as your baby remains in the 50th percentile for height and weight."

Question 604

A client newly diagnosed with diabetes mellitus tells the nurse that the prescribed diet does not provide enough variation of choice. Which response by the nurse is most appropriate?
A) "I will notify the dietary department to change your diet."
B) "Let's look at your diet and see what type of variety we can find."
C) "I will bring you a different menu."
D) "I will ask my manager to talk with the dietician."

Question 605

A client has a blood pressure of 142/92 mmHg. Which medical terminology is appropriate for the nurse to use when documenting this data?
A) Hypertension Stage I.
B) Prehypertension.
C) Normal.
D) Hypertension Stage II.

Question 606

A client is complaining of frequent headaches, chest tightness, palpitations, and menstrual irregularities. The client also reports having lost weight and experiencing difficulty eating and sleeping. The nurse notes that the client is tearful, sad, and lacks energy. Which question is most appropriate when assessing the source of the client's symptoms?
A) "Why are you crying so much?"
B) "How long have you been grieving?"
C) "Have you experienced a loss of a loved one recently?"
D) "Can you tell me why you are so sad?"

Question 607

A nurse is interviewing a client who recently attempted suicide. Which question is appropriate for the nurse to ask the client?
A) "Why would you think about hurting yourself?"
B) "Do you currently have a plan for killing yourself?"
C) "Have you thought about hurting yourself?"
D) "Do you ever think about hurting yourself?"

Question 608

The nurse is preparing to conduct a physical examination of a client's head and neck area. The client is in a wheelchair due to a C3-C4 spine injury. Which action by the nurse is appropriate when conducting the physical assessment of this area?
A) Placing the client in a supine during the examination
B) Supporting the client during the examination
C) Placing the client in an armless regular chair
D) Placing the client in a Sims position

Question 609

The nurse is planning care for an adolescent client who has systemic lupus erythematosus (SLE). Which action by the client indicates the...
implemented plan of care is appropriate?
A) Discussing skin changes with the healthcare provider
B) Refusing to attend school
C) Refraining from attending any social functions
D) Discussing skin changes with a good friend

Question 610
A nurse is caring for an infant post-surgery for pyloric stenosis. Which nursing interventions are appropriate when providing care for this infant? Select all that apply.
A) Instruct the parents on proper diapering to avoid pressure over the incision.
B) Encourage swaddling and rocking to facilitate relaxation.
C) Monitor temperature once per shift.
D) Teach the parents to remove the steri-strips during the infant's first bath post-surgery.
E) Administer analgesics, per order.

Question 611
The nurse is providing discharge instructions for a client who has acute conjunctivitis from Staphylococcus. Which should the nurse include when teaching this client? Select all that apply.
A) "You may go back to sharing towels when the infection is gone."
B) "Wash your hands before cleansing the eye and administering eye drops."
C) "You can soak your eyelids with warm saline to soften crusts and exudates that may form."
D) "Do not share towels, make-up, or contact lenses with anyone else, as this can spread the infection."
E) "It is ok to rub your eyes with a clean, soft cloth for itching."

Question 612
Which nursing diagnosis would be appropriate for a client with a fear of doctors and hospitals?
A) Anxiety
B) Ineffective Coping
C) Ineffective Health Maintenance
D) Depression

Question 613
A postmenopausal client asks the nurse what she can do to prevent fracturing her hips, as her mother and grandmother both experienced this health problem. Which response by the nurse is the most appropriate?
A) "You should avoid all types of exercise."
B) "You should consider a smoking cessation program."
C) "You should use throw rugs throughout the home."
D) "You should limit your exposure to the sun."

Question 614
The mother of a baby born with a congenital heart defect is upset, as no one else in the family has been born with this condition. To determine the cause of the defect, which question is appropriate for the nurse to ask the mother?
A) "Was the baby’s father exposed to any toxins in the work environment?"
B) "Do you have a history of hypertension?"
C) "Did you consume any alcohol during before you knew you were pregnant?"
D) "Is there a history of diabetes in your family?"

Question 615
A client diagnosed with disseminated intravascular coagulation (DIC) is currently bleeding through the gastrointestinal tract. Which prescription does the nurse anticipate for this client?
A) Heparin
B) Coumadin
Question 616

The nurse is preparing an education session for nurses who work in an endocrinology clinic caring for older adult clients. Which characteristic of hypothyroidism should the nurse include for this client group?
A) Hypothyroidism presents with pitting edema for this group of clients.
B) Thyroid hormone is often increased for older adult clients.
C) Symptoms of hypothyroidism in this group of clients are often confused with symptoms of aging.
D) Hypothyroidism is a congenital disease that manifests in older adult clients.


Question 617

The nurse is planning care for an older adult client with a head injury sustained from a motor vehicle crash. Which information should the nurse keep in mind when planning this client's care? Select all that apply.
A) Impairment in vision and hearing should be taken into consideration.
B) The plantar and Achilles reflexes are hyperactive in this age group.
C) Reflexes are less intense in an older client.
D) Impulse transmission and reactions to stimuli are slower.
E) Anxiety, illness, and pain can alter the ability to learn.


Question 618

The nurse is caring for a client with a new colostomy. The client has been taught care and has been successful with return demonstration to the staff. Although the client is able to perform care independently, and has asked to do so, the charge nurse has instructed the nursing staff to continue performing colostomy care for this client. When addressing this issue directly with the charge nurse, which statement by the nurse is the most appropriate?
A) "I will report you to the nurse manager for not allowing the client to change the apparatus independently."
B) "You have no right to continue delegating this task to nursing when the client has been trained to change the apparatus."
C) "The client has been trained to change the apparatus and has expressed interest to continue doing so."
D) "The client will change the apparatus whether you like it or not."


Question 619

During a health screening, the nurse analyzes that which client is at the highest risk for back problems? Select all that apply.
A) 18-year-old girl who is a distance track runner since middle school
B) 45-year-old man who plays golf three times a week for 20 years
C) 12-year-old boy with a history of cerebral palsy with a BMI of 21
D) 78-year-old man with a 40 pack-year smoking history who is recently widowed
E) 62-year-old heavy truck mechanic with a body mass index (BMI) of 30


Question 620

A nurse manager overhears two staff nurses talking about a third nurse, who has the day off. The nurses are making unflattering comments regarding the nurse in front of several other nurses who work on the unit. The nurse manager discretely asks to speak to the nurses in private and states, "This behavior isn't OK, especially in a hospital like ours with a 'zero-tolerance policy.' If you have an issue with this nurse please deal with that nurse directly. If you'd like me to help you with this, please let me know, and the four of us can meet." The nurse manager's behavior modeled strategies for which type of workplace conflict?
A) Horizontal violence
B) Sexual harassment
C) Stress
D) Intrapersonal conflict


Question 621

The nurse is caring for a client in the neurological intensive care unit (ICU) with head trauma. The client is being monitored for increased intracranial pressure (ICP). Using the Monroe-Kellie hypothesis as a basis for explanation, which comment by the nurse to the client's family would be most
appropriate?
A) "The pressure in the brain is increasing because the brain is shrinking."
B) "Because there is more pressure in the brain, the blood flow is also increasing."
C) "There is nothing that can be done."
D) "Increasing brain pressure decreases the amount of blood flow to the brain itself."

Question 622
A client with a head injury is demonstrating signs of increased intracranial pressure (ICP). Which classifications of medications should the nurse prepare to administer to this client? Select all that apply.
A) Loop diuretics
B) Histamine H2 antagonists
C) Antibiotics
D) Antipyretics
E) Anticonvulsants

Question 623
The nurse is asked to participate on a committee to ensure that no breaches of client confidentiality occur when providing care. Which actions help ensure client confidentiality when providing care? Select all that apply.
A) Reviewing the client's care needs with a designated health insurance agent
B) Restricting the discussion of client care to the report room
C) Discussing client care with nurses on other units
D) Withholding private information from other staff unless needed for care
E) Sharing the name and diagnosis of clients upon request

Question 624
The nurse suspects that a client has a hearing disorder; however, the client denies not being able to hear. Which initial action by the nurse to assess the client's hearing is appropriate?
A) Schedule a Weber and Rinne test.
B) Use an otoscope to visualize the inner ear.
C) Confront the client with the suspicion.
D) Observe the client's interaction with family.

Question 625
While hospitalized, a client learns that a dear friend has died as a result of an accident. The client is crying and asking God, "Why?" The nurse realizes the client is demonstrating which type of spiritual distress?
A) Physiological
B) Situational
C) Treatment-related
D) Psychological

Question 626
The nurse is planning care for an older client with respiratory acidosis. Which intervention should the nurse include in this client's plan of care?
A) Maintain adequate hydration.
B) Reduce environmental stimuli.
C) Administer intravenous sodium bicarbonate.
D) Administer prescribed intravenous fluids carefully.

Question 627
A client with appendicitis is highly agitated and states that there is a great deal of pain. Which intervention will decrease the client's anxiety?
A) Administer pain medications when the client complains of pain.
B) Provide reading material to help distract the client.
C) Distract the client with ambulation.
D) Assess pain levels every 2 hours and administer ordered medication.

**Question 628**

A client who had outpatient surgery is given an instruction sheet in preparation for discharge. When the nurse asks if the instructions are clear, the client says, "I'll read them later when I have my glasses; besides, you told me everything I need to know." Based on these statements, what would the nurse suspect?

A) The client does not want the written information.
B) The client already knows the information.
C) The client may be unable to read the instructions.
D) The client is ready to learn.


**Question 629**

A nurse working in the emergency department is caring for a client with an eye injury. Which assessment finding would support the diagnosis of a retinal detachment?

A) "Floaters" noted in field of vision
B) Red, edematous conjunctiva
C) Reddened area in conjunctiva
D) Possible bleeding or extrusion of eye contents


**Question 630**

A nurse, who has been working in a small rural hospital for 4 years since obtaining a nursing license, participates on an interdisciplinary task force to improve client care. Which skill level is the nurse demonstrating according to Benner's Stages of Nursing Expertise?

A) Competent
B) Expert
C) Advanced beginner
D) Proficient


**Question 631**

A nurse is educating a group of adults about the risks for osteoporosis. Which statements will the nurse include when discussing the use of alcohol and cigarettes? Select all that apply.

A) "Nicotine increases calcium absorption, leading to decreased bone density."
B) "Smoking decreases nerve supply to the bones."
C) "Moderate alcohol consumption in postmenopausal women actually may increase bone mineral content."
D) "Alcohol has a direct toxic effect on osteoclast activity, suppressing bone formation."
E) "Heavy alcohol use may be associated with nutritional deficiencies that contribute to osteoporosis."


**Question 632**

The nurse is preparing to discharge a client with diarrhea. The healthcare provider prescribes kaolin to manage the client's diarrhea. After providing the client with information on this medication, which client statement indicates the need for further education?

A) "If my diarrhea does not get better within 2 days, I will need to call my healthcare provider for further advice."
B) "I should continue to take this medication daily until my stools are firm and dry."
C) "I will need to take the medication after each loose stool."
D) "If I start to have a fever, I need to contact my healthcare provider about continuing to take this medication."


**Question 633**

A client wants to use the vaginal sponge as a method of contraception. Which statements indicate that the client needs further instruction? Select all that apply.

A) "I need to add spermicidal cream prior to intercourse."
B) "I need to use a lubricant prior to insertion."
C) "I need to moisten it with water prior to use."
D) "I can insert the sponge no longer than 24 hours prior to having intercourse."
E) "I need to leave it in no longer than 6 hours."
Question 634
An adolescent client is experiencing abdominal pain with diarrhea and bloody stools. Based on this data, which specific type of inflammatory bowel disease does the nurse suspect the client is experiencing?
A) Appendicitis
B) Ulcerative colitis
C) Necrotizing enterocolitis
D) Crohn's disease

Question 635
The nurse is caring for an older adult client who will undergo surgery in the morning. While assessing the client, the nurse discovers that the client does not have an adequate understanding of the procedure. The nurse discusses the situation with the charge nurse to determine the best course. Which is the reason for the nurse to take action in this situation?
A) The client has a right to informed consent.
B) The nurse witnessed the consent.
C) The client is very old and has multiple health problems.
D) The family needs to agree to surgery.

Question 636
A nurse is caring for a client with venous stasis whose lower extremities have a brown pigmentation appearance. Which is this pigmentation appearance best attributed to?
A) The inflammatory and immune response from congested circulation
B) The necrosis of subcutaneous fat due to tissue hypoxia
C) Skin atrophy caused by lack of circulation
D) Breakdown of red blood cells in the congested tissues

Question 637
A client being treated for cancer has a tumor designation of Stage IV, T4, N3, M1. What does this staging indicate to the nurse?
A) The tumor is small in size.
B) The tumor will respond to chemotherapy.
C) The tumor has metastasized with lymph node involvement.
D) There is one single tumor to treat.

Question 638
A female client tells the nurse that she does not want to have children because there is a history of Down syndrome in the family. What should the nurse respond to this client?
A) "It is probably best to not give birth to a baby with birth defects."
B) "Babies born with Down syndrome do not live very long."
C) "Down syndrome only occurs in the babies of women who are over the age of 40."
D) "That is a common genetic defect caused by an extra chromosome."

Question 639
An older adult client with friable skin and poor skin turgor has slipped down in the bed. Which action by the nurse is appropriate to safely reposition this client to prevent further skin breakdown?
A) Lifting the client, using the client's legs and arms for assistance
B) Using the bed sheet to slide the client up in the bed
C) Using the client's arms to pull the client up in the bed
D) Placing the bed in reverse Trendelenburg

Question 640
The nurse is reviewing the medical records for several clients who will be seen in the clinic today. According to the ABCD rule, which client may require removal of the skin lesion?
A) A client with a lesion that is symmetrical, with a smooth border, a single color, and diameter that has stayed the same
B) A client with a lesion that is asymmetrical with a regular border, two colors, and decreased diameter
C) A client with a lesion that is symmetrical with an irregular border, a single color, and increased diameter
D) A client with a lesion that is asymmetrical with an irregular border, two colors, and increased diameter

Question 641

A client being treated for depression reports feeling better and having more energy. Which is a priority nursing diagnosis for the client at this time?
A) Social Isolation
B) Hopelessness
C) Risk for Self-Directed Violence
D) Situational Low Self-Esteem

Question 642

The mother of an adolescent client diagnosed with Guillain-Barré syndrome asks the nurse why the client keeps asking for socks to be removed when the client is not wearing any socks. What should the nurse respond to the mother?
A) Medications are causing the client to feel like socks are being worn.
B) Confusion is a part of the disorder, and the client just thinks socks are on the feet.
C) There is a change in sensation, and the client feels like socks are being worn.
D) Tactile hallucinations are part of the disorder.

Question 643

An older adult client with a history of congestive heart failure (CHF) has a low-grade fever. Which action by the nurse is appropriate?
A) Notify the healthcare provider.
B) Restrict fluids.
C) Provide warm blankets.
D) Encourage getting out of bed to ambulate.

Question 644

A client with a long history of experiencing domestic violence tells the nurse, "There is no way out for me; this situation will never change." What nursing diagnosis would be most appropriate?
A) Powerlessness
B) Ineffective Health Maintenance
C) Risk for Other-Directed Violence
D) Chronic Low Self-Esteem

Question 645

The nurse is providing care for a client who experienced several fractures as a result of spousal abuse. Which intervention is the most appropriate to include when planning care for the client?
A) Encourage the client to take charge of the situation.
B) Assist the client to devise a safety or escape plan.
C) Offer to contact outpatient services if the client promises not to return home after discharge.
D) Make it clear to the spouse that the couple needs to see a therapist.

Question 646

The nurse is planning instruction for a client who is newly diagnosed with glaucoma. What should be included in this teaching? Select all that apply.
A) Expect eye pain with the condition.
B) Avoiding over-the-counter medication unless discussed with the physician
C) Explanation of how permanent blindness will not occur
D) Importance of attending follow-up appointments with the physician
E) Method to self-administer prescribed eye medication

Question 647
The nurse is providing care to a pregnant client during a prenatal visit. The nurse suspects that the client has used cocaine. Which clinical manifestations support the nurse’s suspicion? Select all that apply.
A) Pinpoint pupils
B) Hypertension
C) Increased appetite
D) Muscle jerks
E) Bradycardia

Question 648
The son of an older adult client with obsessive-compulsive disorder states to the nurse, “I want to contact the fire department about the situation; the house is nothing but boxes and bags of saved items.” Which is the most appropriate nursing diagnosis for this situation?
A) Anxiety
B) Risk for Caregiver Role Strain
C) Deficient Knowledge
D) Ineffective Coping

Question 649
A school nurse, who is concerned about an increase in sports injuries related to ineffective protective equipment, decides to participate in a child fatality prevention committee. Which advocacy activities is this nurse demonstrating? Select all that apply.
A) Speaking publicly for the health, welfare, and safety of their clients
B) Advocating for vulnerable populations
C) Ensuring that clients have the necessary information to make an informed decision or give informed consent
D) Advocating for fair and equitable access to high-quality care for all clients
E) Informing the public about issues and concerns

Question 650
The nurse is caring for a client who has been admitted to the hospital for congestive heart failure. Which data collected during the nursing assessment indicates that the client is at risk for metabolic alkalosis? Select all that apply.
A) The client takes metformin daily.
B) The client frequently uses calcium carbonate (Tums®) for acid indigestion.
C) The client takes acetaminophen as needed for pain.
D) The client takes furosemide (Lasix) daily.
E) The client takes a baby aspirin once daily.

Question 651
An infant with respiratory syncytial virus (RSV) bronchiolitis is prescribed intubation to maintain an adequate airway. Who will the nurse collaborate with to maintain the endotracheal tube and ventilation? Select all that apply.
A) A dietitian
B) A respiratory therapist
C) The primary healthcare provider
D) A play therapist
E) An advanced practice nurse

Question 652
The nurse is preparing an educational to teach clients how to determine the validity of content obtained from health-related Internet websites. Which information should the nurse plan to include in this teaching tool? Select all that apply.
A) Sponsor of the website
B) Date the content was last reviewed
C) Source for the information
D) Number of visitors to the website
Question 653

A nurse working in an intensive care unit (ICU) is assigned a client diagnosed with acquired immunodeficiency syndrome (AIDS). Based on this data, which type of precaution does the nurse implement when providing direct care?

A) Contact
B) Reverse
C) Droplet
D) Standard


Question 654

An older adult client with sepsis has been admitted to the nursing unit. The nurse is planning care and determines that one goal for this client is to maintain normal mental status. Which outcome evaluation implies that the goal has been met?

A) The client is agitated.
B) The client has a Glasgow coma score of 4.
C) The client's pupils are fixed and dilated.
D) The client responds to questions appropriately.


Question 655

An older adult client with terminal lung cancer is not breathing well and has cold and mottled skin. The client has a living will and requests comfort measures only. What should the nurse do to help this client?

A) Ask the family what they want to be done for the client.
B) Provide the client with pain medication as ordered.
C) Contact the physician for orders to control the client's breathing.
D) Withhold all care until the client dies.


Question 656

The nurse is caring for a client with a history of chronic urinary tract infections. The nurse is planning care for this client based on the priority nursing diagnosis of urinary retention related to scarring. Based on this data, which prescription does the nurse anticipate from the healthcare provider?

A) Intermittent straight catheterization
B) Removal of bladder stones
C) Antibiotic therapy
D) An anticholinergic medication


Question 657

A client who is breastfeeding has been diagnosed with postpartum depression after delivering her first child. Which medications might be prescribed for this client? Select all that apply.

A) Paroxetine
B) Sertraline
C) Fluoxetine
D) Diazepam
E) Phenytoin


Question 658

The nurse is caring for a client with a new tracheostomy. After completing a teaching session on tracheostomy care, what should the nurse include in the documentation?

A) The need for additional teaching.
B) The client's questions after the teaching session.
C) The supplies required for teaching.
D) The language used for teaching.

Question 659

The nurse is caring for a client admitted to an urgent care clinic due to an arm infection. The client reports being bitten by a raccoon on a recent camping trip. Based on this data, which treatment option does the nurse anticipate for this client?

A) An immunization for rabies
B) A tetanus toxoid injection
C) An injection of immunoglobulin
D) Mother’s breast milk with antibodies in it


Question 660

A goal of care for a client with congestive heart failure (CHF) is for serum sodium levels to be within normal limits. Which information documented in the medical record would indicate that the client is not meeting this goal?

A) The client is experiencing dependent edema.
B) The client experiences joint pain.
C) The client is experiencing wheezing respirations.
D) The client is constipated.


Question 661

A client complains of a right-hand tremor, increasing weakness, and muscles feeling tight. The nurse notes the client has poor voice volume and facial muscles do not move easily. Based on this data, which diagnosis does the nurse anticipate?

A) Multiple sclerosis
B) Cerebral vascular accident
C) Parkinson disease
D) Spinal cord injury


Question 662

The nurse is preparing educational materials for a client with hypertension. Which dietary changes should the nurse focus when preparing this material? Select all that apply.

A) Using the DASH eating plan
B) Avoiding all sodium in the diet
C) Explaining the effects of sodium on blood pressure
D) Teaching how to read nutritional labels
E) Recognizing foods that are low in sodium


Question 663

The nurse is providing care for an African-American male infant who is two months of age. The infant is brought to the appointment by the mother. When reinforcing instructions regarding reducing the infant's risk for sudden infant death syndrome (SIDS), which teaching point is the most appropriate for the nurse to include when teaching the infant's mother?

A) Encourage good hand washing.
B) Instruct on side-lying and face-down positions when in the crib.
C) Instruct on face-up position when in the crib.
D) Ensure adequate nutritional intake for the mother and newborn.


Question 664

The nurse is caring for a client who is at risk for developing an alteration in mobility. Which modifiable risk factor will the nurse focus in order to decrease the risk this client's risk?

A) Weight
B) Ethnicity
C) Gender
D) Age

Question 665
A client is admitted with injuries sustained from a domestic dispute. When planning care, the nurse will include which short-term interventions? Select all that apply.
A) Explore options for help.
B) Improve quality of life by increasing self-esteem.
C) Convey safety.
D) Explore options for self-development.
E) Determine immediacy of danger.

Question 666
The nurse is caring for a preschool-age client who suffered brain damage following a car accident. The client has a tracheostomy, is ventilator-dependent, and will be discharged from the hospital into the family's care. The family wants to care for the child at home but does not have the resources for 24-hour care. Which action by the care manager is appropriate?
A) Telling the family that it is impossible to provide care at home
B) Contacting local nurses in the community to provide the assistance that the family needs to provide care for the client
C) Making referrals to a variety of community-based agencies that can meet the family's needs
D) Arranging for the child to be sent to a long-term healthcare facility

Question 667
A nurse educator is conducting a continuing education in-service for the nurses in a pediatric intensive care unit. Why is it so important for the professional nurse to attend these in-services?
A) New diseases are discovered every day.
B) It is a good way to receive overtime by coming in on a day off.
C) Research and new technology demand that the nurse stay current.
D) Most states require it to maintain licensure.

Question 668
A nurse is completing discharge teaching for a client who is hospitalized for total hip replacement. The client asks the nurse why there is a case manager involved and expresses confusion about who is in charge. The client states, "I thought my doctor manages my care." Which is the best response by the nurse?
A) "You are correct; the doctor is responsible for managing your care."
B) "The case manager delegates your care to the nurse."
C) "No, I manage your care."
D) "A case manager coordinates everyone involved in your care to ensure your needs are met."

Question 669
A client diagnosed with systolic heart failure is admitted to the intensive care unit (ICU). When planning care for this client which does the nurse understand about systolic heart failure?
A) Decreases passive diastolic filling, increasing the importance of atrial contraction to preload.
B) Results when the heart cannot completely relax in diastole, disrupting normal filling.
C) Results from decreased ventricular compliance caused by hypertrophic and cellular changes and impaired relaxation of the heart muscle.
D) Occurs when the ventricle fails to contract adequately to eject a sufficient volume of blood into the arterial system.

Question 670
The nurse is planning care for a client who is experiencing Stage 1 Alzheimer disease. Which intervention will promote a therapeutic environment for a client with acute confusion?
A) Schedule meals at the same time each day.
B) Pain medications will enhance the therapeutic environment.
C) Background noise like music will keep this client calm.
D) Dim the lights during waking hours.
**Question 671**

A nurse educator is talking to a group of staff nurses about the importance of continued competence in nursing practice. Which action should be recommended in order to maintain competence as a professional nurse?

A) Working overtime whenever it is available  
B) Organizing a seminar to educate new nurses on hospital policies  
C) Designing a poster presentation on current research on care for the dying client  
D) Volunteering to take blood pressures at a health and wellness fair  


**Question 672**

A nurse educator is teaching a group of nursing students about the feelings associated with losing a client. The educator suggests which activity as the most helpful when a nurse is coping with feelings of grief?

A) Attending the wake or funeral of the client  
B) Taking a week off from work in order to grieve  
C) Leaving the unit to go home immediately after the client has died  
D) Keeping a scrapbook of pictures of clients after they have died  


**Question 673**

The nurse is caring for a client who received analgesic medication via central line to treat pain associated with cancer. After reassessing the client's response, which section of PIE will the nurse use when documenting the client's care?

A) Problem  
B) Intervention  
C) Progress notes  
D) Evaluation  


**Question 674**

The nurse is caring for a client who has experienced a sports-related injury to the knee. During the morning assessment, which signs of inflammation does the nurse anticipate? Select all that apply.

A) Pitting edema  
B) Pallor  
C) Pain  
D) Swelling  
E) Warmth  


**Question 675**

The nurse is providing care to a client diagnosed with bipolar disorder. The client's family asks the nurse what this is. Which response by the nurse is appropriate?

A) "Bipolar disorder is just another type of depression, except depression occurs in cycles."  
B) "Bipolar disorder is a type of depression that includes attention deficit disorder symptoms."  
C) "Bipolar disorder just means that the mood alternates with the seasons, and it becomes worse in the winter."  
D) "Bipolar disorder means there are cycles of depression as well as hyperactivity, or mania."  


**Question 676**

The nurse is providing care to a newborn during the first 24 hours of life. Which is an abnormal finding?

A) Presence of meconium stool  
B) Respiratory rate of 58 breaths per minute  
C) Heart rate of 140 beats per minute  
D) Yellowing of the skin  


**Question 677**

The nurse identifies a client at risk for contact dermatitis. Which assessment findings support the nurse's assumption? Select all that apply.
Question 678
A client is admitted to the emergency department and diagnosed with urinary calculi after experiencing symptoms for 1 week. When planning care for this client, which nursing diagnosis is the most appropriate?
A) Risk for Disuse Syndrome
B) Activity Intolerance
C) Imbalanced Nutrition
D) Risk for Constipation

Question 679
The mother of a 5-month-old baby, who attends daycare, is concerned because the child has developed a runny nose, cough, and low-grade fever over the last few days. Based on this data, which diagnosis does the nurse anticipate?
A) Meningitis
B) Respiratory syncytial virus (RSV) bronchiolitis
C) The common cold
D) Bronchitis

Question 680
The nurse is providing care to a client diagnosed with chronic obstructive pulmonary disease (COPD). A nursing diagnosis for this client is Imbalanced Nutrition: Less than Body Requirements. Which interventions are appropriate for this nursing diagnosis? Select all that apply.
A) Keep snacks to a minimum.
B) Provide frequent small meals with between meal supplements.
C) Suggest the client eat 3 meals per day to maintain energy needs.
D) Encourage a diet high in protein and fats.
E) Encourage carbohydrate-rich foods to provide needed calories for energy.

Question 681
An older adult client complains of having dry skin. Which items would support this client’s complaint? Select all that apply.
A) Poor nutrition
B) Thinner subcutaneous skin layer
C) Reduction in elastin
D) Depleted moisture in epidermal cells
E) Reduced fluid intake

Question 682
While completing a physical examination, the nurse suspects a client has breast cancer. What did the nurse assess in this client? Select all that apply.
A) Skin retraction near the left nipple
B) Palpable lump in the right axillae
C) Pain when extending the left arm
D) Flaking skin over the right nipple
E) Rash along the inside of the right arm

Question 683
While caring for a critically ill child, the child's mother becomes distraught and begins to cry loudly while stroking the child's face. Which is the best response by the nurse?
A) Tell the mother that she needs to control herself for the benefit of her child.
Question 684
A client being treated for a deep venous thrombosis (DVT) is experiencing pain. Which interventions by the nurse are appropriate to assist this client? Select all that apply.
A) Encourage position changes every 2 hours.
B) Maintain bed rest as ordered.
C) Measure calf and thigh diameter daily.
D) Apply warm moist heat to the area four times a day.
E) Apply an egg-crate mattress on the bed.

Question 685
A client scheduled for surgery is being instructed in leg exercises and the pneumatic compression device. The nurse includes these instructions to decrease which postoperative complication?
A) Deep vein thrombosis
B) Contractures
C) Infection
D) Delayed wound healing

Question 686
What are some of the rights clients have in the when receiving care with a healthcare system? Select all that apply.
A) Clients have the right to refuse care.
B) Clients have the right to have a personal representative (advocate) with them during their care.
C) A client has the right to be given information only in English.
D) Clients have the right to know when something goes wrong with their care.
E) Clients have the right to know the titles, but not necessarily the names, of their caregivers.

Question 687
The nurse is caring for a child newly diagnosed with autism spectrum disorder (ASD). Which is the most appropriate overall outcome for this child?
A) To acknowledge the effects of one's own behavior on others
B) To stay on task
C) To function more effectively in social and emotional interactions
D) To acknowledge personal strengths

Question 688
The nurse is reviewing discharge instructions with a client who had outpatient surgery for cataract removal. What should these instructions include?
A) Phone the healthcare provider with any signs of eye drainage.
B) Wear the eye patch the day of surgery only.
C) Do not bend to pick up objects.
D) Healing will be complete in 2 weeks.

Question 689
The nurse is caring for a client with metabolic acidosis. Which goals are appropriate for this client? Select all that apply.
A) The client will maintain a respiratory rate of 30 or more.
B) The client will describe preventative measure for the underlying chronic illness.
C) pH will range from 7.25 to 7.35.
D) The client will take potassium supplements to increase potassium levels.
E) The client will maintain baseline cardiac rhythm.
Question 690

A client receives the yellow fever vaccine before traveling to the Amazon Basin and asks the nurse how the vaccine provides protection. Which responses by the nurse is the most appropriate? Select all that apply.
A) "In the lymph nodes, part of the lymphoid system, the macrophages present yellow fever antigens to T cells and B cells."
B) "Human macrophages engulf the weakened vaccine virus as if it is dangerous and antigens stimulate the immune system to attack it."
C) "The initial weak infection is eliminated and the client is left with a supply of memory T and B cells for future protection against yellow fever."
D) "The body's immune system eats away at the protective sheath (myelin) that covers the nerves."
E) "A response from yellow fever-specific T cells is activated. B cells secrete yellow fever antibodies."

Question 691

A nursing instructor is discussing moral principles with a group of students. Which comment made by a student nurse indicates the need for further instruction?
A) "A client choosing not to have a needed blood transfusion is an example of autonomy."
B) "If a client asks the nurse to please come right back, and the nurse tells the client he will be back in just a couple of minutes, then that would be an example of fidelity."
C) "An example of veracity would be if a client asks her nurse if she is going to die and the nurse feels obligated to explain to the client that she is dying."
D) "A home health nurse carefully planning his or her day to assure each client gets an adequate amount of time is an example of beneficence."

Question 692

The student nurse attends a workshop on culture and diversity with regard to sudden infant death syndrome (SIDS) and is now aware that the rate of occurrence is highest among which group of infants?
A) Hispanics
B) Asians
C) African-Americans
D) American Indians

Question 693

The community nurse develops an educational program that focuses on the developmental tasks of adults ages 50 to 60. Which developmental task accomplishment within Gould’s theory should the nurse highlight?
A) Period of transformation
B) Personalities are seen as set
C) Self-reflection
D) Adjustment to decreasing physical capacities

Question 694

The nurse is providing care to newborns in the nursery. When assessing the newborns urinary output, which does the nurse anticipate as normal urinary output?
A) 100-300 mL
B) 400-500 mL
C) 250-450 mL
D) 15-60 mL

Question 695

A client is admitted with a gunshot wound to the leg. Which nursing diagnosis would be important to include in this client’s plan of care?
A) Ineffective Coping
B) Anxiety
C) Situational Low Self-Esteem
D) Risk for Infection
Question 696
The nurse on the intensive care unit (ICU) likes the fact that the nurse manager has helped improve the overall performance of the unit by actively communicating during the performance appraisal process. Which career development strategy is exhibited by this nurse manager?
A) Laissez-faire  
B) Situational  
C) Autocratic  
D) Coaching

Question 697
The nurse is caring for a client with congestive heart failure who is admitted to the medical-surgical unit with acute hypokalemia. Which medication on the client's medication administration record may have contributed to the client's current hypokalemic state?
A) Skelaxin  
B) Cortisol  
C) Demerol  
D) Hydrochlorothiazide

Question 698
The nurse is planning care for a client recovering from injuries sustained in a gang fight. Which interventions should the nurse include in the client's plan of care? Select all that apply.
A) Methods to reduce anger other than force or physical violence  
B) Employment counseling  
C) Monitor intake and output  
D) Setting limits  
E) Need for adequate rest and physical activity

Question 699
A client states to the nurse, "I know I have high blood pressure but I don't want to take medication." Based on this data, which health problem is the client at risk for developing?
A) Metabolic syndrome  
B) Gastritis  
C) Diabetes  
D) Cardiomyopathy

Question 700
The nurse is preparing to administer a hemodialysis treatment for a client with chronic kidney disease. Which laboratory values does the nurse anticipate prior to the client's treatment? Select all that apply.
A) Increased blood urea nitrogen (BUN)  
B) Decreased phosphorus  
C) Decreased potassium  
D) Increased urine osmolality  
E) Increased creatinine

Question 701
The nurse is examining a client with congestive heart failure (CHF) who is prescribed propranolol and furosemide. The client complains of fatigue and an inability to finish tasks. Which conclusion by the nurse is the most appropriate?
A) The client should be hospitalized.  
B) The client is experiencing normal findings for the disease process.  
C) The medication needs adjustment.  
D) The client has not been exercising.
Question 702

A client diagnosed with Alzheimer disease has a catastrophic reaction during an activity involving simultaneous music playing and a craft project. The client starts shouting, "No! No! No!" and runs from the room. Which action by the nurse is the most appropriate?

A) Follow the client, reassure the client one-on-one, and then redirect the client to a quiet activity.
B) Administer a PRN anti-anxiety medication and restrict the client's activity participation.
C) Intervene one-on-one with the client until the client is calm, and then redirect the client to another activity such as Bingo.
D) Discontinue the activity program because it is upsetting the client.


Question 703

A nurse is caring for a group of clients who are recovering in a rehabilitation hospital following total hip replacements. Which client is exhibiting the highest motivation to learn?

A) A client who is excited to learn ambulation techniques
B) The client who has just moved in and is already eager for discharge
C) A client who has been struggling with following nursing directives regarding discharge goals
D) A client who has been there the longest and is a great "coach" for newcomers


Question 704

The nurse is preparing preoperative teaching for an older adult client scheduled for a ventricular assist device (VAD). Which should the nurse include in these instructions?

A) Cardiac pain postoperatively is to be expected.
B) Expect to be ambulating the evening of surgery.
C) Risk for postoperative infection
D) Need to stay on bed rest for a week or more


Question 705

The nurse is caring for a 9-month-old client diagnosed with ataxic cerebral palsy (CP). Which clinical manifestations does the nurse expect when assessing this client? Select all that apply.

A) Tremors
B) Hypotonia
C) Muscle instability
D) Hemiplegia
E) Hypertonia


Question 706

The nurse manager at an acute care facility is educating the staff nurses on the definition of a sentinel event. Which examples of sentinel events would be appropriate for the nurse manager to present to the staff nurses? Select all that apply.

A) Administration of a compatible blood transfusion
B) Delivery of radiation to the wrong body region
C) Homicide of a patient while at the facility
D) Invasive surgical procedure at the wrong site
E) Homicide of a staff member while at the facility


Question 707

The nurse is caring for a client with severe inflammation. Which assessment findings would indicate a systemic reaction to inflammation? Select all that apply.

A) Edema
B) Tachypnea
C) Pain
D) Erythema
E) Tachycardia

Question 708
The home care nurse assesses an older adult client’s blood pressure as being 150/100 mmHg. When reviewing medications, the client reports taking the blood pressure medication only when feeling tense. Which instruction from the nurse is most appropriate based on the data provided?
A) Continue to take medication when feeling tense.
B) Take the blood pressure medication at twice the prescribed dosage for 1 day and then resume the daily schedule.
C) Take the blood pressure medication as prescribed regardless of feeling tense.
D) Contact the healthcare provider for an increase in blood pressure medication.

Question 709
The nurse is caring for an adult client from Canada who has come to the United States for a serious neurological surgery. The client tells the nurse, “I came to this country so that I would receive better care.” Which is the most likely rationale for the client’s statement?
A) Healthcare rationing in America decreases cost.
B) America has many choices about health care.
C) America has a universal healthcare system.
D) There is very little competition in health care in the United States.

Question 710
When providing nursing care the client states, “I drink a small glass of warm water mixed with the juice of one lemon every morning because it helps to heal my body.” Which action by the nurse is appropriate when providing care to this client?
A) Tell the client that cold water is better metabolized by the body.
B) Suggest the client delay the water and lemon until after morning medications.
C) Provide the warm water and juice of a lemon.
D) Instruct the client that lemon juice is really a dose of vitamin C that helps with healing.

Question 711
A nurse is caring for a client with a Stage II pressure ulcer on the coccyx who is at risk for additional pressure ulcers. Which nursing intervention is appropriate while caring for this client?
A) Avoid placing the client in the side-lying position.
B) Maintain the head of the client’s bed at 30°.
C) Clean the pressure ulcer as needed.
D) Use hydrogen peroxide as chemical debridement of wound bed as needed.

Question 712
A postoperative client prescribed pain medication every 4 to 6 hours is requesting medication every 6 hours. At 4 hours, the client’s pain level is 8 on a rating scale of 1 to 10. The nurse decides to give the pain medication now. What does this nurse’s action exemplify?
A) Time management skills
B) A response to a change in the client’s condition
C) Prioritizing the client’s care
D) Meeting a client goal

Question 713
A client with renal failure is receiving peritoneal dialysis. The nurse is explaining the process to the client. Which statement would the nurse include in a discussion with the client and family?
A) "The peritoneum acts as a semi-permeable membrane through which wastes move by diffusion and osmosis."
B) "The solutes in the dialysate will enter the bloodstream through the peritoneum."
C) "The metabolites will diffuse from the interstitial space to the bloodstream mainly through diffusion and ultrafiltration."
D) "The peritoneum is more permeable because of the presence of excess metabolites."

Question 714
The nurse is caring for a young school-age child recently diagnosed with attention-deficit/hyperactivity disorder (ADHD). Which statement by the child's
mother indicates that teaching goals have not been achieved?
A) "I will stick to the same routine each day after school."
B) "I will take my child to the doctor every 3 months for a weight and height check."
C) "I will let my child do homework while watching a favorite television show."
D) "I will give my child ADHD medication with meals."

Question 715

A nurse is preparing to teach a group of college students about organ donation. What should the teaching include to follow andragogic concepts?
A) Information on how this group can influence their parents about organ donation
B) Past statistics about organ donors
C) Written pamphlets on organ donation
D) Directions about how to become an organ donor

Question 716

The community nurse identifies that a family new to the community needs assistance with family dynamics and material resources. What should the nurse consider offering to the parents of this family to support their needs? Select all that apply.
A) Location of the community library
B) Hours of the local health clinic
C) Location of the community co-op food bank
D) Hours when the park is open
E) A list of free counseling services to assist with parental stress

Question 717

The healthcare provider prescribes sitagliptin (Januvia) for a client with type 2 diabetes mellitus. For which potential side effect should the nurse monitor in this client?
A) Hyperglycemia
B) Renal insufficiency
C) Elevated blood lipid levels
D) Pancreatitis

Question 718

A hospital is preparing for the American Nurses’ Credentialing Center’s magnet hospital designation process. Nurse representatives on the Magnet Council consider several Professional Practice Models (PPMs) as their approach to nursing care. After selecting a PPM model, members of the Council plan a series of nursing grand rounds. These focus on nursing’s code of ethics, ethical frameworks for handling moral judgments, the organization’s value statement, and ethics case studies led by the hospital chaplain. What particular nursing theory, philosophical approach, or framework of caring have the nurses decided to adopt?
A) Watson’s Theory of Human Care
B) Carper’s Ways of Knowing in Nursing
C) Leininger’s Theory of Culture Care Diversity and Universality
D) Boykin and Schoenhofer’s Nursing as Caring Theory

Question 719

The nurse has completed a family assessment and is planning care for a newly blended family. The children are having trouble adapting to the new situation. Which is the primary goal for this family?
A) Work with other families.
B) Improve family situations.
C) Practice life skills.
D) Self-evaluate.

Question 720

An occupational health nurse is screening a new employee in a long-term care facility for tuberculosis (TB). The employee questions why purified protein derivative (PPD) testing is done twice. Which is the most appropriate response by the nurse?
A) “There is an increased risk for a false-negative response for people who work in long-term care facilities. The two-step is recommended to accurately screen for TB.”
B) “The first PPD was not interpreted in the correct time frame of 48-72 hours.”
C) “Different medication is used in the second PPD.”
D) “The treatment for TB is 6 months of medication, and we want to make sure the first results of the first PPD were accurate.”

Question 721
A client with disseminated intravascular coagulation (DIC) is anxious and has decreased oxygen saturation. Which is the priority nursing diagnosis for this client?
A) Pain
B) Ineffective Tissue Perfusion
C) Anxiety
D) Impaired Gas Exchange

Question 722
A female client tells the nurse about having difficulty with sexual relations because of a recent weight gain. Which interventions should the nurse include when planning this client’s care?
A) Body image
B) Gender identity
C) Gender-role behavior
D) Sexual self-concept

Question 723
A client seeking treatment for severe knee pain has worked in a factory for 30 years in a position requiring repetitive lifting and carrying of 20-40-pound boxes. The nurse anticipates which recommendation from the multidisciplinary team?
A) Pharmacologic therapy
B) Refer for Disability application.
C) Intermittent use of a cane
D) Joint replacement surgery

Question 724
The nurse is planning care for a client admitted with a high thoracic spinal cord injury. Which interventions would be appropriate for the nursing diagnosis of Alteration in Perfusion? Select all that apply.
A) Assess for a full bladder.
B) Discuss future care needs when discharged.
C) Increase fluids to 3,000 mL per day.
D) Assess blood pressure every 2-3 minutes.
E) Turn and reposition every 2 hours.

Question 725
The nurse is caring for a client who was diagnosed with rheumatoid arthritis (RA) last year. The client has recently been placed on prednisone for treatment. The nurse is teaching the client about safe medication administration. Which client statement indicates that the medication teaching was successful?
A) "I will take the ordered dose at the same time every day."
B) "I will take this medication on a full stomach to enhance absorption.”
C) "I will not have to limit my consumption of canned vegetables.”
D) "I will not need to monitor my blood sugar more frequently while on this medication.”

Question 726
The nurse is caring for a client in the emergency department who is suspected of having appendicitis. Based on this data, which prescriptions does the nurse anticipate from the healthcare provider? Select all that apply.
A) A cephalosporin
Question 727
A client with peripheral vascular disease (PVD) has symptoms of intermittent claudication. Which will the nurse include when teaching the client about intermittent claudication?
A) It causes pain that increases when the legs are elevated and decreases when the legs are dependent.
B) It causes pain that occurs during periods of inactivity.
C) It causes cramping or aching pain in the lower extremities and the buttocks that occurs with a predictable level of activity.
D) It is often described as a burning sensation in the lower legs.

Question 728
The nurse is caring for a pregnant woman who admits to using Ecstasy on a regular basis. The client states, "Everybody knows that alcohol is bad during pregnancy, but what's the big deal about Ecstasy?" Which response by the nurse is appropriate?
A) "Ecstasy use has been associated with long-term impaired memory and learning in the child."
B) "Ecstasy use produces babies with small heads, short bodies, and brain function alterations."
C) "Ecstasy use results in intrauterine growth restriction and meconium aspiration."
D) "Ecstasy use leads to deficiencies of thiamine and folic acid, which help the baby develop."

Question 729
During a sexual history, a female client tells the nurse that because she is in a committed relationship, sexual relations are more satisfying and frequent. What should the nurse realize the client is describing?
A) Disconnection
B) The feeling of connectedness
C) Emptiness
D) A lack of intimacy

Question 730
The nurse in the emergency department is assessing a client with bulimia nervosa. Which assessment findings indicate that the client is dehydrated? Select all that apply.
A) Hypertension
B) Dry mouth
C) Concentrated urine
D) Poor skin turgor
E) General weakness

Question 731
The nurse is preparing to discharge a client recovering from a pulmonary embolism. Which topics are appropriate for the nurse to include in the teaching session? Select all that apply.
A) Anticoagulant administration schedule
B) Symptoms of recurrence
C) Limit the use of over-the-counter medications.
D) Diet to include green leafy vegetables
E) Resume normal activity level.

Question 732
A male nurse enters the room of a female client to obtain the client's vital signs. The client's spouse appears uncomfortable with the nurse and moves closer to the client. Which action by the nurse is most appropriate?
A) Perform the intervention without discussion.
B) Explain the procedure to both the client and client's family member.
C) Ask a female staff member to obtain the client's vital signs.
D) Ask the client's spouse to leave the client's room.

Question 733

During a home visit, the nurse is concerned that an older adult client is developing renal failure. The client has no history of cardiovascular disease. Which data in the client's assessment caused the nurse to have this concern? Select all that apply.
A) Complaints of hip joint pain
B) New onset of hypertension
C) Recent increase in hunger and thirst
D) Warm moist skin
E) Progressive edema

Question 734

A client is scheduled for a diagnostic test to determine digestion status. Which test does not require fasting or other preparation?
A) Lipid panel
B) Amylase
C) Barium swallow
D) Endoscopy

Question 735

The nurse is developing a plan of care for a toddler-age client diagnosed with respiratory syncytial virus (RSV). Which intervention is inappropriate for this client?
A) Monitor intake and output.
B) Offer small, frequent meals.
C) Encourage oral intake.
D) Encourage to ambulate frequently.

Question 736

The healthcare provider prescribes a client to have peak and trough blood levels drawn to evaluate the therapeutic effect of an IV antibiotic. When should the nurse schedule the blood samples to be drawn? Select all that apply.
A) 30 minutes after the IV administration
B) 1-2 hours after the oral administration of the medication
C) Prior to the discontinuing the antibiotic
D) A few minutes before the next scheduled dose of medication
E) During the infusion of the antibiotic

Question 737

The nursing instructor is evaluating a concept map created by a student for a client's plan of care. Which characteristics on the map indicate that the student created the map appropriately? Select all that apply.
A) A checklist located at the bottom of the document
B) Legend created identifying nursing process phases and client information categories
C) Different colors used to represent the phases of the nursing process
D) A column entitled "evaluation" located on the outer edge of the document
E) Lines drawn between assessment data and associated nursing diagnoses

Question 738

A nurse working in the emergency department (ED) notes that a healthcare provider smells strongly of alcohol and appears confused. Which action by the nurse is appropriate?
A) Tell the healthcare provider to attend AA.
B) Report the healthcare provider to the state licensing board.
C) Contact the charge nurse to report the problem.
D) Report the healthcare provider to the hospital CEO.

Question 739

The nurse is planning care for a pediatric client recovering from surgery to repair a congenital heart defect. Which intervention should the nurse include to support the client's fluid status?
A) Limit fluids.
B) Encourage fluids.
C) Monitor pain.
D) Maintain intravenous therapy until day before discharge.

Question 740

A student nurse administers a medication to the wrong client while the instructor is with another student. Which statement by the instructor is most appropriate in this situation?
A) "You have set a bad example for the other students."
B) "You have placed the nursing student program in danger."
C) "You are expected to practice like a licensed nurse."
D) "You may be sued by the hospital for the extra care cost to the client."

Question 741

The nurse is reviewing new orders written for a client experiencing respiratory alkalosis. Which orders would be appropriate for this client's care needs? Select all that apply.
A) Oxygen 2 liters via face mask.
B) Admit to a private room.
C) Restrict fluids to 2 liters per day.
D) Draw arterial blood gases.
E) Infuse 1 ampule of sodium bicarbonate now.

Question 742

The nurse caring for a client admitted with septic shock is aware of the need to assess for the development of acute respiratory distress syndrome (ARDS). Which early clinical manifestation would indicate the development of ARDS?
A) Tachycardia
B) Tachypnea
C) Cyanosis
D) Intercostal retractions

Question 743

The nurse is caring for a client who is experiencing chronic fatigue related to medication being taken for seasonal allergies. What should the nurse anticipate being prescribed to help this client?
A) A medication change to treat seasonal allergies
B) Physical therapy to promote exercise
C) Sleep medication to increase rest time
D) Strategies to keep the client awake during the day

Question 744

The laboring client's fetal heart rate baseline is 120 beats per minute (bpm). Accelerations are present to 135 bpm. During contractions, the fetal heart rate gradually slows to 110 bpm and is at 120 bpm by the end of the contraction. Which nursing action is appropriate?
A) Assisting the client into the Fowler's position
B) Documenting the fetal heart rate
C) Preparing for imminent delivery
D) Applying oxygen via mask at 10 liters
Question 745
A nurse works at a clinic which provides care to a community which has a high population of smokers. The nurse is planning an educational session on "Tips to Quit." Which action by the nurse is appropriate?
A) Recommending hypnosis at a local dinner theater.
B) Telling this group that smoking is unacceptable.
C) Making sure the group is aware of the increased risk of liver disease and cancer of the esophagus.
D) Reviewing the available pharmacologic adjuncts to cessation.

Question 746
The nurse is caring for a client from India who has extensive deep tissue damage. The nurse notes that the client is also vegan. Which dietary information should the nurse teach this client to enhance the healing process?
A) "A high-carbohydrate, high-protein diet is best for healing."
B) "A high-fat, low-carbohydrate diet is best for healing."
C) "A low-fat, high-carbohydrate, low-protein diet is best for healing."
D) "A diet high in protein and vitamin D is best for healing."

Question 747
The spouse of a client with Alzheimer disease does not understand why the client developed the disorder because no one else in the family has the health problem. Which response by the nurse is appropriate?
A) "There are genetic and environmental factors in the development of Alzheimer disease."
B) "Alzheimer disease develops because of smoking and alcohol intake."
C) "Alzheimer disease does not have the same course in every individual."
D) "Someone in your family must not have been correctly diagnosed with the disorder."

Question 748
The nurse is providing care for a pediatric client with bacterial conjunctivitis. Which interventions should the nurse use as part of the collaborative management of the client? Select all that apply.
A) Recommending dark sunglasses
B) Contacting the client’s school nurse
C) Placing cold eye compresses
D) Administering antiviral therapy
E) Performing careful hand hygiene

Question 749
The nurse administrator of a local hospital is attending training on the new informatics system the hospital will be implementing. Which information will the nurse administrator be able to manage from the dashboard? Select all that apply.
A) Patient
B) Staffing
C) Quality initiatives
D) Budgets
E) Plans of care

Question 750
The nurse is caring for an older adult client in a long-term care facility. Which behavior by the nurse convey physical attending when communicating with this client?
A) Maintaining a proper social distance when speaking with the client
B) Leaning toward the client during conversation
C) Being concrete about actions that need to be taken during client care
D) Facilitating and taking action when needed
Question 751

A young school-age male child is admitted with newly diagnosed acute lymphocytic leukemia. The multidisciplinary team is meeting to plan care for this child and family. Which statement by the parents should receive priority in the nursing planning process?

A) "Can we plan a trip out of town sometime this summer?"
B) "How do we get our parking validated?"
C) "We are afraid that he will dislodge his central line at school."
D) "His brother is upset about the amount of time we are away from home."


Question 752

A nurse is providing wellness teaching to a client who is interested in beginning an exercise program to reduce certain health risks. The nurse determines that the client understands the teaching when the client selects which health risks that can be reduced by regular exercise? Select all that apply.

A) Colon cancer
B) Hypertension
C) Renal disease
D) Cardiovascular disease
E) Skin cancer


Question 753

The parents of a child with terminal cancer ask the nurse that the child not be told that he will not recover. The child asks the nurse if he is dying. What should the nurse do at this time?

A) Tell the child he is dying and offer to stay with him.
B) Suggest a meeting with the healthcare team and the parents.
C) Offer to bring in the child life therapist to help explain the situation.
D) Ignore the child's question and change the subject.


Question 754

A client in the fourth stage of labor is crying out in pain. Which nursing diagnosis is the priority at this time?

A) Health-Seeking Behaviors
B) Anxiety
C) Fear
D) Acute Pain


Question 755

The nurse is evaluating care provided to a client with respiratory alkalosis. Which outcomes indicate that nursing care has been effective for this client? Select all that apply.

A) Respiratory rate 18 and regular
B) Consistent body weight
C) Gait steady
D) Using prescribed bronchodilators
E) Sleeping through the night


Question 756

A client with a history of relapsing-remitting multiple sclerosis (MS) is expecting her first child. What would be indicated for this client?

A) Suggest reproductive counseling.
B) Discuss pain control during labor, as contractions will be severe.
C) Instruct to expect a period of remission after delivery of the baby.
D) Instruct to expect an exacerbation of symptoms while pregnant.


Question 757
A nurse caring for a pediatric client with inflammatory bowel disease (IBD) understands that there are variances in the presentation of IBD between children and adults. Which variances does the nurse anticipate for this pediatric client? Select all that apply.
A) Pediatric clients usually have colonic involvement.
B) Children suffer from Crohn disease more frequently than ulcerative colitis.
C) Pediatric clients more often present with left-sided colitis.
D) Pediatric clients often present with fistulizing or stricturing disease.
E) IBD is more common in females than males in the pediatric population.

Question 758
During an assessment, the nurse determines that the client at risk for the development of macular degeneration. Which did the nurse find in the client's health history?
A) Fibromyalgia
B) Arthritis
C) Smoking
D) Acid reflux disease

Question 759
The nurse is working with an emergency response team following massive flooding caused by a hurricane. When working with the Clinical Outreach Communication Activity (COCA) team of the Centers for Disease Control and Prevention (CDC), the COCA is responsible for which action?
A) Provide expert advice to nurses during natural disasters.
B) Provide communication between doctors in the field during a disaster and their healthcare team.
C) Provide two-way communication between clinicians and the CDC.
D) Provide resources to the community during times of disaster.

Question 760
The nurse is working with an emergency response team following massive flooding caused by a hurricane. When working with the Clinical Outreach Communication Activity (COCA) team of the Centers for Disease Control and Prevention (CDC), the COCA is responsible for which action?
A) Provide expert advice to nurses during natural disasters.
B) Provide communication between doctors in the field during a disaster and their healthcare team.
C) Provide two-way communication between clinicians and the CDC.
D) Provide resources to the community during times of disaster.

The nurse is planning care for a family with five children, one of whom is diagnosed with cerebral palsy (CP). The child is being cared for in the home, has a tracheostomy, and is on a home ventilator. Which should the nurse include in the plan of care for this family?
A) Food stamps
B) Psychological counseling
C) Respite care
D) Meals-on-Wheels

Question 761
The nurse is providing care for a client who was raped. Which action by the nurse will help the client identify and prioritize concerns?
A) Tell the client that the event is over and it is now time to move on.
B) Help the client use problem-solving skills.
C) Instruct in guided imagery.
D) Provide anti-anxiety medication.

Question 762
The nurse is providing instructions to a client who is prescribed a nonsteroidal anti-inflammatory drug (NSAID). Which information is priority for the nurse to explain to the client about this medication?
A) “Drink at least 8-10 glasses of water a day while taking your medication.”
B) “Constipation is common with your medication; include roughage in your diet.”
C) “Take your medication on an empty stomach.”
D) “Take your medication with food.”

Question 763
The nurse is caring for a client admitted with renal failure and metabolic acidosis. Which clinical manifestation would indicate to the nurse that planned interventions to relieve the metabolic acidosis have been effective?
A) Decreased respiratory depth
B) Palpitations
Question 764

After the removal of a foreign body from the eye, a client is diagnosed with a corneal abrasion. Which will be indicated in the care of this client?
A) Applying antibiotic ointment and an eye shield
B) Surgery
C) Bed rest and an eye shield
D) Flushing the eye with normal saline

Question 765

During visitation on the unit, the nurse is observing the family dynamics of an adolescent client who has an addiction problem and recognizes that the family is experiencing behaviors consistent with codependence. Based on this data, which manifestation does the nurse anticipate from the client's family?
A) Impatience
B) Argumentative behaviors
C) Enabling
D) Frustration intolerance

Question 766

A young adult client is at 28 weeks' gestation. The prenatal history reveals past drug abuse, and urine screening indicates that she has recently used heroin. Which potential fetal health problem should the nurse use to select a nursing diagnosis to guide care?
A) Abruptio placenta
B) Diabetes mellitus
C) Intrauterine growth restriction (IUGR)
D) Congenital anomalies

Question 767

During an assessment, the nurse learns that a client seeking emergency treatment for a headache and nausea works in a mill without air conditioning. The air temperature is 88 degrees and the client states that water has been ingested several times throughout the day because of heavy sweating. Based on this data, which suggestion by the nurse is the most appropriate?
A) Eat something salty when drinking water.
B) Double the amount of water being ingested.
C) Drink juices and carbonated sodas.
D) Eat something sweet when drinking water.

Question 768

A client admitted with injuries after being involved in a motor vehicle crash states to the nurse, "every time I close my eyes I see the truck coming." Which is the priority nursing diagnosis for this client?
A) Risk for Infection
B) Anxiety
C) Ineffective Coping
D) Post-Trauma Syndrome

Question 769

The mother of a premature newborn asks the nurse why the baby's eyes are cloudy. Which response by the nurse is appropriate?
A) "It happens with most newborns."
B) "It is because of an allergic reaction."
C) "It is because you developed an illness while carrying the baby before birth."
D) "It is seen with premature infants."
Question 770

The nurse is teaching a client scheduled for a colonoscopy on pre- and post-procedure care. Which statement by the client indicates the need for further teaching?
A) "The physician might take tissue samples for further analysis."
B) "It might be quite painful."
C) "The procedure will only take about 1 hour."
D) "I will likely have medications that will make me drowsy during the test."


Question 771

A client with acquired immune deficiency syndrome (AIDS) is admitted to the acute care floor. According to a 1994 American Nurses Association (ANA) position statement, which stance addressing this bioethical issue is appropriate?
A) The client is morally bound to disclose every aspect of his or her condition to staff.
B) The nurse is morally obligated to care for the client unless the risk exceeds responsibility.
C) The client has the right to choose not to disclose his or her condition to staff.
D) The nurse has the responsibility to ensure the client gets adequate medical care.


Question 772

The healthcare provider prescribes digoxin for a client who is to be discharged in the morning. When documenting the order in the medical record, which action by the nurse is the most appropriate?
A) Write digoxin, 0.0125 mg QD PO.
B) Write digoxin, .0125 mg QD.
C) Write digoxin, 1 pill each day.
D) Write digoxin, 0.0125 mg, once daily.


Question 773

A client with relapsing-remitting multiple sclerosis tells the nurse that even though the primary symptoms of exacerbation are leg spasms and blurred vision, the hardest part is trying to get through the day because of being so tired. Which diagnosis should the nurse identify as a priority for this client?
A) Disturbed Sensory Perception
B) Self-Care Deficit
C) Fatigue
D) Impaired Physical Mobility


Question 774

The nurse is caring for an older adult client with hemolytic anemia. When planning care for this client, which should the nurse take into consideration regarding this diagnosis? Select all that apply.
A) It is a result of the premature destruction of red blood cells.
B) It always requires treatment with folic acid.
C) It is the result of blood loss.
D) It is associated with an increase in the reticulocyte count.
E) It causes the red blood cells to be microcytic.


Question 775

Parents of a newborn infant are concerned that their baby may have sickle cell disease. The nurse reviews the medical record and finds that both parents have the sickle cell trait. Which is the best response for the nurse to give the parents?
A) "Your baby has the disease, as you both carry the trait."
B) "Have you talked to a genetic counselor about your concerns?"
C) "Since neither of you actually has sickle cell disease, your baby is not at risk."
D) "As you both have the sickle cell trait, your baby will be tested for the disease."


Question 776
The nurse identifies the diagnosis of Interrupted Family Processes for a child who sustained a brain injury during an automobile accident. Which nursing intervention would support this diagnosis?
A) Refer the family to support services in the community.
B) Explain rules for visiting in the Intensive Care Unit.
C) Teach the family the importance of using seat belts.
D) Encourage the family to express feelings.

Question 777
A middle-aged client states to the nurse, "I have noticed a slight tremor of my left hand when at rest. I think I might have Parkinson disease because my mother had it and passed away because of respiratory failure." Which response by the nurse is the most appropriate?
A) "It is unlikely that you have the same illness as your mother."
B) "You should not worry, as it has a higher prevalence in males."
C) "You probably do not have it, as your mother was probably exposed to a toxin that caused the disease."
D) "Having a close relative, such as your mother, with the illness can increase your chance of developing it as well."

Question 778
A college student is incoherent after taking "downers with beer." For which health problem should the nurse observe in this client?
A) Seizure activity
B) Hallucinations
C) Respiratory depression
D) Signs of withdrawal

Question 779
A client on a medical-surgical unit experiences a code blue situation unexpectedly. The emergency situation has ended and the client survived. The nurses are breaking for lunch and plan to process their feelings about the emergency. Which action by the nurses will facilitate this?
A) Asking management for the use of a private room to debrief.
B) Debriefing about the situation at home.
C) Talking while riding in the staff elevator.
D) Discussing the event outside the hospital.

Question 780
A nurse is caring for a client who displays symptoms associated with seasonal affective disorder (SAD). Which prescription would the nurse question as inappropriate for this client?
A) Cognitive-behavioral therapy
B) Selective serotonin reuptake inhibitor (SSRI)
C) Light therapy
D) Bupropion extended-release

Question 781
A terminally ill client is demonstrating cognitive signs that the end of life is near. Which assessment findings support the nurse's conclusion? Select all that apply.
A) Nausea
B) Inability to concentrate
C) Shortness of breath
D) Rambling incoherently
E) Dry mouth

Question 782
The nurse is planning care for a client with multiple lower extremity fractures sustained from a motor vehicle crash. Which is an appropriate client goal for the nurse to include in the plan of care?
A) Participate in self-care activities.
B) Regain mobility.
Question 783

A nurse is performing an admission assessment on a client with symptoms that indicate the client may have human immunodeficiency virus (HIV). Which question from the nurse addresses a major risk factor for contracting HIV?
A) "Have you ever experimented with intravenous drugs?"
B) "Has your partner been experiencing these symptoms?"
C) "When was your first sexual experience?"
D) "Have you had any fever, diarrhea, or chills over the last 48 hours?"

Question 784

A pediatric nurse is performing an assessment on a toddler who is suspected of having autism spectrum disorder (ASD). When assessing the child's health history, which question to the parents would not provide adequate information to appropriately assess the toddler for this disorder?
A) "Does your child perform ritualistic behaviors when performing activities?"
B) "Is your child able to name objects?"
C) "Tell me about your child's social interactions."
D) "Does your child have manic or depressed episodes?"

Question 785

The nurse is planning care for a client with a surgical wound. Which goal is appropriate for this client?
A) Discharge to home as soon as possible.
B) Increase ambulation.
C) Resume independent activities of daily living.
D) Regain intact skin.

Question 786

A client with a history of insomnia is scheduled for a polysomnogram that requires an overnight stay in a sleep laboratory. Which additional information about this test should the nurse provide to the client?
A) The test requires a 24-hour interval of sleep deprivation.
B) The test records the biophysical changes the client experiences during sleep.
C) The test consists of five 20-minute nap trials.
D) The test occurs 2 hours after awakening from the overnight sleep study.

Question 787

The nurse is talking to a group of young adults about decreasing the risk for skin cancer. A young woman asks the nurse about the safety of ultraviolet light tanning salons. Which response by the nurse is most appropriate?
A) "Using sunscreen will prevent skin cancers, even in tanning beds."
B) "Using tanning beds without clothing contaminates skin and leads to infections."
C) "Tanning from ultraviolet light is safer than sunshine."
D) "Skin damage from ultraviolet light is more likely than from indirect sunlight."

Question 788

During an outpatient clinic follow-up appointment, a client with multiple sclerosis (MS) has lab tests completed. The results show elevated levels of aspartate aminotransferase (AST), serum glutamic-oxaloacetic transaminase (SGOT), alanine aminotransferase (ALT), serum glutamic-pyruvic transaminase (SGPT), and alkaline phosphatase (ALP). What is the priority concern for the nurse? Select all that apply.
A) Adverse response to bisacodyl
B) Flare-up due to demyelination
C) Adverse response to Avonex
D) Damage from viral infection
E) Adverse response to Aubagio
Question 789

The nurse is caring for a client who receives H2-receptor antagonists for the treatment of peptic ulcer disease. Based on the nursing diagnosis Risk for Bleeding, which assessment finding should the nurse report immediately to the healthcare provider?

A) The client who reports he took TUMS® antacids with his H2-receptor antagonist
B) The client who reports he is constipated
C) The client who reports episodes of melena
D) The client who reports pain after 24 hours of treatment


Question 790

A new mother brings a male infant, 2-weeks-old, to the pediatric clinic for a check-up. The mother is concerned that her infant may be at risk for pyloric stenosis due to her age and because her husband had surgery for the condition when he was an infant. Which responses by the nurse are the most appropriate based on this data?

A) "Your baby would have an increased risk if the infant was a girl."
B) "As long as your baby has bowel movements there is nothing to worry about."
C) "Due to your age, your son is at an increased risk for the condition."
D) "Your baby has a greater risk for the condition due to a familial history."


Question 791

A nurse is developing a plan of care for a client diagnosed with post-traumatic stress disorder (PTSD). The client was recently admitted to the hospital for suicide ideations and sleep disturbance due to frequent nightmares. Which is the priority goal to include in the client's plan of care?

A) The client will report a reduction in or cessation of nightmares.
B) The client will discuss emotions related to traumatic experiences.
C) The client will remain free from injury or harm.
D) The client will report a decreased perception of anxiety.


Question 792

A premenopausal client tells the nurse that she is not looking forward to menopause because it means her life is over. Which nursing diagnosis would be appropriate for the client at this time?

A) Situational Low Self-Esteem
B) Disturbed Body Image
C) Deficient Knowledge
D) Ineffective Sexuality Pattern


Question 793

A client begins to vomit blood. The nurse immediately measures the blood pressure and prepares to insert a nasogastric tube while directing others to notify the healthcare provider and prepare to perform iced saline lavage. Which features of the Tanner Clinical Judgment Model did this nurse demonstrate? Select all that apply.

A) Responding
B) Presencing
C) Interpreting
D) Empowerment
E) Noticing


Question 794

A client with aspiration pneumonia is diaphoretic, pale, and taking gasping breaths. Which is the priority nursing action?

A) Administer 10 L of oxygen per face mask.
B) Complete a thorough cardiopulmonary assessment.
C) Notify the healthcare provider.
D) Reposition the client to help with breathing.

Question 795

A nurse conducted a class on fall prevention for a group of older adult clients in the community. Which observation during a client home visit indicates that teaching on fall prevention was effective?
A) Scatter rugs are placed in the kitchen.
B) Safety strips are installed in the shower.
C) The locks were changed on the doors.
D) All meat is placed in the freezer.

Question 796

The nurse is reviewing results of diagnostic testing performed on a client with increased intracranial pressure (ICP) in preparation for an evaluation to be done by the healthcare provider during morning rounds. Which diagnostic test results should the nurse make available to the healthcare provider for review? Select all that apply.
A) MRI result
B) Bronchoscopy results
C) Head CT scan with and without contrast
D) Electroencephalogram
E) Complete blood count of the cerebrospinal fluid

Question 797

The nurse is caring for a client who is being discharged following an appendectomy. Which instruction is the most important for the nurse to teach this client regarding wound healing?
A) "Apply a lubricating lotion to the edges of the wound twice a day."
B) "Add more fruits and vegetables to your diet."
C) "Thoroughly irrigate the wound with hydrogen peroxide once a day."
D) "Notify the healthcare provider if you notice swelling, warmth, or tenderness at the wound site."

Question 798

The nurse is caring for a client who is prone to falls. Which nursing diagnosis would be most appropriate for this client?
A) Risk for Injury
B) Risk for Disuse Syndrome
C) Risk for Suffocation
D) Deficient Knowledge

Question 799

A nurse is caring for a client who has had a double-barrel colostomy. Which is true regarding the proximal stoma? Select all that apply.
A) Expels mucus from the proximal colon.
B) Expels mucus from the distal colon.
C) Is also called the mucus fistula.
D) Diverts feces to the abdominal wall.
E) Is a functional stoma.

Question 800

During a home visit, the nurse observes children acting out, shouting, and hitting each other when taking a small amount of food out of the refrigerator. The mother sits nearby yelling for the children to shut up while reaching for a cigarette. Which should the nurse consider as being helpful for this family situation? Select all that apply.
A) Suggesting ways to improve the parent's behavior
B) Making a list of community resources to help this family cope
C) Suggesting ways to improve the family's financial resources
D) Contacting the authorities because of child abuse
E) Creating a genogram
Question 801

The nurse is caring for a client who was involved in a car accident. The client's spouse was killed in the accident. The couple has two teenage children. Which statement explains how this tragedy will be approached by the family?

A) The family feels that their place in the community has been eliminated.
B) The family may withdraw into seclusion during the grief process.
C) Family members may become detached from extended family.
D) Family disorganization may occur.


Question 802

The nurse is doing preconception counseling with an adult client with no prior pregnancies. Which client statement indicates that teaching has been effective?

A) "A beer once a week will not damage the fetus."
B) "I can continue to drink alcohol throughout my pregnancy."
C) "I don’t need to stop drinking alcohol until my pregnancy is confirmed."
D) "I can’t drink alcohol while breastfeeding, because it will pass into the breast milk."


Question 803

A client experiencing situational depression after losing a good job tells the nurse, "I am tired of always having to start over." Which actions by the nurse are appropriate based on this data? Select all that apply.

A) Ask what the client has done in the past to make "starting over" so successful.
B) Suggest the client talk with the physician about medications to help his mood.
C) Remind the client that an alcoholic beverage with the evening meal could help with stress.
D) Encourage the client to maintain a consistent exercise plan.
E) Encourage the client to take the time to rest and relax.


Question 804

When planning care for a client at risk for developing pressure ulcers, which intervention should be included? Select all that apply.

A) Turn the client every 4 hours.
B) Initiate a frequent toileting schedule.
C) Raise the heels off of the bed.
D) Massage pressure areas with lotion every 4 hours.
E) Use inflatable doughnut-style devices to reduce pressure on the sacrum.


Question 805

A home health nurse visits a client with Stage 2 Alzheimer disease who lives at home with a spouse. Which action by the nurse enhances the spouse's ability to meet the needs of the client?

A) Encouraging the caregiver to take rest periods and avoid fatigue
B) Making arrangements for the client to visit the local senior citizen center in the afternoon
C) Providing the client a list of daily activities to complete
D) Finding placement in a long-term care facility


Question 806

The nurse is reviewing the plan of care for a client being treated with brachytherapy for breast cancer. Which assessment finding indicates that the client's skin integrity has been maintained?

A) Skin damp and sweaty
B) Skin intact
C) Skin dry and excoriated
D) Skin stretched


Question 807
The home health nurse visiting an older Israeli client for a routine medication check determines that the client has declined since the last home visit. The nurse suggests that the client should be transported to the hospital; however, the family members state that they want the client to stay in the home. Which action by the nurse is most appropriate? 
A) Ask the client's preference regarding transport to the hospital. 
B) Follow the decision of the family. 
C) Encourage the family to take the client to the hospital. 
D) Call for an ambulance to transport the client to a hospital. 

**Question 808**

The nurse is evaluating care provided to a client with disseminated intravascular coagulation (DIC). Which observation indicates care has been successful for this client? 
A) No evidence of bleeding 
B) Urine output 20 mL per hour 
C) Oxygen saturation level 86% 
D) Heart rate 110 beats per minute 

**Question 809**

The nurse is caring for a pregnant client who has asthma. The client has a cold and has an exacerbation of asthma symptoms, including mild wheezing. To help avoid hypoxia-related complications in the fetus, which medication prescription does the nurse anticipate? 
A) Inhaled beta2-agonist (e.g., albuterol) 
B) IV corticosteroid (e.g., prednisone) 
C) Oral pseudoephedrine (e.g., Sudafed) 
D) Oral acetylsalicylic acid (e.g., aspirin) 

**Question 810**

When faced with ethical dilemmas, which are some of the elements of risk management that can assist nurses in decision making? Select all that apply. 
A) Education 
B) Peer support and consultation 
C) Righteousness 
D) Resource accumulation 
E) Financial support 

**Question 811**

A client with angina complains that the pain is prolonged and severe, and occurs at the same time each day while at rest. There are no precipitating factors to the pain. Which term will the nurse use when documenting the angina experienced by the client? 
A) Atypical angina (Prinzmetal angina) 
B) Unstable angina 
C) Stable angina 
D) Non-anginal pain 

**Question 812**

A nurse is caring for a client with severe acute abdominal pain secondary to cholelithiasis. Which nursing actions promote effective pain management? Select all that apply. 
A) Educate the client about decreasing protein in the diet, as protein increases gallbladder contractions. 
B) Administer morphine, meperidine, or another opioid analgesic as ordered. 
C) Withhold oral food and fluids. 
D) Place the patient in supine position to relieve abdominal pain. 
E) Insert nasogastric tube and connect to high wall suction. 

**Question 813**

The nurse reviewing discharge instructions for a client diagnosed with urinary incontinence resulting from a urinary tract infection. Which statement
made by the client indicates the need for further education?
A) "I will continue to hold my urine while in public so that I do not get another infection."
B) "I will contact the healthcare provider prior to taking over-the-counter medications while on my antibiotic."
C) "Drinking cranberry juice will decrease the risk for developing urinary tract infections."
D) "I should drink plenty of water to prevent damage to my kidneys while I am on the antibiotics for the infection."

Question 814

The nurse is conducting a gait and posture assessment for a client who is experiencing mobility issues. Which action by the nurse is appropriate during this assessment?
A) Measure extremities for length and circumference.
B) Assess muscle mass and strength.
C) Palpate for tenderness and pain.
D) Inspect the spine for curvature.

Question 815

The nurse is evaluating care provided to a new mother whose infant is at risk for sudden death syndrome (SIDS). Which statement by the mother indicates teaching has been effective?
A) "I plan to quit smoking."
B) "I need to purchase loose-fitting sheets and blankets for the bed."
C) "I will bottle-feed my baby since breastfeeding is a risk factor for SIDS."
D) "I will place my baby in a side-lying position for sleep."

Question 816

An adult client who is newly diagnosed with type 2 diabetes has smoked for 30 years. When teaching the client on ways to optimize health outcomes, what should the nurse explain about the effects of smoking and diabetes?
A) Smoking promotes weight gain.
B) Smoking accelerates arteriosclerotic changes in blood vessels.
C) Smoking increases insulin resistance.
D) Smoking is a major factor in the development of diabetic neuropathy.

Question 817

The staff on a care area that has a high percentage of clients with confusion attends an educational program on delirium management. Which statement, made by a staff nurse, indicates that teaching has been effective?
A) "The family should involve the client in all conversations and interactions involving care."
B) "Sensory deprivation and overstimulation can worsen the symptoms the client exhibits."
C) "Decreasing all stimulation in the client's room is essential."
D) "It is important to provide education for family members as needed."

Question 818

A nurse is caring for a client who complains of pain with menstruation. What is true regarding the etiology and pathophysiology of this condition?
A) Primary dysmenorrhea causes include endometriosis, tumors, cysts, pelvic adhesions, pelvic inflammatory disease, infections, cervical stenosis, uterine leiomyomas, and adenomyosis.
B) Secondary dysmenorrhea is more common than primary dysmenorrhea.
C) Primary dysmenorrhea begins within the first 3 or 4 menstrual periods after menarche and will occur with each ovulatory cycle during the teens and 20s of a woman's life.
D) Primary dysmenorrhea is caused by decreased levels of prostaglandins, causing the contractions of the uterus to increase in strength.

Question 819

A client is being scheduled for diagnostic tests to determine the presence of ulcerative colitis. For which diagnostic tests should the nurse plan to provide teaching? Select all that apply.
A) Barium enema
B) Upper endoscopy
C) Intravenous pyelogram
D) Colonoscopy
E) Barium swallow

Question 820
The nurse identifies the diagnosis Risk for Impaired Skin Integrity as applicable for a client with heart failure. Which assessment finding supports the use of this diagnosis for the client?
A) + 3 pitting edema both feet
B) Shortness of breath with ambulation
C) Productive cough
D) Heart rate 104 and regular


Question 821
The manager of a small clinic has cross-trained the nurses to perform electrocardiogram (ECG) testing, phlebotomy, and some respiratory therapy interventions. This clinic is providing client-focused care. Which are the benefits of this delivery model? Select all that apply.
A) Collaboration among many disciplines in providing client care
B) Cost-effective care resulting in improved outcomes
C) Decreased steps to provide client care
D) Ease in tracking client progress
E) Decreased personnel required to provide client care


Question 822
An adolescent client currently weighs 50% of expected body weight and tells the nurse, "I get upset and can't eat because my mother is constantly forcing food on me." Which treatments are indicated for this client? Select all that apply.
A) Hospitalization
B) Behavior modification
C) Placement with a foster family
D) Medication to increase appetite
E) Family-based psychotherapy


Question 823
A student nurse will be attending clinical at the local health department. When preparing for the clinical experience, the student researches programs offered by health departments. Which programs did the student most likely find during the research? Select all that apply.
A) Workplace safety inspections
B) Nutritional programs
C) Injury prevention campaigns
D) Disease prevention efforts
E) Lead poisoning prevention efforts


Question 824
A nurse is caring for a client with an adjustment disorder with depressed mood. The nurse wants to perform interventions that will promote hope for the client. Which intervention best promotes hope in this client?
A) Help clients to identify ways in which they have control of their lives.
B) Provide families with a list of community resources and encourage them to participate in support groups.
C) Provide the families with information about clients' condition in accordance with client preferences.
D) Help caregivers acknowledge clients' dependency and assume appropriate responsibility.


Question 825
A nurse is caring for a client with seasonal hypersensitivity reactions. What teaching would the nurse provide to improve this client's comfort? Select all that apply.
A) Maintain a clean, dust-free environment.
B) Take antihistamine and leukotriene medication as ordered.
C) Keep doors and windows open on high-allergen days to circulate air.
D) Stop taking oral corticosteroids immediately once symptoms disappear.
E) Remain indoors if possible on high-allergen days.

**Question 826**

A nurse is applying for a job as a case manager for a managed care insurance organization. Which responsibility is associated with this role?
A) Approving treatment decisions
B) Providing home visits to clients
C) Coordinating client care through all stages of treatment
D) Independent treatment planning

**Question 827**

The nurse is providing care to a client who is receiving nonsteroidal anti-inflammatory drugs (NSAIDs) in the treatment of rheumatoid arthritis. When providing care to this client, which actions by the nurse are appropriate? Select all that apply.
A) Advising against abrupt discontinuation of drugs
B) Encouraging the client to take with a full glass of water, milk, or small snack to help avoid GI distress
C) Assuring the client that there is no relationship between NSAIDs and heart disease
D) Monitoring for signs of renal problems
E) Monitoring for signs of allergic reaction

**Question 828**

The nurse is planning care for a client with deep venous thrombosis (DVT). Which nursing diagnosis would be a priority for this client?
A) Excess Fluid Volume related to tissue edema
B) Disturbed Sleep Pattern related to tissue hypoxia
C) Ineffective Tissue Perfusion related to obstructed venous return
D) Risk for Infection related to obstructed venous return

**Question 829**

After an assessment of a new client, a nursing student expresses a belief that drug addiction is not a real illness, as these clients "did it to themselves." Which response by the staff nurse is appropriate?
A) "It is important to remain nonjudgmental when caring for any client, even a drug addict."
B) "Sometimes a client doesn't show much effort."
C) "We are legally obligated to provide care."
D) "You are right. I don't know why we bother."

**Question 830**

The nurse is facing a problem with a long-term care client that is different from anything encountered by the nurse in the past. What nursing action is appropriate prior taking the problem to the research committee?
A) Ask the physician for assistance.
B) Perform a review of the literature.
C) Ask the client's family if this is a recurring issue.
D) Bring the problem up for discussion in the next staff meeting.

**Question 831**

The nurse is caring for an adult client who is admitted to the hospital with a possible hip fracture. Following the admission assessment, nurse determines that the client is obese. About which disorders should the nurse teach the client that are often associated with obesity? Select all that apply.
A) Degenerative joint disease
B) Chronic cough
C) Stroke
D) Mobility problems
E) Urinary retention
Question 832
A client is recovering from prostate surgery on a medical-surgical unit. The client will be ready for discharge within the next few days. Which teaching point is appropriate for this client?
A) The client should avoid heavy lifting for 2 weeks after surgery.
B) The client should call the healthcare provider immediately for any pain.
C) The client should increase the fiber in his diet.
D) The client should not drive for 6 weeks after surgery.

Question 833
The nurse is caring for a client that is the victim of domestic violence and is visited by the spouse in the hospital. Which action by the nurse supports the client?
A) Refuse to permit the spouse to visit with the client.
B) Call security to have the spouse removed.
C) Ask the client if there is anything that is needed at this time.
D) Call the police to have the spouse arrested for assault.

Question 834
A nurse manager is assessing the hospital environment in order to decrease the risk for client falls. Which is the best intervention to decrease the risk of client falls?
A) Read label directions.
B) Keep the call button within reach at all times.
C) Keep electrical cords under the bed.
D) Clean the environment of clutter.

Question 835
A nurse working in a large municipal hospital is appointed to a task force whose focus is addressing nursing shortages. Which factor should the task force consider?
A) Nurses are only utilized for clinical services.
B) Nursing shortages are often cyclical.
C) Reductions in nursing staff encourage nurses to remain in the profession.
D) Only licensed nurses are used for all nursing duties.

Question 836
A nurse working in a home health agency is asked to participate on a committee that is looking to incorporate evidence-based nursing care. Which is the next step in implementing evidence-based practice?
A) Suggest that individual staff members try new means of delivering care.
B) Research evidenced-based practices that can be implemented.
C) Evaluate the results of different research projects.
D) Compile a list of questions.

Question 837
The nurse is preparing to discharge a client from a medical-surgical unit. Which actions by the client indicate that religious needs were met during the hospitalization? Select all that apply.
A) Asking nurse for additional supplies to change dressings while at home
B) Thanking the nurse for contacting a priest to visit while hospitalized
C) Requesting and attending religious services in the hospital chapel
D) Asking the nurse whom to call if problems occur after surgery
E) Refusing home care services because the client's daughter is a nurse and a Sunday school teacher
Question 838
A client with acute renal failure has jugular vein distention, lower extremity edema, and elevated blood pressure. Based on this data, which nursing diagnosis is the most appropriate?
A) Excess Fluid Volume
B) Ineffective Renal Tissue Perfusion
C) Risk for Altered Cardiac Perfusion
D) Risk for Infection

Question 839
An older adult client, hospitalized post-surgery, wakes up in the middle of the night very confused. The nurse reorients the client to the surroundings and gets the client to return to sleep. Which should the nurse consider as a source for the client’s confusion?
A) Ambien 10 mg as needed at bedtime for sleep
B) History of cardiac disease
C) The death of the client’s husband last month
D) The client’s age

Question 840
The clinic nurse is educating a group of new moms on the risk factors and prevention of respiratory syncytial virus (RSV). The nurse is aware that which action is the best way to prevent RSV?
A) Monitoring temperature
B) Administering antibiotics
C) Hand washing
D) Limiting fluid intake

Question 841
A nurse educator is teaching a group of parents how to prevent a sickle cell crisis in the child with sickle cell disease. What should the nurse instruct about the precipitating factors that could contribute to a sickle cell crisis? Select all that apply.
A) Regular exercise
B) Vomiting
C) Altitude
D) Fever
E) Increased fluid intake

Question 842
The home care nurse is planning care for a client with a history of postpartum depression after the births of all her children. Based on this data, which will the nurse include in the client’s plan of care? Select all that apply.
A) Contacting the healthcare provider to ensure the client is prescribed medication for postpartum depression
B) Focusing on the care the other children need
C) Encouraging as much sleep as possible
D) Instructing the client to eat a healthful diet with limited alcohol intake
E) Encouraging the client to take advantage of those who want to help and maintain outside interests

Question 843
An older adult client in the terminal phases of a debilitating muscular disease believes the healthcare team has “failed” and “given up” and “aren’t trying as hard.” On which belief should the nurse plan interventions for this client?
A) The client’s idea of abandonment is unfounded.
B) When clients become terminal, physician care is no longer necessary.
C) This is a common fear in the terminally ill client.
D) Clients who feel this way are in denial of the facts of their care.
Question 844
A nurse working in a psychiatric unit is caring for a client with schizophrenia who manifests positive symptoms of the disease. Based on this data, which does the nurse anticipate when providing care?
A) Social withdrawal
B) Hallucinations
C) Concrete thinking
D) Anhedonia

Question 845
A nursing student has been assigned to present a teaching project to the class, using each of Bloom's taxonomy domains. The student has planned several activities to include when presenting the project to the class. Which activities are within the affective domain? Select all that apply.
A) Class members must list the technical skills they have learned.
B) Class members must identify two attitudinal changes that have occurred in their lives since beginning their nursing education.
C) Class members must reflect on how they felt the first time they provided direct client care.
D) Class members must demonstrate a favorite nursing skill for the class.
E) Class members must read a paragraph about a new clinical trial, summarize the information, and present it to the rest of the class.

Question 846
A nurse is caring for a client with systemic lupus erythematosus (SLE). The client begins to cry stating, "I am afraid I will be disfigured because of all of these lesions." Which interventions does the nurse plan to teach this client to minimize skin infections associated with SLE? Select all that apply.
A) Avoid sun exposure between 10:00 a.m. and 3:00 p.m.
B) Avoid swimming in a pool or the ocean.
C) Decrease sun exposure between 3:00 p.m. and 5:00 p.m.
D) Use sunscreen with an SPF of 15 or greater.
E) Remain indoors on sunny days.

Question 847
A client is admitted to the hospital in order to have surgical intervention due to peripheral vascular disease (PVD). Which procedure is the likely intervention?
A) Atherectomy
B) Percutaneous transluminal angioplasty
C) Endarterectomy
D) Stent placement

Question 848
The nurse on the medical unit is admitting a client with chronic obstructive pulmonary disease (COPD). Which prescription does the nurse anticipate to decrease this client's risk for developing a respiratory infection?
A) A bronchodilator
B) A broad-spectrum antibiotic
C) A corticosteroid
D) An influenza vaccine

Question 849
The nurse is providing care to a client who is experiencing urinary retention. Which diagnostic tool does the nurse anticipate will be ordered for this client?
A) Ultrasonic bladder scan
B) Intravenous pyelography (IVP)
C) Urinalysis
D) Cystoscopy
Question 850

A nurse has been providing a young adult client with a history of hypersensitivity reactions. The nurse is preparing instructions on the correct methods for using an EpiPen. Which client statement indicate understanding of the proper technique? Select all that apply.
A) "No one else in my family knows how to use the EpiPen."
B) "I frequently check the expiration date."
C) "I make sure the EpiPen is always available."
D) "It's fine to leave the EpiPen out in the sun."
E) "I don't need a medical alert tag."

Question 851

The nurse is admitting a client with panic anxiety to the behavioral health unit. Which clinical manifestations would indicate that the client's anxiety is at a panic level of severity? Select all that apply.
A) Inability to focus
B) Rapid speech
C) Self-absorption
D) Dilated pupils
E) Feelings of doom

Question 852

The nurse is providing care to a client with respiratory syncytial virus (RSV). The client's condition is not severe and there is no history of immune compromise. Which pharmacologic therapies does the nurse anticipate based on this data? Select all that apply.
A) Antibiotics
B) Antipyretics
C) Systemic corticosteroids
D) Nebulized epinephrine
E) Ribavirin

Question 853

The nurse places a client, of Islamic descent, in a treatment room of the emergency department for treatment of abdominal pain and vaginal bleeding. The spouse, speaking for the client, asks that only a female provider examine his wife for the pelvic exam. Which is the most culturally-appropriate statement by the nurse?
A) "Every attempt will be made to honor your request."
B) "The request is unreasonable and cannot be honored."
C) "Your spouse will be covered with a sheet so it will not matter whether the examiner is male or female."
D) "The male and female providers both respect privacy."

Question 854

The antepartum nurse is caring for parents who have lost their baby at 20 weeks' gestation. Which intervention is most appropriate for the nurse to implement with this family?
A) Telling the parents they can have another baby
B) Calling social services to help with burial plans
C) Explaining the causative factor of the fetal loss
D) Obtaining an order for counseling for the parents

Question 855

The nurse is working on a unit with unlicensed assistive personnel (UAP). One nurse refuses to utilize the UAP and is consistently leaving nursing tasks for the next shift that have yet to be completed. Which is the most likely reason the nurse is not utilizing the UAP to assist with client care?
A) The belief that no one else can perform a task as well as the nurse can.
B) Avoidance of responsibility.
C) The state nurse practice act.
D) Overdependence on others.
Question 856

A client in the intensive care unit is combative and pulling at the endotracheal tube, which must remain in place. After applying soft hand restraints to protect the client’s airway, which action should the nurse take next?

A) Document the application of restraints in the chart.
B) Reassess the need for the restraints in 8 hours.
C) Notify the family of the need for restraints.
D) Notify the primary healthcare provider.


Question 857

A client, with a nursing diagnosis of Impaired Swallowing, complains of frequent heartburn. Which action by the nurse is the most appropriate?

A) Teach the client the “chin tuck” technique when swallowing.
B) Check the client’s mouth for pocketing of food.
C) Assist the client to a 90° sitting position, or as high as tolerated, during meals.
D) Assist the client in maintaining a sitting position for 30 minutes after the meal.


Question 858

A nurse is caring for a client who was recently diagnosed with pancreatic cancer. Which statement made by the client would indicate to the nurse that the client is in spiritual distress?

A) “I wonder if my children will visit today. They won’t even go to church with me anymore and they are having a difficult time dealing with my diagnosis.”
B) “I am not sure why this is happening but I believe God has a plan for me.”
C) “I wish I did not have cancer but I believe that it is happening for a reason.”
D) “People tell me things happen for a reason, but why is God doing this to me?”


Question 859

A nurse is discussing the plan of care with a client who is preparing for discharge. The client has a strong objection to portions of the plan of care. The nurse recognizes that there is a conflict. Which response by the nurse indicates an understanding of the client’s position and a willingness to collaborate regarding the discharge plan?

A) “You are not being cooperative in your plan of care.”
B) “I will ask your family to convince you that this plan of care is best.”
C) “Let’s talk about what your objections are and possible solutions or alternatives.”
D) “This plan of care was ordered by the physician.”


Question 860

A client diagnosed with a personality disorder tells the nurse, “Sometimes I daydream that I go home and kill my family.” Which is the priority nursing diagnosis for this client?

A) Ineffective Coping
B) Deficient Knowledge
C) Interrupted Family Processes
D) Risk for Other-Directed Violence


Question 861

A client diagnosed with obsessive-compulsive disorder (OCD) is being admitted as an inpatient. The client is obsessed with thoughts of symmetry. Which compulsive behaviors does the nurse anticipate when performing the admission assessment? Select all that apply.

A) The client repeatedly taps both wrists on the bedside table.
B) The client repeatedly washes his hands.
C) The client begins counting the floor tiles.
D) The client repeatedly cleans the top of the bedside table.
E) The client avoids shaking the nurse’s hand

Question 862

A nurse is preparing to educate a group of parents on sudden infant death syndrome (SIDS). Which interventions are appropriate to decrease an infant's risk for SIDS? Select all that apply.
A) Ensuring the room temperature is at least 80 degrees F at all times
B) Recommending bed sharing
C) Avoiding smoking around infants
D) Using firm bedding
E) Placing the infant in a prone-position for sleeping

Question 863

In preparation for the next quality improvement committee meeting, the nurse manager accesses the clinical decision support system to run an outcomes report. How will the committee use this report?
A) To assist in modifying policies and procedures
B) To validate appropriate place of treatment
C) To eliminate unnecessary care
D) To measure the length of hospital stays

Question 864

The medical-surgical nurse is habitually late and often leaves work for nurses on the other shift to complete. The nurse has been reprimanded for this behavior. Which action is required by the nurse in order to retain employment?
A) The nurse must continue the same behaviors.
B) The nurse must have a positive attitude.
C) The nurse must take responsibility and accept any corrective action.
D) The nurse must trade shifts in order to be on time.

Question 865

A client presents to the primary care clinic for an annual physical. The nurse caring for the client notes that the client's healthcare provider uses the ABCD mnemonic to assess suspicious skin lesions. What does the "D" in ABCD represent?
A) Diameter of lesion greater than 6mm
B) Diameter of lesion greater than 8mm
C) Depth of lesion
D) Distance of lesion to an additional lesion

Question 866

The nurse caring for a client recovering from an abdominal hysterectomy suspects the client is experiencing a pulmonary embolism. Which clinical manifestation supports the nurse's suspicion?
A) Dyspnea and shortness of breath
B) Nausea
C) Activity intolerance
D) Decreased urine output

Question 867

The nurse on a medical-surgical unit completes the shift assessment for a client diagnosed with a multisystem fluid volume deficit and documents that the client is experiencing the following symptoms: tachycardia; pale, cool skin; and a decreased urine output. The nurse anticipates which as the cause of the client's current symptoms?
A) Rapidly infused intravenous fluids
B) Natural compensatory mechanisms
C) Cardiac failure
D) Pharmacological effects of a diuretic
Question 868

The nurse is providing care to a client who is newly diagnosed with human immunodeficiency virus (HIV). Which statements by the nurse could inhibit the development of a therapeutic communication with this client? Select all that apply.

A) "Perhaps you would like to talk about the new medications that you have been prescribed?"
B) "I am so happy today! I found out that I got accepted into nurse practitioner school, isn't that great?"
C) "Tell me your feelings about the diagnosis."
D) "Well, I guess your homosexual lifestyle finally caught up to you, huh?"
E) "One of my cousins has AIDS. It is hard to watch him die."


Question 869

A client presents to the urologist with complaints of getting up to urinate several times a night and difficulty starting a stream of urine. After medical testing is completed, a diagnosis of benign prostatic hyperplasia (BPH) is made. After conducting teaching regarding BPH, which statement by the client indicates the need for further education?

A) "I know I will get cancer of the prostate because of this."
B) "Alpha blockers can be used to control my symptoms."
C) "There are nonsurgical treatment options available."
D) "As my condition progresses, I may need to consider surgical management."


Question 870

An older adult client with hyperthyroidism is not a candidate for surgery. Which treatment could be used to quickly reduce the clinical manifestations that the client is experiencing as a result of the disorder?

A) A partial thyroidectomy
B) The ingestion of radioactive sodium iodine, I131
C) Nothing, because there is little effect on the quality of life in older adults.
D) A combination treatment with levothyroid (Synthroid) and amiodarone (Cordarone)


Question 871

The nurse is caring for a client who has chosen to discontinue hemodialysis. The client's family, however, is not supportive of the decision. The nurse who uses the theory of principles-based reasoning would make which statement regarding the current situation?

A) "I need to try to help the family understand the client's decision so they can work through this situation together."
B) "The client understands the decision and the advanced stage of the disease. If the client quits treatment, the client will die."
C) "This client's health is so deteriorated that the treatment is not saving the client's life. It is prolonging the ultimate outcome, which is death."
D) "This client is of sound mind and is capable of making independent decisions regarding health care. It really is the client's decision to make."


Question 872

The nurse is reviewing the effectiveness of care provided to a client diagnosed with posttraumatic stress disorder. Which outcomes would indicate the interventions in the plan of care have been effective? Select all that apply.

A) The client keeps all of the lights on at home.
B) The client takes a sedative at least 4 times a day.
C) The client verbalizes future plans with family and friends.
D) The client will not enter a car with fewer than three people.
E) The client has been sleeping throughout the night.


Question 873

The nurse is providing care for a newly married woman with systemic lupus erythematosus (SLE). Which client statement indicates an appropriate understanding of the plan of care?

A) "I plan to go to the movies this weekend so that I get out of the house."
B) "I do not need to contact the doctor if I develop a fever or rash."
C) "I can take aspirin as indicated for pain."
D) "I will take birth control pills while I am taking cytotoxic medications."

Question 874
The nurse is providing care to a client who is experiencing skin inflammation and pruritus. Which medication prescriptions does the nurse anticipate for this client? Select all that apply.
A) Desonide
B) Bacitracin
C) Gentamycin
D) Desoximetasone
E) Erythromycin

Question 875
The nurse is caring for a client who has recently been diagnosed with skin cancer. The client is tearful and states, "How did I get skin cancer? I don't believe in tanning!" Which response by the nurse is indicated at this time?
A) "This is unusual, as skin cancer normally only occurs in sunbathers."
B) "We frequently never find out why cancer strikes."
C) "Can you tell me more about your feelings?"
D) "Sun exposure can happen as we carry out our daily activities."

Question 876
An adult client is diagnosed with fibromyalgia. The client asks the nurse whether a recent infection with the Coxsackie B virus could have caused fibromyalgia. Which response by the nurse is the most appropriate?
A) The Coxsackie B virus may have triggered the fibromyalgia.
B) The Coxsackie B virus has nothing to do with fibromyalgia.
C) The Coxsackie virus definitely caused the fibromyalgia.
D) Fibromyalgia is a psychiatric disorder.

Question 877
After conducting a physical assessment, the nurse determines that the client is at risk for developing cataract. Which item in the health history support that the client is at risk for developing cataracts?
A) Age 75 years
B) Hypertension
C) Nonsmoker
D) Minimal direct sun exposure

Question 878
The nurse is reviewing the latest arterial blood gas results for a client with metabolic alkalosis. Which result indicates that the metabolic alkalosis is compensated?
A) pH 7.32
B) HCO3 8 mEq/L
C) PaCO2 48 mmHg
D) PaCO2 18 mmHg

Question 879
The nurse is counseling an adult client with fibromyalgia. What are some elements of counseling that can help this client develop effective coping skills? Select all that apply.
A) Suggest to the client that some symptoms may be psychosomatic.
B) Encourage the client to develop a strong support network of family and friends and to ask for help when needed.
C) Remind the client that the client has a progressive disease.
D) Teach the client strategies including distractions, relaxation techniques, a warm bath, or writing in a journal.
E) Inform the client that the client does not need to see a specialist.
Question 880
A client with metabolic alkalosis is experiencing numbness around the mouth and tingling of the fingers. What should the nurse explain as the reason for these manifestations?
A) "Because you are breathing so fast, the oxygen is not getting to your nerve endings."
B) "You don't have enough potassium in your body, so the tingling around your mouth and fingers will occur."
C) "You have a build-up of carbon dioxide in your blood."
D) "Your health problem affects calcium in your body, which causes the tingling around your mouth and fingers."

Question 881
The nurse is providing care to a client who is diagnosed with malnutrition. When planning care for this client, which laboratory tests does the nurse anticipate will require monitoring? Select all that apply.
A) Culture and sensitivity
B) Arterial blood gases
C) Cholesterol
D) Prealbumin
E) Total protein

Question 882
The nurse is reviewing discharge instructions with the mother of a toddler who was hospitalized for constipation. Which statement made by the toddler’s mother indicates the need for further education?
A) "Soiling could be a sign of withholding because of involuntary overflow."
B) "Rocking and crossing the legs could be a sign of withholding."
C) "I need to make sure my child eats a low-fiber diet."
D) "I should recognize that when my child walks stiffly on his tiptoes, this could indicate withholding."

Question 883
The nurse is caring for a client with a chronic disease process. The client tells the nurse about reading an article about funding for the National Institute of Nursing Research (NINR) and asks the nurse why the U.S. Congress would fund such an organization. Which response by the nurse is the most appropriate?
A) "The government is looking to the NINR for information about promoting health."
B) "Nursing research is focused on prevention and health promotion, which will decrease healthcare costs."
C) "Funding the NINR is one cause of health cost increases in the country."
D) "The government is interested in preventing chronic disease."

Question 884
A client is admitted to the emergency department in a sickle cell crisis. The nurse assesses the client and documents the following clinical findings: temperature 102°F, O2 saturation of 89%, and complaints of severe abdominal pain. Based on the assessment findings, which intervention is the greatest priority?
A) Administer morphine sulfate 10 mg IM.
B) Assess and document peripheral pulses.
C) Administer Tylenol 650 mg by mouth.
D) Apply oxygen per nasal cannula at 3 L/minute.

Question 885
The nurse provides medication to a client at the wrong time. No harm came to the client as a result of the nurse’s error and the nurse files a report about the medication error. Which response by the risk management team is most appropriate?
A) Attempt to implement policy changes to prevent future errors.
B) Discipline the nurse appropriately.
C) Report the nurse to the board of nursing.
D) Monitor all nurses on the unit to ensure this does not occur again.
Question 886
Which nursing intervention exemplifies the nurse working in a health promotion role? Select all that apply.
A) Reinforcing desirable changes to the client's lifestyle
B) Administering an ordered antibiotic
C) Administering an inhaler to an asthmatic client
D) Administering vaccines to a well child
E) Obtaining a blood glucose sample on a hypoglycemic client

Question 887
The pediatric nurse is providing education to a new mother regarding ways to decrease the risk of sudden infant death syndrome (SIDS). Which statement by the nurse is appropriate?
A) "It is recommended that you place your baby in a face-down position for sleep."
B) "You should baby with you at all times to assess for apnea."
C) "There is no one cause for the syndrome; the best thing is to keep the baby healthy."
D) "SIDS has been linked to immunizations. I recommend that you avoid immunizing your baby."

Question 888
A client who is experiencing an exacerbation of rheumatoid arthritis (RA) will be discharged after a week's stay in the hospital. The client tells the nurse, "I can't believe how much better I am feeling now." Which is the rationale for why the client is feeling better?
A) The client was kept busy each day.
B) The client appreciates the various levels of care given.
C) Appropriate scheduling of the client's care by all disciplines allowed the client to rest.
D) The client's disease process having been stopped.

Question 889
The nurse assesses several infants during well-baby checkups. Which statement made by a parent would cause the nurse to suspect that the infant may have cerebral palsy (CP)?
A) "My 8-month-old cannot sit without support."
B) "My 6-month-old baby is rolling from back to prone now."
C) "My 10-month-old is not walking."
D) "My 3-month-old smiles at me all the time."

Question 890
The nurse manager on the unit involves the staff nurses in developing effective educational programs based on topics they have chosen at staff meetings. The nurses on the unit realize that being involved in staff education helps identify which responsibility?
A) Effective teachers on the unit
B) The roles each nurse has on the unit
C) Personal, peer, and staff learning needs
D) Improvements that need to be made

Question 891
A college student tells the nurse about being "out of control" with eating. The client states, "I am trying to keep my weight down so my mom does not call me fat. I make myself throw up after eating." Based on this data, which disorder does the nurse use when planning care for this client?
A) Purging disorder
B) Bulimia
C) Anorexia nervosa
D) Binge-eating

Question 892
The nurse provides teaching on the diagnosis Risk for Deficient Fluid Volume to a client with ulcerative colitis. Which client statement indicates...
understanding of this information?
A) "If I have two liquid stools in any day, I will report this to my health care provider."
B) "I will continue to use a moisturizer on my skin."
C) "I should report dry patches of skin immediately to my doctor."
D) "I will drink 1 liter of fluid each day."

Question 893
The nurse is providing instruction to the parents of a 7-month-old infant who has just been diagnosed with hearing loss. What guidance should the nurse provide?
A) Expect that your child will be enrolled in a special hearing intervention program immediately.
B) Keep your child in a quiet environment until additional testing is done.
C) Interventions to support hearing are not useful until the child is at least 9 months old.
D) Hearing loss is not serious until 1 year of age.

Question 894
The nurse is caring for an older school-age client who is sleeping when the menu choices for dinner are brought to the room. Which intervention should the nurse use to meet the dietary needs of this client?
A) Wake the child to choose a meal for dinner.
B) Ask the dietary worker to come back later.
C) Ask the parents to bring dinner from home for the client.
D) Order chicken nuggets because most children like this meal.

Question 895
The nurse is caring for a client who is hospitalized due to an exacerbation of systemic lupus erythematosus (SLE). The nurse is reviewing the client’s lab work and finds the white blood cell count (WBC) is shifted to the left. Based on this information, which is a priority nursing diagnosis for this client?
A) Ineffective Health Maintenance
B) Risk for Infection
C) Risk for Impaired Skin Integrity
D) Ineffective Individual Coping

Question 896
The nurse is providing care to a client whose last menstrual period was 6 weeks ago. The client believes she is pregnant. Which diagnostic test does the nurse anticipate in order to confirm the pregnancy?
A) Serum or urine human chorionic gonadotropin (hCG)
B) Fetal movement
C) Fetal heartbeat by Doppler
D) Fetal heartbeat by fetoscope

Question 897
A client diagnosed with high blood pressure that is not responding to medications. The nurse suspects renal stenosis. When assessing for this condition, which location will the nurse use for auscultation?
A) Renal arteries
B) Internal urethral sphincter
C) Ureters
D) Bladder

Question 898
The student nurse is questioning the instructor about the different types of chemotherapeutic agents used to treat cancer. Which statement by the instructor best explains why lung cancers are less sensitive to antineoplastic agents than other types of cancers?
A) "Lung cancer cells have a very erratic cell cycle, so they are not very sensitive to antineoplastic agents."
B) "Lung cancer cells have been growing for a long time before detection, so they are less sensitive to antineoplastic agents."
C) "Lung cancer cells have a low growth fraction, so they are less sensitive to antineoplastic agents."
D) "Lung cancer cells grow in a high-oxygen environment, so they are not very sensitive to antineoplastic agents."

**Question 899**

A client asks for a prescription for tadalafil (Cialis). What would be important for the nurse know prior to planning interventions for this client?
A) "Do you use nitroglycerine?"
B) "Do you have diabetes mellitus?"
C) "Do you take blood pressure medication?"
D) "Do you have any sexually transmitted infections?"

**Question 900**

A nurse working in an outpatient dermatology clinic is caring for a client who has been diagnosed with a lentigo maligna. Which statement is inappropriate for the nurse to include in the client's teaching plan?
A) The lesion is a precursor to melanoma.
B) The lesion is a tan or black patch on the skin that looks like a freckle.
C) The lesion is also called Robertson freckle.
D) The lesion grows slowly, becoming mottled, dark, thick, and nodular.

**Question 901**

A nurse is caring for a pregnant client who is hypertensive. Which additional clinical manifestations leads the nurse to believe that the client is experiencing early preeclampsia?
A) Right-sided abdominal pain
B) Severe epigastric pain
C) Persistent headache
D) Excessive protein in the urine

**Question 902**

The nurse identifies the diagnosis Risk for Trauma as appropriate for a client with a seizure disorder. Based on this diagnosis, which nursing interventions are appropriate when this client experiences a seizure? Select all that apply.
A) Restrain the client.
B) Turn the client to a lateral position, if possible.
C) Stay with the client.
D) Call for help.
E) Insert a tongue blade into the client's mouth.

**Question 903**

The nurse is caring for a 3-year-old client on the pediatric unit who was in an automobile accident. The client's mother was killed in the accident and the client has just been told. How should the nurse expect the client to react to this information?
A) The client will ask for her toys and ignore what has been said.
B) The client will cry and be depressed.
C) The client will react with anger and may be violent.
D) The client will ask if mommy will cook her favorite meal when she wakes up.

**Question 904**

Prior to being discharged, a client tells the nurse, "I think the prescribed treatment is going to work and I am looking forward to celebrating another holiday season in a few months." Which is the client demonstrating with the current behavior?
A) Apprehension
B) Conflict
C) Denial
D) Spiritual strength
Question 905
A novice nurse, who has read several articles about the need to contain healthcare costs, asks how a quality improvement program can contain cost of care. Which responses by the more seasoned nurse are appropriate? Select all that apply.
A) "Use of computers increases the number of lawsuits."
B) "Medication errors decrease the cost of care."
C) "High nurse-to-client ratios result in decreased length of stay."
D) "Increased nursing staff has been linked to decreased infection rates."
E) "Promoting safety increases the cost of care."

Question 906
A female client, from a male-dominated culture, is being discharged after a lengthy hospitalization. Which action by the nurse prior to providing discharge instructions is appropriate?
A) Make sure instructions are understood by the client.
B) Assess who the decision maker is in the family.
C) Make sure that the healthcare provider gives the instructions.
D) Ask the client when the best time for teaching would be.

Question 907
A client is brought to the emergency department with rapid breathing after learning of a family member being killed in a house fire. What should the nurse do first to help this client?
A) Coach to slow the breathing.
B) Provide a sedative.
C) Ask for a psychiatric consultation.
D) Move to a quiet, calm environment.

Question 908
The nurse caring for a newborn on a ventilator for acute respiratory distress syndrome (ARDS) informs the parents that the newborn is improving. Which data supports the nurse’s assessment of the newborn’s condition?
A) Increased PCO2
B) Oxygen saturation of 92%
C) Less than 1 mL/kg/hour urine output
D) Pulmonary vascular resistance increases

Question 909
A nursing preceptor is working with a novice nurse on a medical-surgical unit. During client care, the novice nurse shares an evidence-based wound care technique that is being used with much success. Which is being encouraged when the novice nurse shares this information with the preceptor?
A) Use new knowledge gained through research.
B) Use trial and error to gain knowledge.
C) Use existing unit modes of care.
D) Use medical knowledge to perform care.

Question 910
One of the roles of the community health nurse is to educate about health promotion and wellness. Which activity would the nurse dismiss as not being relevant to health promotion and wellness?
A) Holding classes on prevention of sexually transmitted infections for teenagers
B) Teaching a class about smoking cessation
C) Implementing an exercise class for clients who have had a heart attack
D) Initiating infant care classes for new parents

Question 911
A nurse is volunteering time in a local free clinic that provides care to the underinsured population. By volunteering time to work in the clinic, this nurse is demonstrating which professional value?

A) Social justice  
B) Integrity  
C) Altruism  
D) Human dignity  

**Question 912**

A client with pneumonia develops respiratory acidosis. Which medications should the nurse prepare to administer to this client? Select all that apply.

A) Diazepam (Valium) 2 mg by mouth at bedtime for sleep  
B) Amoxicillin 1 gram intravenous every 6 hours  
C) Furosemide (Lasix) 20 mg by mouth twice a day  
D) Albuterol inhaler 2 puffs every 4 hours  
E) Potassium chloride 20 mEq in 100 mL 0.9% normal saline intravenous every day  

**Question 913**

A client receiving intravenous antibiotics for 3 days as treatment for cellulitis is being prepared for discharge. Which discharge order should the nurse anticipate for this client?

A) Oral antibiotics to be continued at home  
B) Orders for evaluation by physical therapy  
C) Low-sodium diet prescribed  
D) Home healthcare aide for the client  

**Question 914**

The nurse identifies potential safety concerns for a client with a sensory disorder. Which intervention should the nurse include in this client’s plan of care?

A) Provide meaningful interaction and stimulation.  
B) Teach the need to take antibiotics as prescribed.  
C) Identify assistive devices.  
D) Teach how to adapt to the sensory deficit.  

**Question 915**

The client states to the nurse, "I have been having trouble sleeping since my boyfriend died unexpectedly 3 weeks ago." The client also confides that the boyfriend was married and they were seeing each other secretly. For which reason is the client most likely experiencing sleeping difficulty when grieving?

A) Abbreviated grieving  
B) Chronic grief  
C) Disenfranchised grieving  
D) External grief  

**Question 916**

The nurse is working with a group of parents of children with intellectual disabilities. Which should the nurse recommend to support environmental safety for these children? Select all that apply.

A) Have parents maintain a regular schedule for activities.  
B) Turn the temperature down on the hot water heater.  
C) Teach emotional safety.  
D) Use medications to decrease agitation.  
E) Provide aids to assist with orientation.  

**Question 917**

A nurse is caring for a client diagnosed with trachoma. When providing client education regarding this condition, the nurse will include which statements? Select all that apply.
A) "This condition is caused by Chlamydia trachomatis."
B) "It is common in the United States."
C) "Early symptoms include inflammation of the cornea."
D) "The causative organism is usually Staphylococcus aureus."
E) "It is the primary cause of preventable blindness worldwide."


Question 918

A client diagnosed with multiple sclerosis has an acute onset of visual changes, fatigue, and leg weakness. The client states that the last time this happened, recovery occurred in a few weeks. Which classification of multiple sclerosis is the client experiencing?
A) Secondary-progressive
B) Primary-progressive
C) Progressive-relapsing
D) Relapsing-remitting


Question 919

The nurse is caring for a client with a history of kidney stones. The stones have been analyzed and are all composed of calcium phosphate. Based on this data, which foods should the nurse teach the client to avoid?
A) Chicken, beef, and ham products
B) Flour, milk, and ice cream
C) Tomatoes, fruits, and nuts
D) Organ meats, sardines, and seafood


Question 920

A nurse is educating a client with peptic ulcer disease (PUD) regarding Helicobacter pylori and its role in PUD. Which statements by the nurse are appropriate to include in the teaching session? Select all that apply.
A) "Your inflammatory response to H. pylori contributes to gastric cell damage."
B) "H. pylori infection increases production of gastric acids."
C) "H. pylori infection is spread by droplets in the air."
D) "Helicobacter pylori infection is found in about 25% of individuals with PUD."
E) "The bacteria produces enzymes that improves the efficacy of mucous gel in protecting the gastric mucosa."


Question 921

The first day after surgery to repair a fractured hip sustained from a fall, an older adult client refuses to ambulate but states, "I will consider it tomorrow." Which is the priority action by the nurse?
A) Notify the healthcare provider.
B) Assess why the client is refusing to ambulate.
C) Coordinate personnel to assist with ambulation.
D) Document the client's refusal.


Question 922

The nurse is explaining the difference between delirium and dementia to a family member of a client with confusion. Which statement is appropriate for the nurse to include?
A) "Delirium is often confused with depression in older adult clients."
B) "Dementia develops suddenly."
C) "The cause of delirium is unknown."
D) "Delirium is a common occurrence in older adult clients who are hospitalized."


Question 923

The mother of a preadolescent client is concerned because the client often reports non-specific "bone pain." Which response by the nurse is appropriate?
A) "Bone pain in children is caused from the pulling of muscles when bones grow quickly."
B) "It is a symptom that needs further investigation and will be reported to the physician."

C) "The child needs to rest more when the bones hurt."
D) "Non-specific bone pain means there is a disease process somewhere else in the body."


Question 924
Which is the role of the nurse when providing care to a client diagnosed with a phobia?
A) Providing comfort and alleviating emotional distress
B) Encouraging the client to confront fears
C) Telling the client that the hospital is a safe place
D) Providing medication to help reduce the symptoms of the disorder


Question 925
A registered nurse (RN), who now works as a nursing supervisor at a local hospital, is asked to talk about nursing at the career day at a local high school. When explaining to the students why nursing is a profession rather than a job, which criteria will the RN include to illustrate this point? Select all that apply.
A) Ongoing research
B) High salaries
C) Nursing shortage
D) General knowledge
E) Service orientation


Question 926
The nurse is providing care to a client admitted with acute pancreatitis. Which data support the client's diagnosis? Select all that apply.
A) Nausea and vomiting
B) Severe epigastric pain
C) Steatorrhea
D) Hypotension
E) Elevated temperature


Question 927
The nurse is caring for a Chinese client who just had abdominal surgery. The client's nonverbal cues indicate pain, but the client denies the need for pain medication. Which action by the nurse is appropriate?
A) Allow the client to suffer in silence.
B) Offer the pain medication to the client again, stating that providing comfort is the nurse's most important responsibility.
C) Seek out a family member to convince the client to take the medication.
D) Consult with the healthcare provider about providing pain medication without the client's knowledge.


Question 928
A nurse is working in a skilled nursing facility and is performing an assessment on an older adult client. The nurse notes that the client has hypopigmentation of the skin on both hands. Based on this data, which condition does the nurse suspect?
A) Increased permeability of the epidermal layer
B) Hyperplasia of capillaries
C) Hyperplasia of melanocytes
D) Decreased perfusion of the dermis


Question 929
The nurse is providing care to several clients at an outpatient clinic. Which client is at the greatest risk for developing a social anxiety disorder?
A) 26-year-old female
B) 11-year-old boy
C) 14-year-old girl
D) 30-year-old male

**Question 930**

The nurse is planning care for the client who has been admitted with metabolic alkalosis. Which are appropriate nursing diagnoses for this client during the acute phase of the illness? Select all that apply.

A) Risk for Injury  
B) Ineffective Health Maintenance  
C) Risk for Hypothermia  
D) Risk for Impaired Gas Exchange  
E) Deficient Fluid Volume


**Question 931**

A nurse is working as the designated leader of a group of healthcare providers in a community clinic setting. The team members are working to decrease the number of adolescent pregnancies in the community. They have defined the problem and are now focusing on objectives and considering various viewpoints presented by the group. The nurse is tasked with helping the team to stay focused in order to address the defined problem. Which of the competencies of collaboration does this describe?

A) Trust  
B) Mutual respect  
C) Decision making  
D) Communication


**Question 932**

The nurse is providing care to a client who is experiencing back pain. Which item in the client's history is a known risk factor for disc herniation?

A) Female gender  
B) Short stature  
C) 49 years of age  
D) Anorexia


**Question 933**

The nurse is working on a medical-surgical unit that is short staffed due to a callout. The manager of the unit was unable to replace the nurse, so the extra clients were assigned to the remaining nurses. The manager was able to get the help of unlicensed assistive personnel (UAP) from the house pool to help on the unit. Which action by the nurses would ensure effective care for the client?

A) Delegate vital signs and a.m. care to the UAP.  
B) Tell the clients their care will be sparse.  
C) Assign wound care to the UAP.  
D) Explain to the manager that care may be compromised if another nurse does not work the shift.


**Question 934**

The nurse instructs a client about the medication nifedipine (Procardia) for hypertension. Which client statement indicates that additional teaching is needed?

A) "This medication will cause my ankles to swell, which is normal."  
B) "I will call my doctor if I gain weight or become short of breath."  
C) "I need to drink 6-8 glasses of water each day."  
D) "I need to eat foods high in fiber when taking this medication."


**Question 935**

The mother of a preterm infant tells the nurse that she was not looking forward to having a baby and now that the baby is sick, she feels worse. Which nursing diagnosis is appropriate based on this data?

A) Dysfunctional Family Processes  
B) Ineffective Family Coping  
C) Parental Role Conflict  
D) Impaired Parenting

Question 936

A nurse is promoting participation in The Great American Smokeout for clients who are participating in a smoking cessation class. The nurse knows this event may motivate many individuals to stop smoking by promoting self-efficacy. At the conclusion of the class, which statement leads the nurse to expect a positive outcome for this particular client?
A) "I am going to do the best that I can, so that I won't get lung cancer."
B) "I know that this time I will quit smoking permanently."
C) "I am afraid of getting lung cancer like my father."
D) "I think this time will be different."

Question 937

An adolescent client with complications related to ulcerative colitis is scheduled for an ileostomy. The client is concerned about the social effects of this surgery and asks the nurse what to expect related to bowel function and care after surgery. Which responses from the nurse to the client are appropriate? Select all that apply.
A) "The drainage will gradually become semi-solid and formed."
B) "The stoma will require that you wear a collection device all the time."
C) "After the stoma heals, you can irrigate your bowel so you won't have to wear a pouch."
D) "You will be able to have some control over your bowel movements."
E) "The drainage tends to be liquid but certain foods can cause it to be paste-like."

Question 938

The nurse plans a class about Alzheimer disease for a caregiver support group. Which should the nurse include when teaching this class of caregivers? Select all that apply.
A) Memory difficulties are an early symptom of the disease.
B) Alzheimer disease accounts for about 70% of all dementias.
C) Glutamatergic inhibitors are the most common class of drugs for treating Alzheimer disease.
D) Chronic inflammation of the brain may be a cause of the disease.
E) Depression and aggressive behavior are common with the disease.

Question 939

A client admitted with an eating disorder tells the nurse, "No matter what I do, I continue to be fat." Which is the priority nursing diagnosis when planning care for this client?
A) Disturbed Body Image
B) Deficient Knowledge
C) Impaired Tissue Integrity
D) Ineffective Coping

Question 940

While planning care for a child with autism spectrum disorder (ASD), the nurse encourages the mother to share the child's behavior with the teachers at the child's school. Which statement would the nurse include in the teaching session with the parent?
A) "The teacher should know that your child will be very flexible and will have the ability to contribute to his or her learning."
B) "The teacher should know that your child may experience depression that results from feelings of inadequacy."
C) "The teacher should know that your child may experience an episode of self-mutilation."
D) "The teacher should know that your child will have a tendency to be hypoactive."

Question 941

The staff development trainer is preparing a seminar to review the concepts of a just culture, which is being implemented in the organization. Which elements are integral when training on this content? Select all that apply.
A) Proactive environment that supports employee involvement in decision making
B) Supports learning
C) Managers providing feedback to staff regarding actions
D) Nurse accountability for actions
E) Examines system failures when an adverse event occurs
Question 942
The nurse is providing care to a client who has experienced several episodes of angina. Which is a primary outcome for this client?
A) The client will experience relief of chest pain with nitrate therapy.
B) The client will experience relief of chest pain with anticoagulant therapy.
C) The client will experience relief of chest pain with aspirin therapy.
D) The client will experience relief of chest pain with therapeutic lifestyle changes.

Question 943
The nurse is caring for a group of clients on a psychiatric unit. One client has become highly agitated and is threatening other clients and some of the staff. The nurse escorts the client to the isolation room, leaving the door open. Which statement by the nurse is most appropriate?
A) "You scared the other clients."
B) "I can't believe you behaved in this manner and upset everyone else."
C) "I'm going to stay here with you in case you want to talk about what happened."
D) "If you do not calm down, I will sedate you for your own safety."

Question 944
Which interventions would be the most beneficial for the nurse to discuss with the parents of a child who has had repeated admissions for respiratory syncytial virus (RSV) bronchiolitis? Select all that apply.
A) Do not smoke, and avoid all secondhand smoke around the child.
B) Consider alternatives to sending the child to daycare.
C) Practice frequent hand washing.
D) Encourage physical activity and play.
E) Ensure an adequate nutritional intake.

Question 945
The nurse has identified Ineffective Tissue Perfusion as a nursing diagnosis for a client with disseminated intravascular coagulation (DIC). What intervention would be appropriate for the client?
A) Monitoring oxygen saturation
B) Encouraging deep breathing and coughing
C) Carefully repositioning the client every 2 hours
D) Administering oxygen

Question 946
The nurse is providing counseling to the family of a terminally ill client. The family has children of varying ages. Which statement regarding the reactions of children to death is appropriate for the nurse to include in the counseling session?
A) "Older school-age children begin to understand that death is inevitable."
B) "Preschool children view death as a spiritual release."
C) "Adolescents tend to cope better with death than adults."
D) "Toddlers perceive death as irreversible and unnatural."

Question 947
A client is admitted with complaints of lower extremity edema and occasional shortness of breath. Which electrocardiogram finding supports that the client is at risk for an alteration in perfusion?
A) PR interval 0.30 seconds
B) ST segment isoelectric
C) P wave smooth and round
D) Absent U wave

Question 948
The nurse accompanies the healthcare provider into the client’s room and listens as the diagnosis of cancer is shared with the client and family. Once the healthcare provider leaves the room, the nurse notes that the client and family are teary-eyed regarding the diagnosis. What is the nurse’s most appropriate intervention at this time?

A) Help the client and family remain realistic about prognosis.
B) Arrange for the client to complete a medical power of attorney form.
C) Provide emotional support in coping with the diagnosis.
D) Provide teaching about the treatment options for this form of cancer.


Question 949

A student nurse is asked to recall questions included in the SCOFF questionnaire. Which questions identified by the student are appropriate? Select all that apply.

A) Do you believe yourself to be fat when others say you are too thin?
B) Have you recently lost more than 1 pound in a 3-month period?
C) Do you make yourself sick because you feel uncomfortably full?
D) Do you worry you have lost control over how much you eat?
E) Would you say that food dominates your life?


Question 950

The nurse is teaching a pregnant client, with a history of back pain, childbirth exercises. Which is most appropriate for this client?

A) Perform the pelvic rock exercise only in the standing position.
B) Exercise in the supine position throughout the pregnancy.
C) Soak in a hot tub for approximately 30 minutes after exercise.
D) Perform the pelvic rock exercise while in the hands and knees position.


Question 951

A client is informed that a surgical procedure is to be scheduled in 2 weeks. Which teaching points should the nurse focus to prepare the client for the surgery? Select all that apply.

A) Caring for the surgical incision
B) Deep breathing and coughing
C) Managing constipation
D) Managing pain
E) Maintaining a patent airway


Question 952

A high school student asks the school nurse what can be done for menstrual cramps. What should the nurse recommend to this student who is experiencing primary dysmenorrhea? Select all that apply.

A) Avoid vitamin supplements.
B) Use a heating pad.
C) Increase caffeine intake.
D) Try black cohosh.
E) Engage in regular exercise.


Question 953

The nurse is caring for a client recently diagnosed with schizophrenia. For which sleep issues is this client at risk because of this diagnosis? Select all that apply.

A) Great difficulty getting to sleep
B) REM rebound
C) Reduced REM sleep
D) Circadian cycle disruption
E) High nighttime levels of melatonin


Question 954
A baby will be having surgery to correct a congenital heart defect. On which topic should the parents be instructed regarding the care of the child before surgery?

- Implementing no particular precautions
- Restricting immunizations until after the surgery
- Preventing exposure to infection
- Restricting fluids


**Question 955**

A client with disseminated intravascular coagulation (DIC) has a nursing diagnosis of Impaired Gas Exchange. Which action is inappropriate when providing care based on this nursing diagnosis?

- Place client in low-Fowler position to improve gas exchange.
- Encourage deep breathing and coughing.
- Maintain bed rest.
- Monitor the client's oxygen saturation continuously.


**Question 956**

The nurse is working with a family who survived a tornado. As part of providing care to the family, the nurse is reviewing normal reaction and emotions they may experience as a result of the traumatic event. Which conclusions does the nurse make? Select all that apply.

- Each family member talks to the nurse openly and freely.
- Some family members have difficulty accepting help.
- Each member of the family has a different way of coping.
- All family members will experience anxiety about self and family safety.
- All family members will process the experience at about the same pace.


**Question 957**

The nurse is preparing an educational session on the importance of high-risk populations receiving an annual influenza vaccination. Which clients are considered high-risk for developing complications from the flu? Select all that apply.

- A 20-year-old healthcare worker
- A 35-year-old man with a severe allergy to eggs
- A 3-year-old with cystic fibrosis
- A 25-year-old pregnant woman at 20 weeks' gestation
- A 65-year-old woman


**Question 958**

The nurse is reviewing laboratory values for a female client suspected of having a fluid imbalance. Which laboratory value evaluated by the nurse supports the diagnosis of dehydration?

- Serum potassium 3.8 mEq/L
- Serum osmolality 230 mOsm/kg
- Hematocrit 30%
- Hematocrit 53%


**Question 959**

While receiving report from the operating room, the nurse learns that a client's surgical wound for gallbladder removal is classified as III. What could have caused this wound classification? Select all that apply.

- The alimentary tract was not entered.
- The alimentary, respiratory, genital, or urinary tract was entered.
- Gallbladder contents spilled into the surgical site.
- The wound is necrotic and infected.
- A break in sterility occurred during the surgery.


**Question 960**

A client presents at the emergency department reporting a burning pain in the chest of a 7 on a 0 to 10 pain scale. Gastroesophageal reflux disorder
Question 961

A client states to the nurse that learning how to use the blood glucose machine will have to wait until holiday events are planned. Which cognitive indication of stress is the client demonstrating?
A) Suppression
B) Self-control
C) Structuring
D) Problem solving

Question 962

A client, who underwent in-vitro fertilization, presents at the OB-GYN clinic for pregnancy testing. When teaching the client about the test, which statement is appropriate?
A) “Please provide a urine sample. Human chorionic gonadotropin (hCG) is detected in your blood 24 to 48 hours after fertilization.”
B) “Please provide a urine sample. Early pregnancy factor (EPF) is detected in your urine 24 to 48 hours after fertilization.”
C) “We will draw blood to determine if you are pregnant. Human chorionic gonadotropin (hCG) is detected in your blood 24 to 48 hours after fertilization.”
D) “We will draw blood to determine if you are pregnant. Early pregnancy factor (EPF) is detected in your blood 24 to 48 hours after fertilization.”

Question 963

A pregnant client with a history of drug use refuses testing for human immunodeficiency virus (HIV), despite the recommendation of her nurse-midwife. Which actions by the nurse are appropriate in this situation? Select all that apply.
A) Re-emphasize the importance of HIV testing.
B) Do the testing anyway.
C) Throughout the pregnancy, encourage the client to reconsider the decision not to be tested.
D) Offer counseling.
E) Refuse to treat the client.

Question 964

The nurse is evaluating the adequacy of the burn-injured client’s nutritional intake. Which laboratory value is the best indicator of nutritional status?
A) Creatine phosphokinase (CPK)
B) Albumin level
C) Hemoglobin
D) BUN levels

Question 965

The nurse identifies that a client is at risk for dysfunctional uterine bleeding. What did the nurse assess in this client? Select all that apply.
A) High level of stress
B) Uses birth control pills for contraception
C) Weight gain of 20 lbs. in 2 months
D) Limits intake of high-fat foods
E) Has a history of peptic ulcer disease

Question 966

The nurse educator is preparing to teach a group of nursing students how to navigate the internet for researching healthcare information. Which does the educator plan to include during lecture?
A) A directory of campus internet sites of interest
B) Information technology instruction
C) How to search for and evaluate health information
D) A directory of libraries

Question 967
The nurse is discharging a client diagnosed with general anxiety disorder (GAD). The client is prescribed a selective serotonin reuptake inhibitor (SSRI). Which statement made by the client would indicate to the nurse a need for further education?
A) "My doctor will start me off on a high dose and then decrease the dose."
B) "This medicine alters the levels of the neurotransmitter serotonin in the brain."
C) "This medicine could make me feel like I have the jitters."
D) "I may experience some nausea while on this medication."

Question 968
The nurse is instructing a new mother on how to care for the newborn's circumcision site. Which statements indicate that the nurse's education session was effective? Select all that apply.
A) "Swelling is expected."
B) "I should not use petroleum jelly on the penis."
C) "I am to use soap and water to remove yellow tissue on the penis."
D) "Every time I change the diaper I am to wash the area with warm water."
E) "I should report any pus drainage or change in diaper wetness to the physician."

Question 969
A client is evaluated for Parkinson disease (PD). Which findings on the Unified Parkinson Disease Rating Scale (UPDRS) would suggest a positive finding for PD? Select all that apply.
A) Hyperphonia
B) Dystonia
C) Diarrhea
D) Festination
E) Retropulsion

Question 970
The nurse suspects that a client is experiencing hypothyroidism. Which question should the nurse ask during the health history?
A) "Is your skin rough and dry?"
B) "Is your skin smooth?"
C) "Do you have brown, shiny patches on your legs?"
D) "Is your skin often clammy?"

Question 971
During a home care visit, an older adult client begins to cry softly when asked about coping with back pain. The client states, "My back hurts bad all the time and I am so confused about all these tests and scared that the doctor wants me to have surgery. Which is the priority intervention by the nurse?
A) Administer an ordered pain medication.
B) Explain procedures in a way the client will understand.
C) Attentively listen to the client's thoughts and fears.
D) Ask the client to rate pain on a scale of 1 to 10.

Question 972
The nurse is providing training for the clinical staff of a skilled care facility and wants to include information on functional incontinence. Which risk factors for functional incontinence will the nurse include in the training? Select all that apply.
A) Dementia
B) Limited mobility
C) Lack of access to facilities
D) Depression
Question 973
A nurse is working with a client who is attempting to lose weight. The client admits having difficulty being compliant with the diet prescribed by the healthcare provider. Which suggestion by the nurse might assist the client in being compliant with the prescribed diet?
A) "Set aside small food reward when you meet a weight loss goal."
B) "Record your food intake so that you can see what and how much you are eating."
C) "Eat alone to reduce outside distractions that may cause you to stray from your diet."
D) "Allow at least 45 minutes to 1 hour to promote full enjoyment of your meal."

Question 974
The nurse is providing care to a client who experiences chronic inflammation due to arthritis. Which collaborative intervention does the nurse plan for when providing care to this client?
A) Administering frequent doses of opioid medications
B) Administering anti-inflammatory medications
C) Administering diuretics
D) Administering antibiotics

Question 975
The nurse has identified the diagnosis Excess Fluid Volume as appropriate for a client with acute glomerulonephritis. What should the nurse assess to learn the most accurate indication of this client's fluid balance?
A) Serum sodium levels
B) Vital signs
C) Daily weight
D) Intake and output records

Question 976
The nurse is instructing a postpartum client on when she can resume her normal exercise regimen of running for exercise most days of the week. Which statement indicates that teaching was effective?
A) "I can exercise if I get 8 hours of sleep per day."
B) "I should check my energy level at home and increase exercise slowly."
C) "I can start my exercise regimen in 2 weeks."
D) "I will not be able to exercise because it is not recommended for breastfeeding women."

Question 977
A client with cardiomyopathy is experiencing tachycardia. Which medication prescription does the client's nurse anticipate?
A) Angiotensin II receptor blocker
B) Cardiac glycoside
C) ACE Inhibitor
D) Beta blocker

Question 978
The nurse is evaluating the care plan for a client diagnosed with agoraphobia. Which client statement indicates the goals of treatment have been met?
A) "It is not going to be easy but I will be making it to my appointments even if I have to leave the house by myself. I have been practicing and deep breathing exercises are helping."
B) "Every time I try to leave the house I panic and I feel like passing out. I just don't know how this is going to get any better."
C) "I can't participate in counseling once I get discharged because I hate to leave the house if I don't have to. Other people hate to leave their house for no reason."
D) "I will be able to make it to my outpatient appointments as long as I can find someone to go with me. It is just easier if I ride with someone."
Question 979
The nurse is completing a home care visit of an older adult client who is dying of end-stage renal failure and dementia. The client has been taking narcotic medication for the treatment of chronic arthritic pain. During the visit, the family tells the nurse that the client seems more restless and is grimacing and crying. Which action by the nurse is appropriate?
A) Encourage the family to continue to administer the pain medication as needed.
B) Teach the family alternative methods for pain relief instead of administering pain medication to this client.
C) Realize the client is being uncooperative because of a personality disorder.
D) Tell the family that the client may be in pain and an adjustment to the pain medication or administration schedule is needed.

Question 980
The nurse is preparing to assess the client's blood pressure using an electronic monitoring unit and notices that the end of the cord is frayed. Which action by the nurse is most appropriate to prevent harm?
A) Complete an incident report.
B) Label the machine as broken and notify engineering.
C) Plug the machine in to make sure it works appropriately.
D) Get another machine from the equipment room.

Question 981
The nurse is instructing the spouse of a client with a stroke on how to do passive range of motion to the affected limbs. Which rationale for this intervention will the nurse include in the teaching session?
A) Improve muscle strength.
B) Maintain joint flexibility.
C) Maintain cardiopulmonary function.
D) Improve endurance.

Question 982
The nurse is utilizing Kohlberg's theory to assess the moral development of several school-age children. According to this theorist, the nurse should recognize this age group is mainly concerned with which step in moral development?
A) A feeling of justice
B) Wanting the approval of others
C) Belief in due process
D) Fear of punishment

Question 983
Which assessment finding supports the nurse's suspicion that a client is experiencing chronic obstructive pulmonary disease (COPD)?
A) Clubbing of the fingers
B) Dysrhythmias
C) Cyanotic nail beds
D) Cough in the morning producing clear sputum

Question 984
The nurse has implemented a care plan for an adult client with gastroesophageal reflux disorder (GERD). On the next clinic visit, which statement by the client indicates adherence to the plan of care?
A) "I take a TUMS with the ranitidine to make it work better."
B) "Spandex camisoles are worth heartburn."
C) "I have switched from margaritas to wine."
D) "I've lost 6 pounds because I eat every 3 hours and never before bed."

Question 985
A client recovering from a motor vehicle crash develops hypotension and jugular distension with a tracheal deviation. Based on this data, which should
The nurse suspects occurred?
A) Tension pneumothorax
B) Compensatory shock
C) Hypovolemic shock
D) Hemorrhage

<table>
<thead>
<tr>
<th>Question 986</th>
</tr>
</thead>
<tbody>
<tr>
<td>In preparing a workshop on Healthy People 2020, which are some of the disease processes the nurse should address as part of the 42 topic areas covered in the report? Select all that apply.</td>
</tr>
<tr>
<td>A) Multiple Sclerosis</td>
</tr>
<tr>
<td>B) HIV</td>
</tr>
<tr>
<td>C) Diabetes</td>
</tr>
<tr>
<td>D) Heart Disease and Stroke</td>
</tr>
<tr>
<td>E) Cancer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 987</th>
</tr>
</thead>
<tbody>
<tr>
<td>The nurse is concerned that an older adult client is at risk for developing acute renal failure. Which information in the client's history support the nurse's concern? Select all that apply.</td>
</tr>
<tr>
<td>A) Taking medication for type 2 diabetes mellitus</td>
</tr>
<tr>
<td>B) Total hip replacement surgery 5 years ago</td>
</tr>
<tr>
<td>C) Prescribed high doses of intravenous antibiotics</td>
</tr>
<tr>
<td>D) Recent aortic valve replacement surgery</td>
</tr>
<tr>
<td>E) Diagnosed with hypotension</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 988</th>
</tr>
</thead>
<tbody>
<tr>
<td>A participant in a seminar given by the nurse asks for information about lifestyle situations that might contribute to chronic fatigue. Which should the nurse identify in response to this request? Select all that apply.</td>
</tr>
<tr>
<td>A) Swimming after a meal</td>
</tr>
<tr>
<td>B) Vigorous exercise three times a week</td>
</tr>
<tr>
<td>C) Synthroid use</td>
</tr>
<tr>
<td>D) Marijuana use</td>
</tr>
<tr>
<td>E) Chronic back pain</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 989</th>
</tr>
</thead>
<tbody>
<tr>
<td>A client is admitted with a core body temperature of 93°F. Which action by the nurse is appropriate for this client?</td>
</tr>
<tr>
<td>A) Provide warm fluids.</td>
</tr>
<tr>
<td>B) Use warm blankets.</td>
</tr>
<tr>
<td>C) Apply warm soaks to the extremities.</td>
</tr>
<tr>
<td>D) Use a hyperthermia blanket.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>The nurse is assigned to care for a child with sickle cell disease who is being admitted with splenic sequestration crisis. Which room would be the most appropriate for this child?</td>
</tr>
<tr>
<td>A) Airborne-isolation room</td>
</tr>
<tr>
<td>B) Semi-private room</td>
</tr>
<tr>
<td>C) Contact-isolation room</td>
</tr>
<tr>
<td>D) Private room</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 991</th>
</tr>
</thead>
<tbody>
<tr>
<td>The nurse is providing care to a client who gave birth to a newborn by cesarean section. When providing care to this client, which nursing actions are appropriate? Select all that apply.</td>
</tr>
<tr>
<td>A) Assessing bowel sounds every 8 hours</td>
</tr>
</tbody>
</table>
A client tells the nurse that flakes of skin come loose with every shampoo. Based on this data, which secondary skin lesion does the nurse suspect the client is experiencing?
A) Crust 
B) Nodule 
C) Scale 
D) Macule

The nurse instructor is preparing a teaching session for staff nurses on intradisciplinary assessments. Which information should the instructor consider when preparing this presentation? Select all that apply.
A) Utilization reviews 
B) Audits 
C) Outcomes management 
D) Performance appraisals 
E) Peer review

A nurse manager working in labor and delivery is providing educational material to staff nurses regarding postpartum depression and the maternal role attainment (MRA) process. Which information is true regarding the MRA process?
A) During the formal stage of the MRA process, the woman is still influenced by the guidance of others and tries to act as she believes others expect her to act.
B) During the formal stage of the MRA process, the woman looks to role models, especially her own mother, for examples of how to mother.
C) Maternal role attainment occurs in five stages.
D) The personal stage of the MRA process begins when the mother starts making her own choices about mothering.

The nurse is assessing a 6-month-old infant using the Denver Developmental Screening test. The test shows that the infant is delayed in gross motor development. What activities can the nurse implement to help the child attain appropriate developmental levels?
A) Encourage the child to stand. 
B) Talk to the child and play music. 
C) Encourage the child to hold a rattle or play patty-cake. 
D) Pull the child to a sitting position and prop the child in a sitting position.

A client with heart failure is prescribed an oral fluid restriction of 1,200 mL per day. How many ounces of fluid should the nurse teach the client is permitted during the daylight shift?
A) 400 mL 
B) 600 mL 
C) 200 mL 
D) 300 mL

The nurse makes a home visit to a client recovering from complications related to influenza. Which client statements indicate that desired outcomes have been met? Select all that apply.
A) "I'm eating healthy foods now." 
B) "I was able to take a walk today."

Question 998
A client is with a history of gastroesophageal reflux disorder (GERD) presents with metabolic alkalosis. Based on the data reviewed in the client's history, which medication does the nurse suspect contributed to the current diagnosis?
A) Omeprazole
B) Ranitidine
C) Aluminum hydroxide
D) Metoclopramide

Question 999
The nurse is caring for a pediatric client recovering from surgery for a perforated appendix. Which nursing diagnosis should the nurse use to guide this client's care during the immediate postoperative period?
A) Risk for Impaired Perfusion
B) Risk for Infection
C) Risk for Deficient Fluid Volume
D) Risk for Chronic Pain

Question 1000
An older adult client tells the nurse about rarely going outdoors in the winter because of a lack of energy or desire. Based on this data, which does the nurse suspect the client is experiencing?
A) Seasonal affective disorder
B) Anxiety
C) Situational depression
D) Side effect of medication

Question 1001
An older adult client has just learned of the death of an adult child as a result of an automobile accident. The adult child was in another city and died alone. Which action by the nurse is appropriate to address the client during the grieving process?
A) Obtaining a psychological consult for the mother
B) Helping the family to arrange the funeral and burial plans
C) Assisting the family through the complicated grief process
D) Planning care related to the guilt and grief the mother may feel

Question 1002
While assessing a client's spiritual needs, the nurse asks, "What spiritual beliefs are important to you?" This question represents which step of the FICA assessment model?
A) Faith
B) Address
C) Community
D) Implication

Question 1003
A public health nurse is educating a group of adults regarding sexually transmitted infections. Which is an appropriate statement by the nurse?
A) "Males have higher rates of gonorrhea and Chlamydia, whereas women have higher rates of syphilis."
B) "The incidence of STIs is highest among young Caucasian females."
C) "Men are disproportionately affected by STIs compared to women and infants."
D) "Women often experience few early manifestations of the infection, delaying diagnosis and treatment."
Question 1004
A client tells the nurse about feeling pressure to spend every Sunday with family. However, the client's spouse does not want to participate and stays at home waiting for the client to return. Which is determining this client's self-concept?
A) Family and culture
B) Stressors
C) Resources
D) History of successes and failures

Question 1005
The nurse is providing discharge instructions to a client recovering from cellulitis. Which client statement indicates that this teaching has been effective?
A) "If the lesion looks healed, I will stop taking the antibiotics so that I will not develop resistance to antibiotics."
B) "Drainage from the site is an expected finding, and I should not be concerned."
C) "I will monitor for signs of infection such as fever, chills, malaise, and redness or tenderness at the site."
D) "If pustules develop, I will squeeze the lesion to remove the pus."

Question 1006
The nurse is caring for a client who is experiencing acute chest pain that is rated as a 9 on a 0 to 10 pain scale. Based on this data, which medication does the nurse plan to administer?
A) Naproxen
B) Acetaminophen
C) Morphine
D) Ibuprofen

Question 1007
A nurse is caring for an older adult client who is experiencing grief after the recent loss of a spouse. What is true regarding an older adult's response to grief?
A) Manifestations of grief in older adults are usually trust issues, suspecting once close friends and family members of judging their pain or not understanding their emotions.
B) Grief in an older adult initially presents differently than in a younger adult.
C) Older adults may seem to experience the emotional aspects of grief more acutely than younger adults.
D) Manifestations of grief in older adults are usually less severe than those observed in younger clients.

Question 1008
An older adult client who resides in a long-term care facility is admitted to the hospital with sepsis. The family is tearful and does not understand how their family member got so sick from a bed sore. What should the nurse teach the family to help in the care of the client?
A) Assist the client to the bathroom so there is not a fall.
B) Assist the client with meals to obtain optimal nourishment.
C) Alert the staff when the IV runs dry.
D) Help the nurse with dressing changes.

Question 1009
The nurse is planning care for a client to prevent future suicidal behavior. Which interactions would be appropriate for this client? Select all that apply.
A) Assist in creating a crisis card listing family members.
B) Focus on reasons for living.
C) Identify self-directed harmful behaviors.
D) Add the names of community resources to a crisis card.
E) Limit exposure to friends.

Question 1010
A client hospitalized with an open reduction and internal fixation of a fractured femur reports right calf pain. The nurse notes that the right calf is 3.5 cm larger than the left calf with generalized posterior erythema. The right calf is tender to touch. Dorsalis pedis pulse is 3/4+ bilaterally. Which is the priority action by the nurse?

A) Prepare to administer intravenous heparin.
B) Prepare to apply a cast to the right leg.
C) Use a Doppler stethoscope to confirm pedal pulses.
D) Notify the healthcare provider of the findings.

**Answer:** https://biology-forums.com/index.php?topic=406057

**Question 1011**

An older adult client diagnosed with asthma has a respiratory rate of 28 at rest with audible wheezes upon inspiration. Based on this data, which nursing diagnosis is the most appropriate?

A) Impaired Tissue Perfusion
B) Ineffective Airway Clearance
C) Activity Intolerance
D) Ineffective Breathing Pattern

**Answer:** https://biology-forums.com/index.php?topic=406336

**Question 1012**

An obstetric nurse is reviewing risk factors for prenatal loss with a group of clients. Which clients are at a high risk for prenatal loss? Select all that apply.

A) The woman recovering from a gastrointestinal virus
B) The unmarried 14-year-old woman living in the city
C) The woman who had a healthy baby 6 months ago resulting from a healthy pregnancy
D) The woman who drinks one cup of coffee every morning
E) The woman who lives in a rural area

**Answer:** https://biology-forums.com/index.php?topic=407009

**Question 1013**

A nurse is teaching a mother warning signs and symptoms to watch for in her child, who will be discharged with a full leg cast. Which statements by the mother indicate the need for further instruction? Select all that apply.

A) "We can cut a hole in the cast if the foot swells until we get to the doctor's office."
B) "It is ok that the plaster cast gets damp as long as I blow dry it."
C) "If her foot turns white and cold, I should call the physical therapist."
D) "I can expect that my child will have some pain but the medicine should help."
E) "We can use a blow dryer on low to help with the itching that my child will experience."

**Answer:** https://biology-forums.com/index.php?topic=406042

**Question 1014**

A nurse is working with a number of clients at a free clinic. Which client population is at a high risk for low levels of health care?

A) Men who have protected sex with men
B) Teenagers
C) Undocumented immigrants
D) Men who have sex with women

**Answer:** https://biology-forums.com/index.php?topic=406639

**Question 1015**

The nurse is preparing to administer 20 mEq of potassium chloride to a client who has been vomiting. What should the nurse explain to the client about the purpose of this medication?

A) It is vital in regulating muscle contraction and relaxation.
B) It is used in the body to synthesize ingested protein.
C) It is needed to maintain skeletal, cardiac, and neuromuscular activity.
D) It controls and regulates water balance in the body.

**Answer:** https://biology-forums.com/index.php?topic=406813

**Question 1016**

The nurse is developing strategies for the relief of menstrual cramping to teach a group of young women. What should be the focus of these strategies?
A) Decrease in estrogen production  
B) Minimization of menstrual flow  
C) Increase of blood flow to the uterine muscle  
D) Avoidance of uterine contraction  


**Question 1017**

The nurse is caring for a homosexual client who has just died due to complication associated with acquired immune deficiency syndrome (AIDS). The client's partner is still in the room and is dry-eyed and exhibiting somber behavior. The nurse offers condolences to the partner, realizing that the partner expects which to occur?

A) The boss at work will be supportive of bereavement leave.  
B) The partner will want support from those around him on the unit.  
C) The community will not allow the partner to grieve openly.  
D) The client's family will want to grieve with him.  


**Question 1018**

The nurse is providing care for a client who is experiencing situational depression after the death of a parent. During the assessment, the nurse learns that the client has returned to work, is caring for her family, and spends quiet time reflecting on her life and future. Which conclusion by the nurse is most appropriate?

A) The client is working through the grief process.  
B) The client is experiencing anxiety.  
C) The client is exhibiting ineffective coping.  
D) The client is experiencing denial regarding the death of a parent.  


**Question 1019**

The nurse in a rheumatology clinic is managing care for clients who receive nonsteroidal anti-inflammatory drugs (NSAIDs) for the treatment of their disease processes. Which are the primary laboratory tests the nurse will assess prior to initiation of this type of therapy? Select all that apply.

A) Creatine clearance  
B) Complete blood count (CBC)  
C) Serum amylase  
D) Electrolytes  
E) Liver function tests  


**Question 1020**

On the first postoperative day after spinal fusion, the nurse assesses a client and finds temperature 39.2°C, blood pressure 100/50 mmHg, heart rate 118 bpm, and respirations 23 breathes per min. Drainage at the incision site is clear and tests positive for glucose. Which assessment parameter indicates the highest risk for surgical wound infection?

A) Temperature  
B) Presence of incisional drainage  
C) Incisional drainage positive for glucose  
D) Heart rate 118 bpm  


**Question 1021**

A nurse is caring for an older adult client admitted to the hospital with pneumonia. The client asks the nurse what can be done to decrease the risk for developing pneumonia in the future. Which responses by the nurse are the most appropriate? Select all that apply.

A) “You can start by not smoking.”  
B) “You should drink a yogurt drink once a day that is supplemented with L. casei immunitas cultures.”  
C) “There is nothing that you can do to decrease your risk of pneumonia in the future.”  
D) “Avoiding alcohol will help.”  
E) “You can get the pneumonia vaccination, which may help to decrease your risk in the future.”  


**Question 1022**

The nurse is caring for a client who is hospitalized on a medical unit for a systemic infection. The client asks the nurse which defenses the body has
against infection. Which physiological barriers that protect the body against microorganisms will the nurse include in the response to the client? Select all that apply.
A) Adequate urinary output
B) A surgical incision
C) Intact skin
D) Alcoholic beverages
E) Occasional smoking

Question 1023
A female client has returned to the unit following a hysterectomy. The nurse knows that which intervention will provide the most pain relief for the client?
A) Offer pain relief before the client complains of pain.
B) Wait until the client can describe the pain specifically.
C) Assess the pain level every 4 hours around the clock.
D) Allow the client to "sleep off" the anesthesia, and then offer pain medication.

Question 1024
The nurse is providing care to a client with an infected leg wound. The client is exhibiting symptoms of a systemic infection and is receiving intravenous antibiotics. The client states to the nurse, "I am having trouble breathing." Based on this data, which does the nurse suspect the client is experiencing?
A) Deep vein thrombosis
B) Anemia
C) Allergic response from antibiotic therapy
D) Acute respiratory distress syndrome

Question 1025
A client states to the nurse, "I experience shortness of breath and dizziness every time I get into an elevator." Which actions by the nurse are appropriate based on this data? Select all that apply.
A) Ask the client how he has survived in life so far with elevators.
B) Assist the client to rethink the degree of anxiety associated with elevators.
C) Suggest that the client should avoid elevators.
D) Tell the client that elevators are completely safe.
E) Instruct the client in deep breathing exercises.

Question 1026
The nursing is preparing to discharge a client recovering from prostate surgery for cancer. What should the nurse emphasize when teaching this client?
A) "It is quite common to notice blood in your urine following this type of surgery."
B) "You may drive yourself home."
C) "Avoid strenuous activity and heavy lifting for 2 weeks."
D) "Reduce your fluid intake so you won't need to void as often."

Question 1027
The nurse is planning care for a client demonstrating symptoms of depression. When assessing this client, which should the nurse use?
A) Beck Depression Inventory
B) More time talking with the client
C) The client's family members, for answering the assessment questions
D) Glasgow Coma Scale

Question 1028
The nurse is preparing to discharge a client with chronic kidney disease. The nurse is teaching the client and family about administering calcium acetate tablets by mouth with each meal at home. Which explanation about this medication is the most appropriate?
Question 1029

The nurse is in the midst of a complicated client care situation and is not sure what needs to be done with some information. Which healthcare issues must the nurse report to the state? Select all that apply.

A) Death of a neonate
B) Death of a client
C) Diagnosis of tuberculosis
D) Amputation of a limb
E) Kidney transplant


Question 1030

A client is recovering from minimally invasive surgery due to a diagnosis of benign prostatic hyperplasia (BPH). After assessing the client, the nurse expects which outcome for this client?

A) Urinary continence
B) Absence of pain
C) Bowel continence
D) No postoperative treatment


Question 1031

A staff nurse learns before reporting to work that a close family member has been diagnosed with terminal cancer. The nurse is receiving the shift report and finds the family member has been assigned as a client. The nurse reporting off duty states that the client is very demanding and complains a lot. Which action by the staff nurse who is assigned care for the oncoming shift is appropriate?

A) Discuss the situation with the charge nurse.
B) Tell the client to change the behavior.
C) Ask the healthcare provider to help control the client.
D) Resolve to refrain from reacting negatively to the client.


Question 1032

The nurse is caring for a client on the unit who has just died. The client's adolescent daughter is very quiet, and the nurse attempts to talk with her. The adolescent remains silent, not wishing to talk about the loss. Which action by the nurse is appropriate to assist the adolescent?

A) Notifying the hospital chaplain to come talk with the adolescent.
B) Ask the adolescent if any friends are available to talk.
C) Provide the adolescent with paper, pens, and pencils.
D) Ask the doctor to prescribe a sedative for the adolescent.


Question 1033

A client who is hospitalized after a left hip fracture is scheduled for surgery late this afternoon. After receiving report, the nurse evaluates the Buck traction applied by a new physical therapist. Which finding indicates that the traction is correctly applied?

A) Foam boot covers the right lower leg from the knee down.
B) 20-pound weights are connected to the bottom of a foam boot.
C) The left knee and hip are in alignment above the foam boot.
D) Weights are supported by a stool at the end of the bed.


Question 1034

A nurse is caring for an older adult client with depression whose spouse died 2 months ago. When planning care for this client, what goals are most appropriate? Select all that apply.

A) The client will attend complicated grief therapy as ordered.
B) The client will discuss any instances of suicidal thoughts with the nurse or another healthcare provider.
C) The client will attend psychotherapy as ordered.
D) The client will use healthy coping mechanisms.
E) The client will move on to acceptance of the loss.

**Question 1035**

The nurse is caring for a client who develops a fever and productive cough after having an appendectomy. Which prescriptions should the nurse expect from the healthcare provider for this health problem? Select all that apply.

A) Sputum cultures
B) Isolation precautions
C) Bronchial washing for culture
D) Antibiotics
E) Chest physiotherapy

**Question 1036**

A staff nurse with a bachelor's degree has decided to concentrate on nursing research, as the nurse believes that research can greatly improve client outcomes. Which is true of the nurse with a bachelor's degree in regards to nursing research? Select all that apply.

A) Can participate in nursing research projects
B) Is not expected to participate in research until pursuing a higher degree
C) Can incorporate research results in client care
D) Can participate in research as the principal investigator
E) Can identify areas of need for nursing research

**Question 1037**

The nurse is triaging a client who presents to the urgent care clinic with symptoms of severe flank pain with spasms, nausea, vomiting, and oliguria. The client states that the pain was initially intermittent and radiated from the lower back to the lower quadrants of the abdomen. Which action by the nurse is the most appropriate?

A) Instruct the client to increase fluids.
B) Obtain a urine specimen for culture.
C) Refer the client to a urologist.
D) Complete the physical assessment.

**Question 1038**

The nurse is assessing an adult client in a urology clinic. The client reports that she has been having "accidents" and expresses frustration about this normal part of aging. Which response by the nurse is the most appropriate?

A) "You may need to have surgery to manage this problem."
B) "I understand you are frustrated about this occurrence."
C) "Unfortunately, aging and incontinence go hand in hand."
D) "Incontinence is not a normal part of aging. Tell me more about the incontinence you are experiencing."

**Question 1039**

A client is admitted to the intensive care unit with a systemic infection. Which manifestations will the nurse most likely assess in this client? Select all that apply.

A) Pain
B) Anorexia
C) Tachycardia
D) Edema
E) Fever

**Question 1040**

The nurse is collecting data on prenatal clients at a clinic on a Native American reservation in Arizona. One client has risk factors for substance abuse. What physical sign or signs did the nurse assess that suggest substance abuse in this client? Select all that apply.

A) Dilated pupils
B) Dressed in jeans and a t-shirt  
C) Frequent accidents or falls  
D) Odor of alcohol on the breath  
E) Underweight  

Question 1041  
A school-age client is admitted to the pediatric intensive care unit (PICU), unconscious and with multiple traumatic injuries, after a skateboard accident that included a closed head injury. Many health professionals are involved in the client’s and the scene is chaotic. The parents are extremely anxious and want to know what’s happening. The case manager asks for an interdisciplinary team meeting to speak with the client’s parents. Which is the rationale for this meeting?  
A) To prevent the parents from trying to change the plan of care  
B) To share and evaluate information for care planning and implementation, and prevent priority conflicts, redundancy, and omissions in care.  
C) To allow all the primary healthcare provider to make all the decision regarding the client's care  
D) To allow for each specialty to practice independently  

Question 1042  
A client is admitted for the fourth time in 4 years for alcohol detoxification. When planning care for this client, the nurse will include which pathophysiology aspect of alcoholism due to its impact on client care?  
A) Aging can impact the ability of the body to handle detoxification from alcohol and drugs.  
B) Increased difficulty with alcohol detoxification is likely the result of an addiction to another substance at the same time.  
C) The withdrawal may be greater this time.  
D) The dependency might have been greater this time.  

Question 1043  
A client who is a firefighter sustains an eye injury caused by falling debris while cleaning up after a house fire. The client asks what can be done to prevent eye injuries in the future. What should the nurse instruct the client?  
A) Wear protective glasses or goggles.  
B) Irrigate the eyes with water after putting out a fire.  
C) Use artificial tears every day.  
D) Apply warm soaks to the eyes every evening before sleep.  

Question 1044  
A nurse is providing care for a nonverbal client. The nurse wants to implement strategies that will promote communication with this client. Which interventions would be appropriate for the client in this situation? Select all that apply.  
A) Ask questions to the interpreter and not the client.  
B) Ask interpreter to translate as closely as possible.  
C) Employing an interpreter  
D) Ask client's family to be included in the process and exchange of information to ensure complete understanding.  
E) Ask the interpreter uses a dialect the client is familiar with for the best understanding.  

Question 1045  
A client is diagnosed with a detached retina. Which is the priority nursing diagnosis for this client?  
A) Impaired Tissue Integrity  
B) Anxiety  
C) Ineffective Coping  
D) Risk for Infection  

Question 1046  
The nurse is caring for a client who is diagnosed with acute renal failure. When reviewing the client's laboratory data, which findings indicate that a client has met the expected outcomes? Select all that apply.  
A) Decreasing serum creatinine  
B) Decreasing neutrophil count
C) Decreasing blood urea nitrogen (BUN) levels
D) Decreasing lymphocyte count
E) Decreasing erythrocyte count

Question 1047

A client says that even though a diagnosis of hypertension is disappointing, with medication and lifestyle changes, it can be controlled and the client will become a better person. Based on this data, which aspect of spirituality is the client demonstrating?
A) Becoming
B) Value
C) Connecting
D) Meaning

Question 1048

The mother of a child starting school in a few weeks is concerned how her child will interact with other children. Which response by the nurse is best to address this mother's concern?
A) “The child's physical characteristics play a large role in interactions with others.”
B) “The home environment is the major influence.”
C) “The child's temperament will determine interaction ability.”
D) “The culture in which the child was raised plays a role in interactions with others.”

Question 1049

A nurse educator is discussing the different entities that offer accreditation to healthcare professional programs. Which types of programs can receive accreditation from the National League of Nursing (NLN)? Select all that apply.
A) Licensed Practical Nursing (LPN) programs
B) Licensed Vocational Nursing (LVN) programs
C) Dental Assisting programs
D) Medical Assisting programs
E) Bachelor of Science in Nursing (BSN) programs

Question 1050

A menopausal client is concerned that intercourse with her spouse has become increasingly painful. What should the nurse explain about the changes in this client's body after menopause?
A) Vaginal lubrication decreases.
B) Estrogen levels increase.
C) Sexual desire diminishes.
D) Cervical mucus is thicker.

Question 1051

A postpartum client is experiencing pain from an episiotomy. Which actions will the nurse suggest to the client to decrease discomfort? Select all that apply.
A) Tightening the buttocks before sitting
B) Performing leg scissor kicks several times a day
C) Increasing the intake of meat, cheese, fish, eggs, and nuts
D) Washing the area with soap and water every day
E) Changing peripads daily

Question 1052

A client, with a BMI of 35, is recovering from total hip replacement surgery and is experiencing pain exacerbated with movement and states to the nurse, “I live alone. How will I ever be able to return to my home?” Based on this data, which is the priority nursing diagnosis for this client?
A) Imbalanced Nutrition: More than Body Requirements
B) Acute Pain
C) Ineffective Coping
Question 1053

A client with syphilis is allergic to penicillin. Based on this data, which medications does the nurse anticipate as appropriate for this client? Select all that apply.
A) Tetracycline
B) Amoxicillin
C) Erythromycin
D) Doxycycline
E) Gentamicin


Question 1054

During a routine prenatal visit, a client who is 24 weeks pregnant has an increased blood pressure. The nurse identifies which nursing diagnosis as appropriate for the client at this time?
A) Risk for Fluid Volume Excess
B) Risk for Impaired Growth and Development
C) Chronic Pain
D) Constipation


Question 1055

A nurse is teaching a group of couples a class on building positive relationships at a local community center. The nurse is focusing this session on learning skills to be open-minded and respectful to those with opposing opinions. Based on this data, on which component of wellness is the nurse focusing this session?
A) Environment
B) Emotional
C) Social
D) Physical


Question 1056

The nurse is providing care to a client recently diagnosed with chronic obstructive pulmonary disease (COPD). The client's family ask how their loved one got this disease. Which risk factors for COPD will the nurse include in the teaching session?
A) Bronchitis and emphysema
B) Emphysema and atelectasis
C) Asthma and emphysema
D) Asthma and bronchitis


Question 1057

The nurse is proving care to a 1-hour old newborn who was born at 39 weeks' gestation. Which assessment data is cause for concern? Select all that apply.
A) Acrocyanosis
B) Respiratory rate of 72 breaths per minute
C) Mean blood pressure of 52 mmHg
D) Presence of meconium stool
E) Negative Babinski reflex


Question 1058

The nurse is planning education for an adolescent client recently diagnosed with hepatitis. The client moved back to the parent's home. Which recommendation to the client's parents will best prevent them from acquiring hepatitis B (HBV)?
A) Avoid contaminated water.
B) Obtain post exposure prophylaxis.
C) Abstain from alcohol.
D) Refuse to donate blood.
Question 1059

A nurse working at a burn center is caring for a client with an electrical burn. According to the American Burn Association, how would this burn be classified?
A) Minor  
B) Significant  
C) Moderate  
D) Major

Question 1060

The nurse instructs a client with chronic renal disease on the prescribed medication furosemide (Lasix). Which client statement indicates that teaching has been effective?
A) "This medication will make sure I have enough red blood cells in my body."  
B) "I will take this pill to keep my protein level in my body stable."  
C) "I will take this medication to keep my calcium balance normal."  
D) "This pill will reduce the swelling in my body and get rid of the extra potassium."

Question 1061

The nurse educator is teaching a group of student nurses regarding the various layers of the heart. Which statements will the educator include? Select all that apply.
A) "The endocardium is the muscular layer of the heart that contracts during each heartbeat."  
B) "The outermost layer of the heart is the epicardium."  
C) "The myocardium consists of myofibril cells."  
D) "The myocardium has four layers."  
E) "The endocardium covers the entire heart and great vessels."

Question 1062

After discussing advance directives during a home visit, an older adult client decides to prepare documents for future care needs. Which actions by the nurse are appropriate in this situation? Select all that apply.
A) Telling the client it is not necessary to make decisions about health care needs in the future  
B) Telling the client that changes to the advance directive can be made at any time  
C) Educating the client about the purpose and types of life-sustaining measures  
D) Giving a copy of the advance directives to the client's adult children  
E) Having the client name an individual to be responsible for care decisions

Question 1063

The nurse instructs a client with a history of acute respiratory acidosis and lung infections on ways to prevent further episodes of the health problem. Which client statement indicates that teaching has been effective?
A) "I will receive the annual influenza vaccination."  
B) "I will take prescribed antibiotics until my symptoms subside."  
C) "I will limit my intake of bananas and oranges."  
D) "I will limit drinking alcohol to the evening hours only."

Question 1064

An older adult client tells the nurse, "I am worried about how I will pay for my hospital bill." The client is being discharged, is being referred to home health care, and the new plan of care involves extremely expensive drugs. Which response by the nurse is appropriate?
A) "Don't worry. I'm sure everything will work out okay."  
B) "You need to focus on recovering and not worry about finances."  
C) "I'll have someone from the business office come and set up your payment plan."  
D) "Much of your care will be covered by Medicare."
Question 1065

A client's stroke volume (SV) is 85mL/beat and the heart rate (HR) is 71 beats per minute. What is the client's cardiac output (CO) rounded to the nearest whole number?


Question 1066

The nurse is assigned to care for a child in a spica cast for a fractured femur suffered in an automobile accident. The child's father was driving the car, which was badly damaged. In assessing the family, the nurse learns that the father just recently lost his job and the mother has been working through a "temp" agency. Which nursing diagnosis is most appropriate for this family?

A) Impaired Social Interaction (parent and child) related to the lack of family or respite support
B) Caregiver Role Strain related to a child with a disability and the associated financial burden
C) Disabled Family Coping related to the effects of multiple simultaneous stressors
D) Interrupted Family Processes related to child with a significant disability requiring alteration in family functioning


Question 1067

The nurse is caring for a client who is reporting pain of 8/10 on a 1 to 10 numeric pain scale. The nurse administers the prescribed pain medication. When the nurse re-evaluates the client one hour later, the client is still reporting pain of 8/10. Which action by the nurse is appropriate at this time?

A) Include in the nursing report that the medication is ineffective.
B) Report to the healthcare provider by telephone.
C) Increase the dosage of the medication.
D) Wait for the healthcare provider to make rounds to report the problem.


Question 1068

The nurse identifies the nursing diagnosis of grieving as appropriate for the family of a terminally ill client. Which family behavior supports this diagnosis?

A) The family members state that they cannot care for the client at home.
B) Some family members state they cannot go on with life.
C) The family is tearful and sad during visits with the client.
D) The family members are crying out loud and wringing their hands during visits.


Question 1069

The nurse is assessing a client being treated for congestive heart failure (CHF). Which physical findings would indicate that the client's condition is not improving? Select all that apply.

A) Wheezing of breath sounds in all lobes
B) Moderate amount of clear, thin mucus
C) Temperature of 98.6°F (37°C)
D) Urine output 160 ml over 8 hours
E) Pulse oximetry reading of 96%


Question 1070

The nurse is caring for a client with chronic renal disease who is pale and experiencing fatigue. The nurse attributes these symptoms to anemia secondary to chronic renal disease. The client's spouse asks why the client is anemic. Which response by the nurse is the most appropriate?

A) "Your spouse has a genetic tendency for the development of anemia."
B) "The increased metabolic waste products in the body depress the bone marrow and cause anemia."
C) "The client is not eating enough iron-rich foods which is causing anemia."
D) "There is a decreased production by the kidneys of the hormone erythropoietin which is the cause of anemia."


Question 1071

The professional development courses are offered on every shift so all nurses will have an opportunity to participate. Which is the role of the staff nurse during these courses?

A) Offering support to one another
B) The ability to trade shifts with one another  
C) Providing peer feedback  
D) Identifying strengths and areas of improvement  

Question 1072  
The school nurse is planning a teaching session with the parents of students to reduce the spread of the flu virus throughout the school. What should the nurse include when teaching the parents of a diverse population about infection-control techniques? Select all that apply.  
A) Sanitizing high-touch items to kill pathogens  
B) Safe food preparation and storage  
C) "Cover your cough" education  
D) Withholding immunizations for children with compromised immune systems  
E) Appropriate hand hygiene  

Question 1073  
A client admitted with smoke inhalation injuries develops signs and symptoms of acute respiratory distress syndrome (ARDS). The nurse anticipates the healthcare provider will prescribe which course of action with regard to oxygen therapy?  
A) Oxygen via a venturi mask  
B) Oxygen via a nasal cannula  
C) Oxygen via a facial mask  
D) Mechanical ventilation  

Question 1074  
The nurse is instructing a pregnant adolescent client on how the baby’s condition is evaluated during labor. Which client statement indicates appropriate understanding of the information presented?  
A) "During labor, the nurse will assess the baby’s heart rate with an electronic fetal monitor.”  
B) "During labor, the nurse will look at the color and amount of bloody show that I have.”  
C) "During labor, the nurse will verify that my contractions are strong but not too close together.”  
D) "During labor, the nurse will check my cervix by doing a pelvic exam every two hours.”  

Question 1075  
A client with Graves disease requests that the nurse discuss the results of laboratory tests with the client. Which statements would the nurse include? Select all that apply.  
A) "Your thyroid antibodies test is increased.”  
B) "Your TSH level is increased.”  
C) "Your T3 uptake is decreased.”  
D) "Your serum T4 is decreased.”  
E) "Your serum T3 is increased.”  

Question 1076  
A novice nurse attends a lecture regarding risk management. Which action should the nurse implement to reduce risks in practice?  
A) Storing unused equipment in the halls of the unit  
B) Purchasing liability insurance  
C) Not discussing errors made  
D) Questioning every order that the physician writes  

Question 1077  
The nurse has been invited to present a program at the local parent-teacher association (PTA) meeting on recognizing and preventing illness in children. Which symptoms of urinary tract infections in preschool age children should the nurse include? Select all that apply.  
A) Dysuria  
B) Headache  
C) Fever  
D) Elevated blood pressure
Question 1078

A young adult female student is brought into the emergency department by her roommate. The roommate says, “She came home from a party at her boyfriend’s house and said that he raped her.” Which techniques are appropriate when assessing this client? Select all that apply.

A) Ask her if she has ever had a sexually transmitted infection.
B) Inquire how many sexual partners she has had.
C) Offer to use a rape evidence collection kit.
D) Ask her if she led her boyfriend on in any way.
E) Assess for the presence of an intact hymen.

Question 1079

A client is being treated with blood transfusions for a large peptic ulcer in the duodenum. Which information in the client's history should the nurse suspect as causing this health problem?

A) Allergies to penicillin and morphine sulfate
B) Six weeks postoperative cataract extraction with lens implant
C) History of chronic atrial fibrillation
D) Daily medications include naproxen sodium and warfarin (Coumadin).

Question 1080

A nurse mistakenly gives a client, who is NPO for surgery, a morning breakfast tray. After realizing the mistake, the nurse notifies the healthcare provider as well as the client; explains the consequences of this mistake, which includes a delay in the client's surgery; and documents the situation in the client's medical record. Which is demonstrated by the actions of this nurse?

A) Human dignity
B) Social justice
C) Accountability
D) Reliability

Question 1081

The nurse is determining psychosocial risk factors for a family prior to planning care. Which assessment tool should the nurse use when initially screening families for these health risks?

A) The Family Ecomap
B) The Home Observation for Measurement of the Environment (HOME)
C) The Family APGAR
D) The Friedman Family Assessment Tool

Question 1082

A client having difficulty sleeping asks the nurse what the complications of sleep deprivation might be. Which topic will the nurse include when responding to the client?

A) Fatigue occurring at night
B) Development of Alzheimer's disease
C) Auditory hallucinations
D) Improved wound healing

Question 1083

The nurse is creating a four-column plan of care for a client. For which areas should the nurse prepare to document when creating this care plan? Select all that apply.

A) Medications
B) Interventions
C) Nursing diagnosis
D) Goals
E) Evaluation
### Question 1084

A client admitted with the diagnosis of cardiomyopathy becomes short of breath with ambulation and eating, and fatigued with routine care activities. Which nursing diagnosis does the nurse include in the client's plan of care?

- A) Deficient Knowledge
- B) Activity Intolerance
- C) Self-Care Deficit
- D) Imbalanced Nutrition: Less than Body Requirements


### Question 1085

A client is evaluated after suffering severe burns to the torso and upper extremities. The nurse notes edema at the burned areas. Which best describes the underlying cause for this manifestation?

- A) Decreased osmotic pressure in the burned tissue
- B) Inability of the damaged capillaries to maintain fluids in the cell walls
- C) Increased fluids in the extracellular compartment
- D) Reduced vascular permeability at the site of the burned area


### Question 1086

A client has a nighttime cough related to taking enalapril (Vasotec). Which nursing intervention is most appropriate to promote rest for this client?

- A) Contact the healthcare provider for a prescription for a cough-suppressant medication.
- B) Have the client sleep on 2 or 3 pillows at night.
- C) Have the client sit up at an 80° angle in a comfortable chair at night.
- D) Contact the healthcare provider for a prescription for a sedative-hypnotic medication.


### Question 1087

A nurse working in an outpatient primary care clinic is caring for a client with asthma who has an 80 pack-year smoking history. When assessing the client's current use of nicotine, which question is most appropriate?

- A) "Have you tried a nicotine patch for quitting smoking?"
- B) "Do you smoke upon waking?"
- C) "Tell me about any attempts you've made to quit using nicotine."
- D) "Do you smoke cigarettes with filters or without?"


### Question 1088

A nurse is caring for a client with schizophrenia. The client asks the nurse what causes the disease. Which response indicating the pathophysiology and etiology of the disease is appropriate by the nurse?

- A) "Reduced blood flow to the thalamus interferes with the brain's filter, turning the normal flow of sensory information into an overload."
- B) "Genetics do not seem to factor into the cause of the disease."
- C) "There is an increased number of nicotinic receptors in the hippocampus, which makes it harder to form new memories and interpret sensory stimuli."
- D) "The ventricles and sulci of the brain are decreased in size."


### Question 1089

The nurse is providing care to a client who is exhibiting clinical manifestations of bipolar disorder. Which assessment findings support that the client is at an increased risk for this disorder? Select all that apply.

- A) Currently employed
- B) Mother diagnosed with bipolar disorder
- C) Works out at the gym every week
- D) Recent major life-altering event
- E) Blood pressure 120/80 mmHg

Question 1090

Which finding would indicate that treatment for a client with obsessive-compulsive disorder is effective?

A) While walking, the client counts 13 steps and then reverses the direction and repeats the process.  
B) The client conducts ritualistic hand washing every hour.  
C) The client folds and refolds clothing in a drawer before each meal.  
D) The client watches television while eating meals and engages in conversation with a roommate.  


Question 1091

The nurse on the hospital research committee is assigned the task of reviewing literature on the impact of an electronic medical record when documenting client care. Which action will allow the nurse to find the most appropriate information for this study?

A) Seek journals in the nursing library.  
B) Use Google to search for information.  
C) Access bibliographic databases online.  
D) Look for articles at the medical library.  


Question 1092

The nurse is discussing postoperative care with a client scheduled for Roux-en-Y gastric bypass surgery. Which client statement indicates that learning goals for this client have been met?

A) "Maintaining protein intake will be a priority in my recovery diet."  
B) "I will need to take daily vitamin and mineral supplements."  
C) "The foods I am allowed to eat gradually will be increased."  
D) "I will initially take in only liquids, such as low-sugar juices."  


Question 1093

A client with chronic pain from herniated intervertebral disks is experiencing constipation. What intervention would be appropriate for this client?

A) Encourage fluid intake of 2,500-3,000 ml each day.  
B) Restrict foods high in fiber.  
C) Avoid the use of stool softeners.  
D) Medicate for pain around the clock.  


Question 1094

The nurse client advocate wants to teach staff nurses how to implement client advocacy in daily practice. Which value, which is basic to client advocacy, should the nurse advocate use to begin the teaching session with the staff nurses?

A) The client is a holistic, autonomous being who has the right to make choices and decisions.  
B) The client is a dependent being who has the right to expect the nurse to solve all healthcare needs.  
C) The client has the right to refuse care.  
D) The nurse has the responsibility to ensure the client’s spirituality is respected.  


Question 1095

The nurse is planning care for a client with esophageal cancer due to years of nicotine abuse. Which is the priority nursing diagnosis for this client?

A) Decisional Conflict  
B) Situational Social Isolation  
C) Ineffective Airway Clearance  
D) Disturbed Body Image  


Question 1096

The nurse is providing care for a client who is experiencing subjective symptoms of carpal tunnel syndrome. Which action by the nurse is appropriate when performing the physical assessment for this client?

A) Ballottement test  
B) McMurray’s test
Question 1097
A parent says to the nurse, "I think my son is showing signs of obsessive-compulsive disorder, just like my father." Which risk factors in the client's medical history would support this diagnosis? Select all that apply.
A) Unemployed
B) Lives with parents
C) Male gender
D) Family history
E) History of chronic illnesses

Question 1098
An older adult client with heart failure is experiencing activity intolerance due to dyspnea on exertion. Which nursing intervention is a priority for the client?
A) Delegate care for the client to an aide.
B) Complete all nursing care at the end of the shift.
C) Complete all nursing care in the morning.
D) Pace nursing care throughout the shift.

Question 1099
A client is prescribed fluoxetine (Prozac) for treatment of obsessive-compulsive disorder. During the latest office visit, the client washes the hands while counting to 10 and repeats the process every 5 minutes. Which is the priority assessment for the nurse to complete for this client?
A) The amount of medication the client is taking
B) Whether the client is taking the medication as prescribed
C) Side effects from the medication the client is experiencing
D) Foods that may be interacting with the client's medication

Question 1100
The nurse is participating on a local council as an advisor regarding community needs during an emergency. Which recommendation regarding community needs during an emergency response does the nurse include when advising the council?
A) A coordinated response to emergencies.
B) The identification of potential hazards to the community.
C) A comprehensive disaster plan.
D) Programs to restore the community.

Question 1101
The postoperative recovery room nurse determines that a client in the postoperative phase of care can be transitioned to Phase II of recovery. The client is able to take deep breaths and cough, is using oxygen to maintain a saturation of greater than 90%, is fully awake, has a systolic blood pressure that is 130 mmHg now but the preoperative systolic blood pressure was 100 mmHg, and is able to move all four extremities independently. Using the following scale, this client's Aldrete score is ________.
The Aldrete score
Respiration
2 = Able to take deep breath and cough
1 = Dyspnea/shallow breathing
0 = Apnea
O2 Saturation
2 = Maintains > 92% on room air
1 = Needs O2 inhalation to maintain O2 saturation > 90%
0 = Saturation < 90% even with supplemental oxygen
Consciousness
2 = Fully awake
1 = Arousable on calling
Question 1102

The nurse is teaching a class to prospective parents about the roles that ribonucleic acid (RNA) and deoxyribonucleic acid (DNA) play in the development of the human fetus. Which statements made by the parents indicate understanding of the teaching? Select all that apply.

A) "DNA molecules form the genetic material."
B) "RNA is the messenger that carries DNA to the ribosomes."
C) "DNA plays a role in protein synthesis in our bodies."
D) "RNA will determine what color eyes my baby has."
E) "DNA is outside the nucleus of the cell."


Question 1103

The nurse, who works in a large urban high school, provides programs on nutrition, smoking cessation, and the prevention of sexually transmitted infections (STIs). Which areas of nursing competence is this nurse demonstrating? Select all that apply.

A) Illness prevention
B) Health and wellness promotion
C) Health restoration
D) Caring for the dying
E) Care cost savings


Question 1104

The nurse is planning care for a client whose waist circumference is 48 inches and height is 5 feet, 2 inches. Based on this data, which topics are appropriate for the nurse to include in the client teaching? Select all that apply.

A) Type 2 diabetes mellitus
B) Osteoarthritis
C) High blood pressure
D) Heart disease
E) Chronic lung disease


Question 1105

The nurse is providing care to a client experiencing the acid-base balance of respiratory acidosis. Which effects does the nurse anticipate based on this diagnosis? Select all that apply.

A) Vasoconstriction
B) Decreased intracranial pressure (ICP)
C) Increased CO2
D) Decreased O2
E) Increased pulse rate


Question 1106

The nurse is evaluating the following goal: Client will select low-fat foods from a list by the end of the month. The client, who has different beliefs about food, has not been able to achieve this goal. Which action by the nurse is appropriate?

A) Extend the time frame and give the client a longer period to achieve the goal.
B) Make sure that the client understands the importance of the goal.
C) Select a different goal.
D) Modify the plan of care to be consistent with the client's beliefs regarding food.
Question 1107

The nurse is caring for a client who has a foot wound that is not healing appropriately. How will accessing the clinical decision support (CDS) system help with this client's care?
A) Allows the nurse to view options from experts
B) Points the nurse in the next direction
C) Makes the decision for the next step
D) Facilitates available medical research


Question 1108

A client who has just been diagnosed with diabetes mellitus is being instructed by the nurse regarding diet and exercise. Which client statements indicate that further teaching is required? Select all that apply.
A) "I should talk to the doctor about an exercise program."
B) "I don't need to watch my diet as long as I take my insulin."
C) "I should eat a candy bar when my energy is low."
D) "I will test my blood sugar before meals and at bedtime."
E) "I need to limit the amount of fat in my diet."


Question 1109

An older adult client comes into the clinic for a pneumonia vaccine. During the client interview, the client seems to have mild difficulty with several words and has problems remembering the nurse's name. The client is alert and oriented to time, person, and place and most responses seem appropriate. How should the nurse describe this client's cognitive changes?
A) Indicators of depression in the elderly
B) Early symptoms of dementia
C) Memory impairment that may be related to cerebral ischemia
D) Normal signs of aging


Question 1110

A hospice nurse is caring for a client who has been given 6 months to live. Which nursing intervention would address the anxiety of the client and family associated with receiving a terminal diagnosis?
A) Explore the client and family's history with other stressful life events and how successful coping was at that time.
B) Teach the family that while talking with the client about death and dying is permissible, they should not allow the client to dwell on death.
C) Supply information about the client's disease process and the expected trajectory of death only on a need-to-know basis.
D) Encourage early pharmaceutical intervention with anti-anxiety and sedative medications to ease the grieving process.


Question 1111

The nurse is teaching an older adult client, and caregiver, regarding appropriate ways to decrease the client's risk for falls. Which interventions are appropriate for the nurse to include in the teaching session?
Select all that apply.
A) Wear socks when walking in the kitchen.
B) Make sure hallways and stairways have adequate lighting, even at night.
C) Encourage the use of throw rugs throughout the home.
D) Wear sensible shoes with good support when shopping.
E) Start aerobic exercises daily.


Question 1112

The nurse is planning a teaching seminar for a group of young adult clients who are at risk for obesity. What statement should the nurse include in the program for this group?
A) The obese client will eventually be bulimic.
B) There are drugs that are good to use to reduce weight.
C) Proper diet and exercise programs
D) Obesity puts the client at risk for anorexia nervosa.
Question 1113
An adult client and spouse are seen in an urgent care clinic. The client presents with a temperature of 102°F, complains of nausea, and has experienced vomiting and diarrhea for 12 hours. The nurse notes that the client's mucous membranes are pale and dry. Which action by the nurse is the most appropriate?
A) Assess skin turgor.
B) Administer IV fluids.
C) Assess for pedal edema.
D) Ask the spouse for more information.

Question 1114
The nurse is preparing to discharge a client with congestive heart failure on furosemide (Lasix). The nurse determines that teaching has been effective if the client makes which statement?
A) "I will take antacids only for my gastric discomforts."
B) "I will use only sodium bicarbonate as my antacid."
C) "I will use potassium supplements while I am taking Lasix."
D) "I will restrict my intake of fluids."

Question 1115
The public health nurse is conducting a nutrition seminar to educate individuals within the community. When discussing nutritional intake as a modifiable risk factor, which disease processes will the nurse include in the session? Select all that apply.
A) Atherosclerotic heart disease
B) Certain cancers
C) Hypertension
D) Ulcerative colitis
E) Osteoporosis

Question 1116
During a mass casualty event, the demand for nursing skills increases and calls for which implementation?
A) Assessment skills
B) Collaboration with primary caregivers
C) Triage skills
D) Reverse triage

Question 1117
The nurse is planning care for a client with acute myeloid leukemia (AML). Which diagnoses are priorities for this client to minimize the risk of complications associated with AML? Select all that apply.
A) Ineffective Thermoregulation
B) Fluid Volume Excess
C) Risk for Infection
D) Imbalanced Nutrition
E) Risk for Ineffective Protection (Bleeding)

Question 1118
The nurse is caring for a client who is undergoing diagnostic tests to rule out lung cancer. The client asks the nurse why a computed tomography (CT) scan was ordered. What is the best response by the nurse?
A) "Why are you concerned about this test?"
B) "It is more specific in diagnosing your condition."
C) "The doctor prefers this test."
D) "To rule out the possibility that your problems are caused by pneumonia."
Question 1119

The nurse is planning care for a client with an uncorrectable hearing loss. Which strategies for communication should the nurse add to the client’s plan of care? Select all that apply.

A) Total communication  
B) Hearing aids  
C) Magic slate  
D) Cued speech  
E) Sign language


Question 1120

The nurse is planning care for a client with a head injury and increased intracranial pressure (ICP) from a motor vehicle crash. Which intervention is a priority for this client?

A) Controlling pain  
B) Ensuring adequate oxygenation  
C) Maintaining a calm environment  
D) Monitoring for nausea and vomiting


Question 1121

Which nursing interventions would be appropriate for a client demonstrating acute anxiety related to posttraumatic stress disorder? Select all that apply.

A) Give the client paperwork to complete while waiting to be assessed.  
B) Encourage the client to discuss what caused the syndrome to develop.  
C) Provide a calm, quiet environment.  
D) Reassure the client that the environment is safe.  
E) Ask the client what is causing the anxiety.


Question 1122

The nurse is caring for an adolescent with bipolar disorder who has expressed the desire to harm self. What is the priority nursing diagnosis for this client?

A) Risk for Suicide  
B) Impaired Social Interaction  
C) Social Isolation related to disorder  
D) Powerlessness related to mood instability


Question 1123

A nurse on the behavioral health unit is leading a group regarding risk factors for anxiety. At the completion of group work, which comment made by a client would indicate the need for further teaching?

A) "A lack of social interaction places me at risk for anxiety."  
B) "Chronic illness is not a risk factor unless I am also unemployed."  
C) "I experienced a traumatic event that placed me at risk for having this anxiety disorder."  
D) "My personality could place me at risk for anxiety because I am shy."


Question 1124

A nurse is assessing a client to determine level of wellness. The client practices yoga for relaxation several times a week, follows a nutritionally sound diet, and has a supportive, sound relationship with a spouse and several children. Based on this data, which does this client exemplify?

A) An emergent high level of wellness in a favorable environment.  
B) An emergent high level of wellness in an unfavorable environment.  
C) Protected poor health in a favorable environment.  
D) A high level of wellness in a favorable environment.

Question 1125

The nurse is sitting in on an Alcoholic Anonymous (AA) meeting clients on a behavioral health unit. Which decision-making methods used by the group indicates the group is functioning effectively? Select all that apply.
A) The discussion focuses on all problems brought by group members.
B) The group atmosphere is positive.
C) The group listens to the ideas of certain group members.
D) The expertise of group members is being used.
E) Members feel satisfied with their participation.

Question 1126

A client is experiencing health problems related to alterations in adrenal medulla function. On which areas should the nurse focus when assessing this client? Select all that apply.
A) Heart rate
B) Skin integrity
C) Respiratory rate
D) Weight
E) Blood pressure

Question 1127

A client being discharged after treatment for nephritis is concerned about having adequate stamina to care for the children after discharge. Which statement made by the nurse would be most appropriate to address the client's concern?
A) "Maybe your children should go and stay with a relative or neighbor for a few weeks."
B) "You will be able to keep up with your family's needs once you return home."
C) "It sounds like you need some help, so I'll contact Social Services for support."
D) "Tell your spouse he has to help you."

Question 1128

The nurse is preparing to teach a client with type 1 diabetes mellitus on the mechanism behind the development of ketoacidosis. List the order in which the nurse should provide this information.
1. Production of lactate and hydrogen ions
2. Tissue hypoxemia
3. Breakdown of fatty tissue
4. Reduction in intracellular glucose
5. Fatty acids converted to ketones

Question 1129

The nurse is caring for a thin, older adult client who is diagnosed with cancer and is receiving aggressive chemotherapy. The client is experiencing severe side effects from the therapy and has lost 10 pounds in the past week. What should the nurse teach the client to do? Select all that apply.
A) Drink liquid supplements to increase intake of nutrients.
B) Purchase fast foods and prepared foods.
C) Eat large frequent meals high in calories.
D) Eat cold foods rather than hot foods, because they are better tolerated.
E) Keep a food diary and record intake.

Question 1130

A client diagnosed with a sexually transmitted infection reports having "no idea" how the illness was contracted. Which nursing diagnosis would be appropriate for the client at this time?
A) Sexual Dysfunction
B) Ineffective Coping
C) Knowledge Deficit
D) Anxiety
### Question 1131

The nurse is teaching a client with cellulitis about ways to avoid future infections. Which client statements indicate that teaching has been effective? Select all that apply.

A) "I will contact the doctor if I have a temperature of 99.5°F or higher."
B) "I should use antibiotic soap to cleanse the wounds."
C) "I should eat a lot of rice to increase my intake of vitamin C."
D) "I can stop taking the antibiotics when the swelling subsides."
E) "I will not swim in lakes."


### Question 1132

A medication error occurred and the nurse is preparing to complete an incident report. Which information is required to thoroughly complete this report? Select all that apply.

A) Medication involved in the incident
B) Name of client involved in the incident
C) Number of hours the nurse was at work before the incident occurred
D) Location where completion of an incident report is located in the medical record
E) Date and time of the incident


### Question 1133

The nurse is teaching a 34-year-old client with a history of breast cancer about early screening for the health problem. Which should the nurse include in this teaching? Select all that apply.

A) Reporting of any changes in breast tissue to the health provider at the next routine visit
B) Clinical breast examination every 3 years
C) Routine monthly breast self-examination
D) Annual screening mammography
E) Routine breast exams to begin after age 35


### Question 1134

While performing an endocrine assessment on a client suspected of having Cushing disease, the nurse asks if the client has experienced recent weight changes. Which portions of the endocrine systems is the nurse assessing? Select all that apply.

A) Adrenal gland
B) Pituitary gland
C) Gonads
D) Thyroid gland
E) Parathyroid gland


### Question 1135

The nurse educator is developing a seminar to help children who have experienced a loss. Which information should the nurse include to help these children adapt?

A) Explain that magical thinking helps with the pain.
B) Help create new memories.
C) Remind the child that big children don't cry.
D) Pretend that the individual has not really gone.


### Question 1136

A nurse conducted a safety class for a group of older adult clients in the community on fall prevention. Which client action during a follow-up visit in the home indicates understanding of the information presented?

A) Non-slip strips have been installed in the shower.
B) All meats have been placed in the freezer.
C) Scatter rugs have been placed in the kitchen.
D) The locks on all the doors have been changed.

Question 1137
A nurse is caring for a client who displays addiction behavior toward the use of alcohol. The client states to the nurse, “I have been in jail twice for driving under the influence.” When planning care for this client, which behavioral therapy is most appropriate?
A) Negative reinforcement
B) Negative punishment
C) Positive punishment
D) Positive reinforcement

Question 1138
The nurse working in the newborn nursery understands that a newborn has differences in sleeping patterns than an older child or an adult. Which sleep pattern is not expected during the newborn period?
A) NREM sleep is also called quiet sleep during the newborn period.
B) REM sleep occurs gradually.
C) An irregular sleep schedule, sleeping 16-18 hours a day.
D) NREM sleep is characterized by regular respirations, closed eyes, and the absence of body and eye movements.

Question 1139
A client is prescribed enalapril (Vasotec) for treatment of heart failure. Which assessment finding should cause the nurse concern following the initial administration of this drug?
A) Irregular pulse
B) Low blood pressure
C) Ototoxicity
D) Serious rash

Question 1140
A student nurse is learning about the physiology of the nervous system and its relationship to cognition. What structure plays a role in memory formation?
A) Hippocampus
B) Cerebrum
C) Neuron
D) Neurotransmitter

Question 1141
The nurse is evaluating the care of a client with Parkinson disease (PD). Which finding indicates an improvement in nutritional status?
A) The client was observed providing morning self-care and dressing.
B) The client coughs frequently when drinking fluids.
C) The client had a 4-pound weight loss in 1 week.
D) The client was able to feed self and had no weight change in 1 week.

Question 1142
A novice nurse has accepted a position on a medical-surgical unit at a local university hospital. In order to provide safe care to clients, the nurse should plan to develop which competency?
A) Creating a culture of trust within the hospital
B) Reporting families for bringing food to the client's room
C) Promoting appropriate values that clients should adopt
D) Functioning as a member of the healthcare team

Question 1143
The nurse is conducting a physical assessment for a client with a compromised immune system. Which actions by the nurse are appropriate? Select all that apply.
A) Recommending increased fluid intake
B) Checking joint range of motion (ROM), including that of the spine
C) Inspecting the mucous membranes of the nose and mouth for color and condition
D) Palpating the cervical lymph nodes for evidence of lymphadenopathy or tenderness
E) Assessing general appearance

**Question 1144**

A client is admitted to the emergency department after overdosing on phencyclidine piperidine (PCP). Based on this actions, which actions are appropriate by the nurse? Select all that apply.
A) Administer ammonium chloride.
B) Induce vomiting.
C) Initiate seizure precautions.
D) Initiate an IV.
E) Obtain materials to assist with lavage.

**Question 1145**

The nurse is providing care to a client diagnosed with celiac disease who experiences frequent diarrhea. Based on this data, the nurse anticipates the client may also experience which associated problems? Select all that apply.
A) Lifestyle issues
B) Sexual dysfunction
C) Skin breakdown
D) Fluid and electrolyte imbalance
E) Hair loss

**Question 1146**

A nurse is caring for a client who is postoperative from cataracts surgery. For which eye injury is this client most at risk following cataracts surgery?
A) Penetrating injury
B) Blunt trauma
C) Retinal detachment
D) Perforating injury

**Question 1147**

The nurse caring for an adult client in the intensive care unit (ICU) is given a verbal prescription by a first-year medical resident. The nurse determines that the best course of action is to check with the attending healthcare provider before implementing the prescription. Which is the rationale for why the nurse is experiencing conflict regarding this situation?
A) The nurse may not trust the resident to make the best care decisions.
B) The resident seems unsure of the prescription.
C) The nurse does not like first-year residents.
D) The nurse only takes prescription from attending healthcare providers.

**Question 1148**

A nurse is caring for a client who smokes cigarettes and asks the nurse about nicotine replacement therapy (NRT). Which statement regarding this product is appropriate for the nurse to include in the teaching session?
A) "NRT does not address addictive behavior."
B) "Over-the-counter (OTC) NRTs include transdermal patches, gums, nicotine inhalers, and nasal sprays."
C) "NRT helps to relieve the psychological and physiological effects of nicotine withdrawal."
D) "Combining the use of NRT and a smoking cessation program is no more effective than NRT use alone."

**Question 1149**

The nurse is planning care for a female adult client who is high-risk for developing osteoporosis. Which interventions will decrease the client's risk of developing this health problem? Select all that apply.
A) Isometric exercise for at least 30 minutes three times per week
B) Weight-bearing exercises such as walking
C) Having a yearly bone mineral density (BMD) test
D) Increasing the intake of alcoholic beverages
E) A diet with adequate amounts of calcium and vitamin D

Question 1150
A client with prostate cancer is being discharged from the hospital. Which educational topic is inappropriate for this client?
A) Stress the importance of keeping client appointments with healthcare providers.
B) Provide information on doses of complementary herbs.
C) Teach the client and his family noninvasive methods of pain control.
D) Provide the client and the client’s family information on support groups.

Question 1151
An adolescent client diagnosed with leukemia decides to stop chemotherapy treatments. The parents of the client, however, want the healthcare team to continue all treatments as necessary. Which action by the nurse is appropriate when providing care to this client and family?
A) Confronting the parents and telling them not to be “selfish” in their child’s time of need
B) Calling the authorities immediately
C) Obtaining a court order to determine the client legally able to make his or her own decisions
D) Helping the family by providing information and allowing them to voice concerns

Question 1152
A nurse is caring for a 50-year-old client performing aerobic exercise in the cardiac rehabilitation office. The nurse calculates the client’s target heart rate as ________-________.

Question 1153
A client is diagnosed with acute allergic contact dermatitis over 25% of the body. Which prescription does the nurse anticipate for the client?
A) Oral steroids for 7 to 10 days
B) Calamine lotion to affected skin area as needed
C) Cool compresses with Burow’s solution twice a day
D) Topical steroids applied twice a day for 2 to 3 weeks

Question 1154
A client with a long history of type 2 diabetes mellitus complains of occasional cold and numb hands and feet. Based on this data, which diagnosis does the nurse anticipate?
A) Pancreatitis
B) Peripheral neuropathy
C) Low blood glucose level
D) High blood glucose level

Question 1155
The nurse is conducting a class for a group of expectant mothers regarding basic infant care techniques. Upon completion of the class, what should the nurse expect the participants to do?
A) Review the major points of the class.
B) Set goals for the next class session.
C) Pass a written test on how to bathe a newborn infant.
D) Provide a return demonstration of a bath on a newborn doll.

Question 1156
The postpartum client states that she cannot understand why she does not enjoy being with her baby. Based on this data, which does the nurse
suspect the client is experiencing?
A) Postpartum infection
B) Postpartum psychosis
C) Postpartum depression
D) Postpartum blues

Question 1157
A client is receiving intravenous nitroprusside (Nipride) for shock. Which adverse reactions will the nurse assess this client for when administering the infusion? Select all that apply.
A) Muscle spasms
B) Disorientation
C) Gastrointestinal bleeding
D) Confusion
E) Tachycardia

Question 1158
The nurse receives a notice that the state board of nursing has become a member of the Nurse Licensure Compact. How would this change in the state board of nursing structure influence the nurse's ability to practice nursing? Select all that apply.
A) The nurse can practice nursing in other states within the compact.
B) The nurse has to obtain an additional license.
C) The nurse is accountable to the state in which the nurse and clients reside.
D) The nurse can only practice nursing in the residing state.
E) The nursing license will become similar to having a driver's license.

Question 1159
The nurse has identified the diagnosis Disturbed Sensory Perception: Auditory for a client. Which intervention would be the most appropriate for this client?
A) Use facial expressions or gestures when talking.
B) Replace batteries in hearing aids every week.
C) Use a low voice pitch with normal loudness when talking.
D) Face the client when speaking.

Question 1160
During a routine physical examination of a client's lungs, the nurse notes a small, fleshy bump on the client's upper chest. What should the nurse suspect as the cause of this finding on the client's skin?
A) Actinic keratosis
B) Squamous cell carcinoma
C) Basal cell carcinoma
D) Malignant melanoma

Question 1161
The nurse is planning to instruct a new mother on ways to prevent hypothermia in her newborn. What should this teaching include? Select all that apply.
A) Expect the baby to shiver.
B) Notice changes in the baby's respirations and take the appropriate action.
C) Keep the newborn's head covered.
D) Cover the newborn with a light sheet during afternoon naps.
E) Cover the newborn with minimal blankets when out of doors in temperatures in the 50s.

Question 1162
The nurse is caring for an older adult client who is very thin and emaciated. The client reports new onset of shortness of breath. A chest x-ray reveals a spot on the lungs that the physician believes is an inoperable lung cancer. Due to the client's poor nutritional status, chemotherapy is not an option.
The health care provider also believes that the location of the cancer would make radiation therapy unsuccessful. In advocating for this client, what should the nurse encourage the healthcare team to do?

A) Provide palliative care to keep the client comfortable without diagnostic testing.
B) Determine the client's and family's wishes regarding diagnostic testing.
C) Promote the use of blood tests to diagnose the suspected cancer.
D) Perform any procedure necessary to diagnose the client properly.


Question 1163

The client's family says, "We don't understand what is happening to Dad. He becomes very agitated in the evenings, cussing like a sailor." When responding to the family, which phenomenon will the nurse include?

A) Psychosis
B) Delirium
C) Anxiety
D) Sundown syndrome


Question 1164

The son of a client with fibromyalgia asks the nurse if he will also experience the health problem. Which responses by the nurse are appropriate for this situation? Select all that apply.

A) Only people age 20-50 develop fibromyalgia.
B) Fibromyalgia is more prominent in women.
C) Having a family member with fibromyalgia increases the risk of developing it.
D) Fibromyalgia is caused by depression. If you are depressed, you have a greater risk of developing it.
E) If your diet is high in fatty foods, you have a greater chance of developing fibromyalgia.


Question 1165

The nurse assists with the delivery of a newborn on the labor and delivery unit. By drying the newborn immediately after birth, the nurse is protecting heat loss by which method?

A) Conduction
B) Convection
C) Radiation
D) Evaporation


Question 1166

The nurse is concerned about being sued for negligence when providing care. Which nursing actions may be grounds for negligence? Select all that apply.

A) Client name band was checked prior to providing all medications.
B) Client's morning medications were administered in the early afternoon.
C) Client states not understanding activity restrictions and wound eviscerated.
D) Client documentation did not include appearance of infiltrated IV site.
E) Client fell getting out of bed because the call light was not used.


Question 1167

A hospital in the community has been notified of a multi-car crash on the interstate that will result in the transfer of many injured clients to the hospital. As part of the emergency response, the charge nurses in the emergency department (ED) and intensive care unit (ICU) are responsible for which tasks? Select all that apply.

A) Assessing the acuity of the current clients on the unit
B) Assigning care for the clients as they are admitted to the unit
C) Assuring that there are enough pain medications available
D) Delegating staff nurses to gather needed supplies for the arriving clients
E) Notifying the operating room of the potential influx of clients needing surgery


Question 1168
The nursing student is reviewing communication techniques with the instructor. The nursing student is practicing assessment questions regarding spiritual or religious beliefs. Which questions would the nursing instructor identify as appropriate for the nursing student to ask when assessing spiritual beliefs? Select all that apply.
A) "How is your faith helpful to you?"
B) "Because you indicated you are Catholic, I suppose you fast every Friday."
C) "How will being sick interfere with your religious practices?"
D) "Are any particular religious practices important to you?"
E) "Would you like a visit from your spiritual counselor or the hospital chaplain?"

The nurse is reviewing prescriptions written for a client with chronic respiratory acidosis. Which prescription should the nurse question prior to implementation?
A) Keep head of the bed elevated to 40-degree angle.
B) Consult Respiratory Therapy for breathing treatments four times a day.
C) Dextrose 5% and 0.45% normal saline at 100 mL per hour.
D) Oxygen 4 liters per nasal cannula.

An adolescent client tells the nurse that she is going to fight recent charges of shoplifting since she was just taking what was rightfully hers. Which trait associated with personality disorders is the client exhibiting?
A) Manipulation
B) Projection
C) Narcissism
D) Lying

The adult female Iranian client develops signs and symptoms of appendicitis during the night. The client is brought to the emergency department by family. Which nursing intervention is the most culturally sensitive for this client?
A) Explain the assessment procedure and ask the family their preference.
B) Ask for a male healthcare provider to assess the client.
C) Ask the healthcare provider which one should see the client.
D) Ask for a female healthcare provider to assess the client.

While caring for a client with end-stage renal disease, the nurse tracks the client's serum albumin level. For which nursing diagnosis is the action most indicated?
A) Excess Fluid Volume
B) Risk for Infection
C) Imbalanced Nutrition: Less Than Body Requirements
D) Risk for Ineffective Perfusion

The school nurse is administering methylphenidate (Ritalin) to an adolescent is diagnosed with attention-deficit/hyperactivity disorder (ADHD). The adolescent is noncompliant with coming to the nurse's office at noon for the medication. Which does the nurse suspect as the cause of the
adolescent's noncompliance with the current medication regimen?
A) Alternative coping mechanisms to increase focus during classes have been developed.
B) The adolescent may fear that this drug may be a “gateway drug” that may lead to abusing other substances.
C) The adolescent may be embarrassed about having to take medicine at school and fear a social stigma.
D) An additional dose of medication is not needed while at school.

Question 1175
The nurse is reviewing the lab values for a client being cared for on the unit. The client’s phosphorus level is 2.0 mg/dL. Based on this data, which nursing intervention would address this client’s phosphorus level?
A) Encourage consumption of milk and yogurt.
B) Strain all urine.
C) Encourage consumption of a high-calorie carbohydrate diet.
D) Enforce contact precautions.

Question 1176
A client at 12 weeks’ gestation with her first child tells the nurse that she is concerned that her husband does not want the baby because he has a renewed interest in playing tennis and visiting with college friends after work. When responding to the client, which should the nurse take into consideration?
A) This is a normal reaction by fathers that is seen in the second trimester of pregnancy.
B) This is an atypical reaction of the father to pregnancy that should be further examined.
C) This is a normal reaction by fathers that is seen in the first trimester of pregnancy.
D) This is a normal reaction by fathers that is seen in the third trimester of pregnancy.

Question 1177
The nurse is providing care for a client with renal calculi. Which expected outcomes will the nurse include in this client’s plan of care? Select all that apply.
A) The client demonstrates a fluid intake of 800-1,000mL/day.
B) The client chooses the appropriate diet to prevent the reoccurrence of renal calculi.
C) The client is able to comfortably perform ADLs.
D) The client remains free of signs and symptoms of infection.
E) The client rates pain at a 2 on a scale of 1-10 and states that a 2 is acceptable.

Question 1178
A client asks why asthma medication is needed even though the client’s last attack was several months ago. Which response by the nurse is appropriate?
A) "The medication needs to be taken or your lungs will be severely damaged and we will not be able to prevent an acute attack.”
B) "The medication needs to be taken for at least a year; then, if you have not had an acute attack, you can stop it.”
C) "The medication needs to be taken indefinitely according to your doctor, so you should discuss this with him.”
D) "The medication is still needed to decrease inflammation in your airways and help prevent an attack.”

Question 1179
A client has a pressure ulcer on the medial malleolus. The client’s skin is intact with purple discoloration and a blood-filled blister. When documenting this finding, which terminology is appropriate for the nurse to use?
A) Partial-thickness loss of dermis
B) Suspected deep tissue injury
C) Full-thickness tissue loss
D) Non-blanchable erythema

Question 1180
A nurse would like to implement an evidence-based practice change that will influence client care on the medical-surgical unit. The nurse works with the nurse manager and other members of leadership to write a new policy and produce education for the staff and clients. The nurse is practicing which of the standards of professional performance?
Question 1181

The nurse is preparing a client for emergency surgery to repair liver and colon lacerations caused by a motor vehicle crash. Which information about this type of surgery will the nurse use to guide the client's care? Select all that apply.

A) This is an emergency surgery.
B) The client is at risk for blood loss.
C) The client is at risk for hypothermia.
D) The client will be hospitalized longer.
E) An organ is going to be removed.


Question 1182

The unit nurse educator is planning to instruct the staff on interventions to reduce the risk of infection for the client population. Which intervention is the most important to decrease client infection?

A) Wear a mask for all client care.
B) Practice appropriate hand hygiene.
C) Assess vital signs only once daily.
D) Raise the temperature in the client's room.


Question 1183

The nurse is concerned about the risk involved when implementing healthcare provider prescriptions for a newly admitted client. Which strategies should the nurse consider to reduce this risk? Select all that apply.

A) Question any order that is incomplete.
B) Question any order a client questions.
C) Question any verbal order.
D) Question any order written for a postoperative client.
E) Question any order if the client's condition changes.


Question 1184

The director of nursing at a university-based hospital is interested in assisting the nursing staff to comply with American Nurses Association (ANA) nursing research standards. Which does the director plan to establish in order to comply with the ANA standards?

A) A nursing practice council to develop a quality improvement program.
B) A nursing practice council to determine nursing performance reviews.
C) A nursing practice council for determining nursing educational needs.
D) A nursing practice council to examine current practice.


Question 1185

A nurse is admitting a client to the oncology unit. During the admission assessment, when the nurse asks the client about religious preference, the client states, "I am an atheist." The nurse is aware that the client holds which belief?

A) The client believes that the existence of God has not been proven.
B) The client believes that there is more than one god.
C) The client does not believe in any god.
D) The client believes that there is one God.


Question 1186

The nurse is developing objectives for a charter group of nurses from a national association. Which characteristics best describe the semiformal level of formality the nurse can expect when working with this type of group?

A) The structure is formal, with structured activities, leadership selection from above, and easily recognized basic objectives.
B) The structure is informal, with voluntary, selective membership and negotiable day-to-day operating standards.
C) The structure is informal, with superimposed rules and managers who are symbols of authority.
D) The structure is formal, with voluntary, selective membership and structured activities during meeting times.

Question 1187
The charge nurse working in the emergency department (ED) is preparing to receive a client with traumatic amputation of the lower left arm secondary to shark attack. The nurse assembles appropriate members of the healthcare team to be present when the client arrives with the goal of allowing the client to regain as much upper extremity function as possible. Which is the rationale for why the charge nurse assembled the entire healthcare team upon arrival to the ED?
A) Healthcare teams are made up of members of the same profession who work under one leader to achieve one goal.
B) Healthcare teams are assembled only to manage the care of extremely ill clients.
C) Healthcare teams exist only to make decisions for clients.
D) Healthcare teams utilize collaborative delivery of high-quality, interdisciplinary health services in a shared leadership role, where accountability is both individual and mutual in nature.

Question 1188
The nurse caring for a client diagnosed with chronic obstructive pulmonary disease (COPD) is educating the client on effective coughing techniques. Which statement made by the client indicates a need for further teaching?
A) "I should inhale by sniffing."
B) "I should get a flu vaccine every year."
C) "I should avoid aerosol sprays."
D) "I should limit my fluid intake to 1-1.5 quarts daily."

Question 1189
A nurse is caring for a preschool-age client who was admitted for dehydration. The child lives with the parents and maternal grandparents. In which type of family does this child reside?
A) Extended
B) Two-career family
C) Blended family
D) Traditional family

Question 1190
During a home visit, the nurse determines that care interventions are needed to address alcohol and substance abuse by family members. Which interventions should the nurse consider when planning care for this family? Select all that apply.
A) Suggest grief counseling.
B) Suggest engaging in educational activities.
C) Evaluate family members’ potential for being a danger to self or others.
D) Be alert to behaviors that indicate sibling jealousy.
E) Recommend community resources to assist with substance abuse behavior.

Question 1191
The nurse is providing care to a newborn born after 37 weeks gestation. The newborn’s weight is 1,750 g (3 pounds, 10 ounces). The head circumference and length are at the 25th percentile. What statement would the nurse use to describe these assessment findings?
A) Preterm small for gestational age, asymmetrical intrauterine growth restriction
B) Preterm appropriate for gestational age, asymmetrical intrauterine growth restriction
C) Term small for gestational age, symmetrical intrauterine growth restriction
D) Preterm appropriate for gestational age, symmetrical intrauterine growth restriction

Question 1192
After reviewing the population demographics for an urban community, the community health nurse determines that community members would benefit from teaching on types 1 and 2 diabetes mellitus in children. Which information caused the nurse to come to this conclusion? Select all that apply.
A) 60% of community families have both parents diagnosed with type 2 diabetes mellitus.
B) 25% of children between the ages of 10 and 19 are Hispanic.
C) 35% of school-age children do not routinely receive the annual flu vaccination.
D) 50% of children between the ages of 10 and 19 are African-American.
E) 75% of school-age children are raised in families where both parents are unemployed.

Question 1193

A child with an atrial septal defect (ASD) cannot have surgery without appropriate growth. Which suggestion by the nurse is most appropriate to facilitate weight gain for this child?
A) Buy the child a rocking horse.
B) Sign the child up for swimming lessons.
C) Conserve the child's energy use.
D) Take the child to the park to play on the swings.

Question 1194

While attempting to choose a nursing diagnosis, the nurse must decide whether a client is experiencing anxiety or fear. Which key point would allow the nurse to plan care based on the nursing diagnosis of Anxiety?
A) The source of fear is identifiable, but anxiety may be vague.
B) Fear results in a physiologic response, whereas anxiety is psychological.
C) Anxiety is a milder form of fear.
D) Anxiety is generally based in reality, whereas fear is not.

Question 1195

A nurse working in the emergency department is participating in the resuscitation of a client experiencing sudden cardiac death. After 5 cycles of CPR, the nurse evaluates the client's cardiac rhythm as asystole. What is the next action by the nurse?
A) Assess the cardiac monitor electrodes.
B) Assess the client's pulse.
C) Immediately defibrillate the client.
D) Administer epinephrine.

Question 1196

The nurse is completing an assessment on a newly admitted client. What finding would suggest that the client is experiencing a deep venous thrombosis (DVT)?
A) Shortness of breath after activity
B) Two-plus palpable pedal pulses
C) Bilateral calf tenderness after walking up a flight of stairs
D) Swelling in one leg with pitting edema

Question 1197

A client who was raped tells the nurse that she must not get pregnant. Which response by the nurse is appropriate?
A) "Are you sure the rapist did not use a condom?"
B) "You will not know for sure for at least a few more days."
C) "There is a medication called Plan B, which is emergency contraception."
D) "The baby could always be given up for adoption."

Question 1198

A nurse educator is working with a group of nursing students in the lab on the application of personal protective equipment (PPE). The educator emphasizes the importance of appropriate technique when removing the face mask. Which response by the students indicates understanding of the information presented?
A) "I will tie the strings in a bow."
B) "I will bend the strip at the top of the mask."
C) "I will loop the ties over the ears."
D) "I will touch the mask by the strings only."
Question 1199

The nurse is analyzing the client’s arterial blood gas report, which reveals a pH of 6.58. The client has just suffered a cardiac arrest. Which consequences of this pH value does the nurse consider for this client?

A) Decreased cardiac output  
B) Increased myocardial contractility  
C) Decreased free calcium in the ECT  
D) Increase magnesium levels  


Question 1200

An experienced delegator is mentoring a newly appointed nurse in the hospital. The new nurse states, “I am hesitant to delegate tasks to unlicensed assistive personnel (UAP) because I am afraid they will not be done correctly.” Which response by the experienced delegator is appropriate?

A) Tell her to clearly identify the task and expectations and then to monitor the delegate's progress.  
B) Tell her that her job responsibility requires that she do everything herself.  
C) Tell her that delegation often results in a decrease in job satisfaction.  
D) Tell her not to delegate any tasks unless she is completely confident.  


Question 1201

The nurse is providing discharge instructions to the family of an older adult client with a history of urinary tract infection (UTI). The family asks what the early symptoms of a urinary tract infection are so that they can monitor the client. Which early symptom of a UTI should the nurse teach the family?

A) Blood in the urine  
B) Urinary frequency  
C) Urinary urgency  
D) Alteration in cognition  


Question 1202

A nurse educator is teaching a group of students about professionalism. The educator teaches the students that a profession is distinguished from other kinds of occupations through which methods? Select all that apply.

A) By socializing with other nurses  
B) By being autonomous  
C) By being economically responsible  
D) By acquiring specialized education  
E) By participating in ongoing research  


Question 1203

A nurse educator is a teaching a group of students about the comprehensive theory of addiction by George Engel. Which statements indicate that the students understand the theory? Select all that apply.

A) “Addiction occurs due to a lack of emotional attachment.”  
B) “There is a moral factor involved in the development of addiction.”  
C) “There is a psychological factor involved in the development of addiction.”  
D) “There is a biological factor involved in the development of addiction.”  
E) “There are social factors that contribute to the development of addiction.”  


Question 1204

The nurse who uses the computer during client care notices increased eyestrain since the organization began using the electronic medical record for nursing documentation. Which action by the nurse would minimize the eyestrain experienced during documentation?

A) Obtain a paper chart for nursing documentation.  
B) Use a lumbar support.  
C) Use a glare filter.  
D) Use a firm board to rest the palm.  

Question 1205

A nurse is caring for a client who weighs 209 pounds and is 1.67 meters tall. The nurse calculates the body mass index (BMI) of this client as ________. Round the answer to the nearest whole number.


Question 1206

The nurse knows that Congress enacted the Emergency Medical Treatment and Labor Act (EMTALA) of 1986 to prevent which action by emergency services?
A) Refusing to treat uninsured clients
B) Stopping the poor from using emergency services as primary care
C) Servicing suburban clients only
D) Providing free examinations to the poor


Question 1207

A client with anemia is prescribed synthetic erythropoietin. When teaching the client about the therapeutic effect of this treatment, which is appropriate for the nurse to include?
A) Increase in red blood cells
B) Decrease in white blood cells
C) Increase in platelets
D) Decrease in lymph fluid


Question 1208

A client with new-onset atrial fibrillation appears very anxious. After reviewing the client's recent laboratory results, the nurse concludes that which might be causing the client's symptoms?
A) A Hgb of 13.8 g/dL
B) A Hgb of 11.0 g/dL
C) A TSH of 18 mU/mL
D) A TSH of 0.25 mU/mL


Question 1209

The nurse is preparing an older adult client for surgery. Which topics should the nurse focus when preparing this client's preoperative teaching? Select all that apply.
A) Level of hearing
B) Including the family in the perioperative care plan
C) Actions to prevent pressure ulcers
D) Teaching on deep breathing and coughing
E) Plans for discharge care


Question 1210

A client with macular degeneration tells the nurse that vision has improved after making dietary changes. What change did the client most likely implement?
A) Low-protein diet
B) High-carbohydrate diet
C) Low-fat diet
D) High-antioxidant diet


Question 1211

The nurse is caring for a comatose client with respiratory acidosis. For which intervention will the nurse need to collaborate when caring for this client?
A) Measuring intake and output
B) Identifying current oxygen saturation level
C) The client's recent eating behaviors
D) Measuring vital signs

Question 1212
Security was contacted to remove a handgun from the pants pocket of a client who had been admitted with wounds sustained in a fight. Which nursing diagnosis should the nurse include in this client's care plan?
A) Fear
B) Risk for Violence to Others
C) Risk for Loneliness
D) Risk for Situational Low Self-Esteem

Question 1213
A client tells the nurse that the thought of eating makes her anxious and nervous, and she just avoids it altogether. Which is the priority when planning care for this client?
A) Interventions to address anxiety and feelings of being in control
B) Instruction on the role of nutrition in normal menstruation
C) Instruction on the importance of nutrition for vital signs and muscle tone
D) Instruction on appropriate nutritional intake

Question 1214
An older adult African-American client with a history of celiac disease presents with abdominal cramps, pain, and diarrhea. The client denies the use alcohol, but states, "my favorite foods are steak, cheese, and ice cream." Based on this data, which condition does the nurse suspect?
A) Acute pancreatitis
B) Food poisoning
C) Lactase deficiency
D) Appendicitis

Question 1215
The nurse is preparing to admit a school-age client for treatment of diabetic ketoacidosis (DKA). On what should the nurse focus for this client's care?
Select all that apply.
A) Insulin infusion
B) Frequent blood glucose monitoring
C) Fluid volume overload
D) Peripheral perfusion
E) Intravenous fluid infusions

Question 1216
A client is scheduled for permanent pacemaker insertion. What instruction will this client need prior to discharge?
A) There are no special precautions.
B) Dizziness is to be expected.
C) Use battery-powered equipment.
D) Wear a tight-fitting shirt to help hold the pacemaker in place.

Question 1217
The nurse is caring for a client in a community clinic who wishes to quit smoking. The client asks the nurse, "If I quit smoking, will my risk of lung cancer be the same as a nonsmoker?" Which is the best response by the nurse?
A) "Your risk of lung cancer will be equal to that of a non-smoker."
B) "No one knows for sure what the risk is for someone who quits smoking."
C) "Your risk of lung cancer will never drop because the damage has already been done."
D) "Your risk of lung cancer will decline if you quit, but it will remain higher than a non-smoker's."
Question 1218

The nurse is working with a morbidly obese client who is seeking help to lose weight at a bariatric clinic. When planning this client's care, which nursing diagnosis is the priority?
A) Disturbed Body Image
B) Defensive Coping
C) Activity Intolerance
D) Constipation

Question 1219

After a skin graft procedure to the leg, a client is returned to the burn care unit. Based on this data, which action by the nurse is appropriate?
A) Maintaining the head of the bed flat
B) Elevating the head of bed 30°
C) Placing the client flat with the affected extremity abducted.
D) Elevating the affected extremity

Question 1220

A pediatric client is receiving IV antibiotics for the treatment of a Staphylococcus aureus infection. Which nursing interventions are appropriate when providing care to this client? Select all that apply.
A) Assess renal and liver function.
B) Obtain a baseline electrocardiogram.
C) Encourage adequate fluid intake.
D) Monitor vital signs.
E) Monitor for allergic reaction.

Question 1221

The nurse who is being mentored knows that which phase of the mentoring relationship deals with plan implementation and achieving professional development goals?
A) Separation during months 5-24
B) Redefinition during years 6-12
C) Cultivation during years 2-5
D) Initiation during months 6-12

Question 1222

The nurse sees a client crying after being dropped off for a clinic appointment. The client states, "I am a burden to my entire family now that I cannot drive." Based on this data, which does the nurse include in the client's plan of care?
A) Risk for cardiac disease
B) Risk for situational depression
C) Risk for bipolar disorder
D) Risk for depression

Question 1223

The nurse is providing care for several client. For which client is a prescription for 1,000 mg of aspirin appropriate?
A) 70-year-old client for back pain after laminectomy
B) 38-year-old client for headache pain after a skiing accident
C) 68-year-old client for hand pain who has rheumatoid arthritis
D) 5-year-old client for ankle pain after a fall from a horse

Question 1224

The nursing student is planning an educational program for a school project. The program is focusing on cancer detection education for a community group. What should the nursing student plan to include in order to address the various learning styles of the target group?
Question 1225

A nurse is caring for a client with a genetic nerve disorder who has a deficit when attempting to move the tongue. When assessing this client, the nurse expects a deficit with which cranial nerve?

A) XI  
B) VI  
C) XII  
D) VIII


Question 1226

The nurse is seeing a family 3 months after a house fire that injured several of the family members and destroyed the family home. Which statement indicates that the goals for the children have been met?

A) "We have sent our children back to school and they are doing well."  
B) "We are suing the builder for a defect that caused the fire."  
C) "We have hired an architect to plan our new home."  
D) "We are still living with relatives."


Question 1227

A pediatric nurse is caring for a child with acute lymphoblastic leukemia (ALL). When providing education to the child’s parents regarding this disease, which topics should the nurse include? Select all that apply.

A) This form of leukemia is very rarely seen in children.  
B) The onset of ALL is usually gradual.  
C) ALL is characterized by abnormal proliferation of all bone marrow elements.  
D) Most cases of ALL result from the malignant transformation of B cells.  
E) This form of leukemia is the most common type among children and adolescents.


Question 1228

A client, learning that her baby has died in utero, is planning to carry the baby until natural delivery because abortion is against her religion. Which is the client demonstrating based on this data?

A) Morals  
B) Sound judgement  
C) A healthy decision  
D) Fear of retribution


Question 1229

A nurse recently attended a seminar that discussed the many threats to homeland security. The nurse is responsible for planning for emergencies from bioterrorism as nurse manager of the emergency department. Which agents does the nurse include when planning for bioterrorism? Select all that apply.

A) Tuberculosis  
B) Flu  
C) Smallpox  
D) Anthrax  
E) Cancer


Question 1230

A client in the manic phase of bipolar disorder is prescribed lithium and has a current level of 0.4. Which clinical manifestation does the nurse anticipate when assessing this client?

A) A decrease in manic behavior.
B) A return to baseline behavior, calm and rational.
C) Hyperactivity and pressured speech.
D) Signs and symptoms of depression.

**Question 1231**

A client is recently prescribed risperidone (Risperdal) by the healthcare provider. Which would be a priority nursing consideration for this client?
A) Assess blood pressure and heart rate.
B) Monitor for increased agitation.
C) Monitor for neuroleptic syndrome.
D) Assess for drowsiness.

**Question 1232**

Which treatment program would be most appropriate for homeless clients whose type 1 diabetes requires daily insulin injections?
A) Home health care
B) Inpatient hospital-based care
C) Outpatient clinic
D) Partial hospitalization programs

**Question 1233**

A client of Native American descent comes to the hospital in early labor at 23 weeks' gestation. The client's parents, sisters, and brothers are with her as well as her husband. The client's family insists on remaining with her during labor. Hospital policy, however, limits visitors to two. Which action is most appropriate for the nurse to take in this situation?
A) Call security to escort the family out of the hospital.
B) Speak with the nurse manager about supporting the family's wishes.
C) Show the family to the waiting room.
D) Ask the parents of the baby what their needs are regarding the family request.

**Question 1234**

A nurse working in labor and delivery is teaching a group of pregnant clients about maternal risk factors associated with increased risk of the development of cerebral palsy (CP). Which statements will the nurse include? Select all that apply.
A) "Increased risk for CP occurs in mothers and fathers of African-American decent."
B) "Increased risk for CP occurs in first-born children and in children born after the fourth child."
C) "Increased risk for CP occurs in children who are born prematurely."
D) "Increased risk for CP occurs in women older than 35 and younger than 20."

**Question 1235**

A nurse working in the intensive care unit (ICU) is caring for a client in a hypertensive emergency due to acute nephritis. When discussing this data with a novice nurse during change of shift report, which statement by the nurse is appropriate when discussing the effects of the renal system on the client's blood pressure?
A) "The release of atrial natriuretic peptide (ANP) and brain natriuretic peptide (BNP) cause an increase in blood pressure."
B) "The synthesis and release of adrenomedullin causes an increase in blood pressure."
C) "The release of the catecholamines epinephrine and norepinephrine cause an increase in blood pressure."
D) "The release of renin causes an increase in blood pressure."

**Question 1236**

The nurse makes a visit to the home of an adolescent recently discharged from the hospital for a seizure disorder. Which observations indicate that outcomes for care have been achieved? Select all that apply.
A) The client has bruises on both arms from seizure activity.
B) The client has not had a seizure for 1 month.
C) The client is not driving.
D) The client has several episodes of constipation each week.
E) The client is participating in the school basketball team.
Question 1237

A client is concerned about becoming impotent because of the inability to sustain an erection and a history of a sexually transmitted infection as a young adult. What is the nurse's best response to this client's concerns?

A) "The medical diagnosis of erectile dysfunction is not made until the man has erection difficulties in 25% or more of his interactions."
B) "Sexually transmitted infections may result in sexual problems in adults."
C) "An occasional incident like this is normal and common, and there is no reason to be concerned."
D) "Erectile dysfunction is the correct term for the inability to achieve or sustain an erection."


Question 1238

A client in sickle cell crisis reports taking a recent skiing trip that caused a respiratory infection from the cold weather. The client reports a pain level of 8 on a pain scale from 0 to 10. Which nursing diagnosis is a priority for this client?

A) Fluid Volume Excess
B) Knowledge Deficit
C) Risk for Self-Mutilation
D) Acute Pain


Question 1239

The nurse identifies the diagnosis of Ineffective Peripheral Tissue Perfusion as being appropriate for a client with septicemia. Which intervention will address this client's health problem?

A) Monitor heart rate every hour.
B) Monitor pupil reactions every 8 hours.
C) Monitor for cyanosis.
D) Assess temperature every 4 hours.


Question 1240

The home healthcare nurse is preparing a care plan for a client with severe anemia. The client currently lives alone and states, "I can't even walk to the kitchen without getting winded." What would be the priority nursing diagnosis for this client?

A) Altered Nutrition, Less than Body Requirements
B) Anxiety
C) Activity Intolerance
D) Hopelessness


Question 1241

A client who was widowed 3 years ago states, "I don't have many friends. The only people I visit with are some acquaintances at the local bar." Which health problem does the nurse suspect the client is experiencing based on this data?

A) Sadness
B) Depression
C) Bipolar disorder
D) Extended grief


Question 1242

The nurse suspects that a client with severe shortness of breath in the absence of cyanosis is experiencing anemia. Which laboratory tests should the nurse review to confirm anemia? Select all that apply.

A) Blood sugar
B) Hematocrit
C) Cardiac enzymes
D) Serum electrolytes
E) Hemoglobin

Question 1243
A nurse is volunteering at a local free clinic. By providing client care to an inadequately insured population, the nurse is demonstrating which value of client advocacy?
A) The nurse has the responsibility to make choices and decisions.
B) The nurse has the responsibility to ensure the client has access to healthcare services.
C) The client has the right to expect a nurse-client relationship based on shared respect.
D) The client has the right to make choices and decisions.

Question 1244
A client with cholelithiasis is in the clinic for a follow-up assessment following hospitalization. What lifestyle modification should the nurse teach the client to decrease the pain associated with the disease process?
A) Decrease fat consumption
B) Decrease smoking
C) Increase fluids
D) Reduce sodium intake

Question 1245
The nurse is caring for an adolescent with cystic fibrosis who suddenly becomes noncompliant with the medication regimen. Which intervention should the nurse choose to help improve medication compliance for this client?
A) Recommend to the client's parents that certain privileges should be taken away, such as cell phone use and texting, if compliance fails to improve.
B) Give the client a computer-animated game that presents information on the management of cystic fibrosis.
C) Arrange for the physician to discuss the risks related to noncompliance with medications to the client.
D) Set up a meeting with some older teens with cystic fibrosis who have been managing their disease effectively.

Question 1246
A novice nurse is working in a busy emergency department of a hospital, situated in a culturally diverse area of the city. Which should the nurse do when providing culturally competent care?
A) Strive to be culturally sensitive, culturally appropriate, and culturally competent.
B) Possess the underlying background knowledge that will provide these clients with the best possible health care.
C) Understand and attend to the total context of the client's situation, using knowledge, attitudes, and skills.
D) Try to learn about the attitudes toward health care and traditions of the different cultures in that area.

Question 1247
An older adult client is brought to the emergency department from a long-term care facility. The client has been experiencing fever, nausea, and vomiting for the past 2 days. The client denies thirst. Urine dipstick indicates a decreased urine specific gravity. Based on this data, which diagnosis does the nurse anticipate?
A) Congestive heart failure
B) Normal changes of aging
C) Fluid overload
D) Dehydration

Question 1248
A client with peripheral vascular disease (PVD) asks the nurse what types of exercise would improve the client's condition and overall health. Which type of exercise will the nurse include in the response to the client?
A) Weight lifting
B) Yoga
C) Bicycling
D) Jogging

Question 1249
A client recovering from a rape tells the nurse that flashbacks do occur but can be managed. Which techniques should the nurse suggest to the client for managing flashbacks about the event? Select all that apply.
A) Guided imagery  
B) Muscle relaxation  
C) Restoring personal choice  
D) Deep breathing  
E) Problem solving  

**Question 1250**

A nurse is caring for a client with cancer. The nurse teaches the client about which potentially undesirable cellular alterations that can occur during the cell cycle? Select all that apply.
A) Adaptation  
B) Anaplasia  
C) Hyperplasia  
D) Dysphagia  
E) Differentiation  

**Question 1251**

The school nurse is conducting a screening on back safety for school-age clients who are in the 6th grade. The nurse brings a scale and weighs all the children and their backpacks behind a screen for privacy. One client weighs 40 kg and the backpack weighs 8 kg. Which intervention is appropriate for this client?
A) Tell the student that to take some items out of the backpack.  
B) Explain the risks of heavy backs and alternatives to the student's parents.  
C) Tell the student that the backpack is not too heavy for his weight.  
D) Budget for rolling backpacks for all the students.  

**Question 1252**

The nurse is planning care for a client with osteoarthritis of the hip. Which intervention would be appropriate for this client?
A) Provide opioid pain medication as prescribed.  
B) Instruct on the importance of strict bed rest.  
C) Provide NSAIDs when pain is severe.  
D) Provide moist heat packs to affected joint 3 times each day.  

**Question 1253**

A client with injuries from a motor vehicle crash is intubated for respiratory support. The nurse notes that the client is fighting the ventilator and attempting to pull out the endotracheal tube. What should the nurse do to reduce this client’s risk of developing respiratory alkalosis?
A) Discuss removing the endotracheal tube with the healthcare provider.  
B) Teach the client to take slow, deep breaths.  
C) Administer a sedative as prescribed.  
D) Apply wrist restraints.  

**Question 1254**

An older adult client is experiencing hypovolemic shock. Which is the priority intervention for this client?
A) Administering analgesics for control of pain  
B) Assessing the cause of bleeding  
C) Establishing invasive cardiac monitoring  
D) Providing replacement of volume  

**Question 1255**

An older adult client is diagnosed with dilated cardiomyopathy. Which clinical manifestations does the nurse anticipate during the physical assessment? Select all that apply.
A) Syncope
Question 1256

The nurse is caring for a client who has recently received a permanent colostomy. The client will be going home in several days and requires discharge teaching. What should the nurse do when organizing the teaching experience?
A) Break the information into small sessions to enhance learning.
B) Start from the beginning and proceed through all steps required to perform colostomy care.
C) Ask the client to tell the nurse what is known about caring for the colostomy.
D) Make sure the client's spouse is present before the teaching session begins.

Question 1257

A client has superficial burns on the hand from boiling water. What can the nurse suggest that the client use to help with the healing of these burns?
A) Evening primrose oil
B) Aloe vera gel
C) Vitamin C
D) Chamomile

Question 1258

A child has recently been diagnosed with leukemia. The client's sibling is 6 years old and expressing feelings of anger and guilt. This reaction by the sibling is very upsetting to the parents. How should the nurse explain the sibling's behavior?
A) "Your other child should not be so upset. The cancer is easily treated."
B) "This behavior is abnormal. I will have the physician refer you to a psychologist."
C) "This behavior is just the sibling's way to get attention."
D) "This is a normal response. Your other child is also affected by the diagnosis and anger and guilt are expected feelings for a 6-year-old."

Question 1259

During a home visit, the nurse evaluates teaching provided to a client with type 1 diabetes mellitus on the ability to prepare an insulin injection. List the order in which the client prepared the injection that indicates teaching has been effective.
A. Wipe the selected skin site with alcohol and wait for it to dry.
B. Fill the syringe with an amount of air equal to the number of units of insulin, and insert the needle into the vial.
C. Insert the insulin.
D. Push air into the vial, invert the vial, and withdraw the prescribed units of insulin.
E. Pinch up a fold of skin, and insert the needle into the tissue.
F. Withdraw the needle and apply firm pressure to the site for a few seconds.

Question 1260

A client with disseminated intravascular coagulation (DIC) has a nursing diagnosis of Ineffective Tissue Perfusion. Which action is inappropriate for this nursing diagnosis?
A) Minimize the use of tape on the client's skin.
B) Monitor the client's level of consciousness and mental status.
C) Assess extremity pulses, warmth, and capillary refill.
D) Elevate the client's knees on the bed or with a pillow.

Question 1261

A client often asks what life would be like if he had never been born or if he were to die. Which is the client at risk for based on this data?
A) Suicidal ideation
B) A suicide threat
C) Suicide planning
D) A suicide attempt
Question 1262

Nurse leaders in a local hospital created a neurotrauma (NT) unit healthcare team focused on improving outcomes for their stroke clients. This team includes acute care nurses, physicians, other care partners (e.g., physical therapists, social workers, case managers, dieticians), and representatives from the NT outpatient clinic. This team is led by a physician who makes treatment decisions based on the treatment plans developed by individual team members who each communicate with the clients, asking the same or similar questions to obtain data needed for their treatment plan. Which type of communication and action is represented in the scenario described?

A) Parallel functioning
B) Information exchange
C) Parallel communication
D) Co-management and referral
E) Coordination and consultation


Question 1263

The nurse is providing postpartum care for a client who gave birth by cesarean section several hours ago. Which interventions are appropriate for this client within the first 48 hours after birth? Select all that apply.

A) Frequent assessment of serum electrolytes
B) Antihypertensives as prescribed
C) Vital sign assessment every 4 hours
D) Seizure precautions
E) Oxygen 2 liters nasal cannula as prescribed


Question 1264

The nurse is planning care for a client admitted with a cardiac dysrhythmia. Which action would be the most appropriate for this client?

A) Instruct in a low-fat diet.
B) Encourage bed rest.
C) Monitor serum electrolyte levels.
D) Restrict fluids.


Question 1265

A novice nurse is talking to the nurse mentor regarding the benefits of joining a professional organization. Which is the greatest benefit from becoming involved in a professional organization?

A) Learn about new nursing products on the market.
B) Increase knowledge of hospital policy.
C) Establish networking to provide better client care.
D) Gain an appreciation of the history of nursing.


Question 1266

The community nurse is planning a wellness seminar for families in an urban community. Which resources should the nurse consider obtaining to support these families' needs? Select all that apply.

A) Emergency first responder personnel
B) Law enforcement officials
C) Individuals who provide mental health services
D) Information about community healthcare providers
E) Nutritionists


Question 1267

What would the nurse working in the emergency department identify as clinical priorities for the treatment of a client with a gunshot wound? Select all that apply.

A) Airway maintenance
B) Hemorrhage control
C) Obtaining medical history
Question 1268
During a home visit, the nurse evaluates care provided to a client with type 1 diabetes mellitus and a history of metabolic acidosis. Which outcome indicates that the care of this client has been successful?
A) The client is taking laxatives three times a week to ensure adequate bowel movements.
B) The client is taking aspirin 325 mg every 6 hours to treat arthritis pain.
C) The client is injecting insulin into thigh muscle.
D) The client is eating three balanced meals per day with two snacks.

Question 1269
During an assessment, the nurse notes that a client receiving radiation treatments for breast cancer has excoriated skin. What is the priority nursing diagnosis for this client?
A) Activity Intolerance
B) Excess Fluid Volume
C) Ineffective Breathing Pattern
D) Risk for Infection

Question 1270
A client, who is experiencing slight anxiety, is trembling and communicating in a manner that makes it difficult for the nurse to understand the client's needs. Based on this data, which level of anxiety is the client likely experiencing?
A) Severe
B) Panic
C) Mild
D) Moderate

Question 1271
The nurse manager is assessing safe medication administration in preparation for the Joint Commission's (TJC) visit to the hospital. Which observed action is not recommended according to the TJC's National Patient Safety Goals?
A) Labeling all medicines that will be administered to the client appropriately
B) Using extra caution with blood thinners
C) Allowing the client to keep home meds at the bedside for use while in the hospital
D) Taking care when recording client medicine information

Question 1272
A client is being treated for trachoma after returning from a safari trip to Africa. Which potential complication should the nurse consider when planning this client's care?
A) Eye muscle weakness
B) Retinal detachment
C) Damaged iris
D) Scarring of the cornea

Question 1273
A client diagnosed with posttraumatic stress disorder is experiencing insomnia. Which interventions would be beneficial for this client? Select all that apply.
A) Encourage the use of sedatives.
B) Instruct in relaxation techniques.
C) Suggest daytime naps.
D) Discuss the importance of exercise before sleep.
E) Coach in the use of guided imagery.
Question 1274

The nurse is assessing a client’s sleep patterns. Which behavior assessment should the nurse use to make this assessment?
A) Observing client alertness during sedentary, repetitive activities
B) Noting the ability of the to fall asleep within 1 hour
C) Noting the client's final awakening at the habitual sleeping time
D) Videotaping client movement during sleep

Question 1275

A client is experiencing severe anxiety associated with a phobia. Which nursing actions are appropriate when providing care to the client? Select all that apply.
A) Teach why the phobia is imagined.
B) Explain why the reaction to the phobia is unrealistic.
C) Coach the client to deep breathe.
D) Make sure the client understands that she is safe.
E) Ensure a quiet and calm environment.

Question 1276

A child with cerebral palsy (CP) is scheduled for casting of the lower extremities. When instruction the parents for the purpose of the casts, which will the nurse include in the teaching session? Select all that apply.
A) Improve muscle tone
B) Control involuntary movements
C) Maintain stability
D) Improve muscle function
E) Promote skeletal alignment

Question 1277

The nurse is assessing a premature newborn who is being care for in the newborn intensive care unit (NICU). Which assessment finding indicates the newborn is experiencing respiratory distress?
A) Substernal and intercostal retractions
B) Respiratory rate of 58 breaths per minute
C) Abdominal breathing
D) Acrocyanosis

Question 1278

The charge nurse is observing a newly licensed nurse conduct an admission assessment on a client with asthma. Which action by the newly licensed nurse requires immediate intervention?
A) The newly licensed nurse is observed assessing the client's thoracic wall, skin, and nail beds.
B) The newly licensed nurse is observed continuing to ask the client questions regarding history while the client demonstrates difficulty breathing and signs of respiratory impairment.
C) The newly licensed nurse is observed auscultating breath sounds with a stethoscope.
D) The newly licensed nurse is observed obtaining the pulse oximetry reading 10 minutes after the client used an albuterol inhaler.

Question 1279

The nurse is providing care to several clients on a medical-surgical unit. Which client is at highest risk for a nonthrombotic pulmonary embolism?
A) The client who is receiving intravenous pain medication.
B) The client who uses intravenous illicit drugs.
C) The client who is postoperative from a femur fracture repair.
D) The client with a primary lung tumor.

Question 1280
The nurse is caring for a client who is being mechanically ventilated. Arterial blood gas analysis reveals a pH of 7.20 and a PaCO₂ of 49 mmHg. Which change in ventilator settings should the nurse anticipate?
A) Decrease of FiO₂ from 30% to 25%
B) Increased respiratory rate to 30 breaths per minute
C) Decreased tidal volume of each breath
D) Increase in humidification of inspired air

Question 1281

The nurse is caring for an older adult client diagnosed with chronic kidney disease. The client reports no bowel movement in the past 2 days. Based on this data, which condition is the client at an increased risk for developing?
A) Hyperkalemia
B) Metabolic acidosis
C) Hypercalcemia
D) Increased serum creatinine levels

Question 1282

A nurse, who works in a clinic environment, places great emphasis on cost control, customer satisfaction, health promotion, and preventive services. The primary focus of this nurse is representative of which type of healthcare system?
A) Case method
B) Client-focused care
C) Functional method
D) Managed care

Question 1283

The nurse in an urgent care center is assessing an adult client who is diagnosed with the flu. The nurse discusses the need for flu shots with the client, who states, “I cannot afford the shots. I do not have health insurance.” Which suggestion by the nurse is most appropriate?
A) Get the shot every year in the emergency department.
B) Seek preventive care at the local health department.
C) Obtain the flu shot at a local pharmacy.
D) Find a primary care physician who will give free care.

Question 1284

A client reports morning headache that extends into the neck and goes away as the day wears on. Based on this initial data, which does the nurse suspect that the client is experiencing?
A) A sinus headache
B) Spinal stenosis
C) A symptom of hypertension
D) A migraine headache

Question 1285

The nulliparous states, “I have been in labor for 4 hours and I am still only 2 cm dilated. Why is this happening? I feel like I should be ready to push by now.” Which is the best response by the nurse?
A) “The hormones that cause labor to begin are just getting to the levels that will change your cervix.”
B) “What did you expect? You’ve only had contractions for a few hours. Labor takes time.”
C) “Your cervix has also effaced, or thinned out, and that change in the cervix is also labor progress.”
D) “When your perineal body thins out, your cervix will begin to dilate much faster than it is now.”

Question 1286

An adult client diagnosed with sleep apnea has been prescribed a continuous positive airway pressure (CPAP) machine as treatment. The nurse is instructing the client on how to use the machine. Which instruction should the nurse include?
A) Use relaxation exercises to reduce uncomfortable feelings from the mask.
B) Straps can be loose, if that feels more comfortable.
Question 1287

The charge nurse observes that a fellow charge nurse on the unit who seems impaired and unable to perform client care. Which action by the charge nurse is the most appropriate in this situation?
A) Discuss the situation with the nursing supervisor.
B) Confront the nurse directly.
C) Call the nurse manager of the unit.
D) Notify security.

Question 1288

The nurse is caring for a client with a history of latex allergies. The client develops audible wheezing, pruritus, urticaria, and signs of angioedema. Which is the priority intervention for this client?
A) Collect a detailed history from the client regarding the history of latex allergies.
B) Teach the client regarding using a kit that contains treatment for allergic reactions.
C) Administer diphenhydramine (Benadryl) by mouth every 4 hours per the healthcare provider’s orders.
D) Administer epinephrine 1:1,000 by subcutaneous injection per the healthcare provider’s orders.

Question 1289

The nurse is preparing a client for discharge who will be requiring physical therapy (PT) to rehabilitate after a total knee replacement. After reading the healthcare provider’s order for PT, which would be the nurse’s initial action?
A) Set up appointments according to the order with the hospital PT department.
B) Call home health and schedule a therapist to visit the home for therapy.
C) Teach the family the exercises needed for the client.
D) Discuss the various types of settings for therapy and have the client choose the venue.

Question 1290

A client with osteoarthritis of the knees and hips returns for a 3-month follow-up with the provider. The nurse calculates that the client’s BMI is now 22. The reports starting a water aerobics and step aerobics program three times per week. The client is also using hot packs for edema for 20 minutes and cold packs for pain for 40 minutes daily. After evaluating the client’s actions, the nurse plans which follow-up interventions? Select all that apply.
A) Explain the risk of injury using cold packs.
B) Counsel on continued weight loss.
C) Reinforce the correct use of hot packs.
D) Congratulate on starting water aerobics.
E) Educate on low-impact exercise modes.

Question 1291

The nurse is evaluating care provided to a client experiencing menopause. Which observation indicates that the client is successfully managing menopausal symptoms?
A) Client’s stated loss of interest in recreational activities
B) Weight loss of 5 pounds in 4 months after starting an exercise program at the local gym
C) Client’s stated desire to stay at home and limit social activities
D) Weight gain of 10 pounds in 3 months

Question 1292

A nurse is caring for a client with congestive heart failure (CHF) who currently smokes cigarettes and has a 50 pack-year smoking history. When providing smoking cessation education to the client, which statements regarding the pathophysiology of nicotine use are appropriate? Select all that apply.
A) “In high doses, nicotine stimulates the parasympathetic system to release epinephrine, causing vasoconstriction.”
B) “Initially, nicotine increases mental alertness and cognitive ability.”
C) “In low doses, nicotine stimulates nicotinic receptors in the brain to release dopamine.”
Question 1293
When administering an intramuscular dose of vitamin K (AquaMEPHYTON) to a newborn, which actions by the nurse are appropriate? Select all that apply.
- Using the middle third of the vastus lateralis muscle
- Using a 23-gauge 1/2-inch needle
- Washing the skin with soap and water
- Cleaning the skin with an alcohol swab
- Preparing 5 mg of the medication for injection

Question 1294
The nurse is planning care for a client who weighs 70 kg and is post-op day 1 after spinal fusion surgery. Which is an appropriate outcome for this client?
- The client will use the incentive spirometer every 2 hours.
- The client will remain prone position.
- The client will maintain urine output at 20 ml per hour.
- The client will void 12 hours after surgery.

Question 1295
A client experiencing fatigue, pallor, and dyspnea on exertion has a complete blood count drawn. Which red blood cell disorder should the nurse anticipate the client is experiencing?
- Herpes simplex
- Polycythemia
- Anemia
- Erythropoiesis

Question 1296
The home health nurse is assigned to care for a client who requires wound care. The nurse is assessing the family's ability to change a wound dressing that the client cannot reach. The nurse asks the family to change the dressing during the visit. After the family demonstrates the dressing change, which response by the nurse is appropriate?
- "I'll come and do it every day so that the wound will heal more quickly."
- "This wound will never heal if you change the dressing that way."
- "You are not doing it right. I will just have to come every day until you learn how."
- "Great job! Let me show you a technique that can make the dressing change more effective."

Question 1297
A client in the first trimester of pregnancy complains of a vaginal discharge and is concerned that the baby is infected. Which instructions by the nurse are appropriate? Select all that apply.
- Limit dairy products and use lactose-free products whenever possible.
- Avoid douching.
- Keep the vaginal area clean and wear cotton underwear.
- Limit bathing to 2 times a week.
- See the healthcare provider to assess for a vaginal infection.

Question 1298
A client recovering from abdominal surgery tells the nurse that "something popped" in the abdominal incision. Upon inspection, the nurse finds that evisceration has occurred. What actions by the nurse are appropriate? Select all that apply.
- Position the client in bed with knees bent.
- Notify the client's surgeon.
- Turn the client onto the abdomen.
**Question 1299**

A client with Parkinson disease (PD) states to the nurse, "It is 1950 and I am late for work." What action should the nurse take at this time?

A) Ask the client what life is like in 1950.
B) Apply restraints so the client will not attempt to get out of bed to go to work.
C) Orient the client, provide a calendar, and place a clock in the room.
D) Medicate for confusion.


**Question 1300**

A pregnant client is diagnosed with HELLP syndrome. Based on this diagnosis, which clinical manifestation does the nurse anticipate?

A) Hemolysis
B) Decreased liver enzymes
C) Elevated lipid panel
D) Increased platelet count


**Question 1301**

An older adult client experiences a hip fracture. Prior to the injury, the client participated in golf and home maintenance activities. Based on this data, which surgical procedure does the nurse anticipate?

A) Open reduction and internal fixation
B) Open reduction and external fixation
C) Austin-Moore prosthesis
D) Total hip replacement


**Question 1302**

The nurse is determining the type of support the family of a client with newly diagnosed mood disorder is going to need. Which types of support should the nurse consider to help this family? Select all that apply.

A) Friend
B) Family
C) Financial
D) Spiritual
E) Professional


**Question 1303**

A novice nurse on a medical-surgical unit is released from the orientation phase of training. The nurse is able to care for a four- to five-client assignment independently and is assigned a coach on the unit who will help with problem solving, if needed. According to Benner’s stages of nursing expertise, this nurse would belong to which stage?

A) Stage V
B) Stage IV
C) Stage II
D) Stage III


**Question 1304**

A nurse is caring for a client with Alzheimer disease (AD) who recently lost the ability to live independently but can still perform activities of daily living (ADLs). Which stage of the disease is this client in?

A) Stage 4
B) Stage 6
C) Stage 3
D) Stage 5

Question 1305
A client is brought to the emergency department (ED) after passing out in a local department store. The client has been fasting and has ketones in the urine. Which acid-base imbalance would the nurse expect to assess in this client?
A) Metabolic alkalosis
B) Metabolic acidosis
C) Respiratory alkalosis
D) Respiratory acidosis

Question 1306
The nurse educator is presenting information to a group of nursing students regarding uninsured and underinsured client. Which statement regarding the consequences of being uninsured or underinsured is appropriate for the educator to share with the students?
A) "Older adults are less likely to be treated for falls."
B) "The client’s children are at risk of contracting diseases for which others are immunized."
C) "Delays in health coverage for children put the health provider at risk for litigation."
D) "Delays of diagnoses lead to higher mortality and morbidity rates."

Question 1307
The nurse is planning care for a client with contact dermatitis. Which interventions should be included in this plan of care? Select all that apply.
A) Teach the client the need to keep the skin dry.
B) Stress the importance of utilizing prescribed medication for the entire course.
C) Provide instruction in washing clothes in bleach and hot water.
D) Provide instruction in the use of hot water and soap to bathe the body.
E) Instruct to avoid perfumes and lotions containing alcohol.

Question 1308
A nurse is planning an in-service on preventing infection for the hospital staff nurses on a medical-surgical unit. Which nursing intervention is most effective in reducing the risk of infections?
A) Performing hand hygiene
B) Wearing a mask for client care
C) Raising the temperature in the client’s room
D) Assessing vital signs once daily

Question 1309
The nurse is planning an educational program to instruct clients on disseminating intravascular coagulation (DIC). What should the nurse include as risk factors for this health problem? Select all that apply.
A) Diabetes mellitus
B) Multiparity
C) Abruptio placenta
D) Preterm labor
E) Prolonged retention of a fetus after demise

Question 1310
The nurse is providing care to a client at a local clinic. The nurse suspects that the client is experiencing a urinary tract infection. Which urinalysis result supports the nurse’s suspicions?
A) Negative glucose
B) WBC 10-15
C) Specific gravity 1.012
D) pH 5.2

Question 1311
The nurse is providing teaching to a client diagnosed with a social phobia. Which client statement indicates appropriate understanding of the information presented?

A) "I can control anxiety by deep breathing and relaxing before talking in front of other people."
B) "I take an antianxiety pill before I have to do anything in front of other people."
C) "I try to avoid all situations where I am expected to talk in front of other people."
D) "I can have a drink before I speak in front of other people."


---

The nurse is concerned that a client is at risk for pressure ulcers. Which assessment data supports the nurse's concern? Select all that apply.

A) Age 54
B) Low serum albumin level
C) Body temperature within normal limits
D) Prescribed bedrest
E) Continence of urine and stool


---

The nurse is providing care to a client who is diagnosed with stress incontinence. Which data would nurse expect to collect during the client's health history and physical assessment? Select all that apply.

A) A urinary catheter.
B) Urine leakage while coughing.
C) Skin breakdown on the buttock.
D) Urine leakage while laughing.
E) Urine leakage while talking.


---

The home care nurse hears the spouse of an older client say “You have been so sick but you insist on living in this huge home that you cannot maintain but expect me to.” The client engages in an argument with the spouse. Which does the home care nurse identify as occurring with this couple?

A) Evidence of low blood glucose levels
B) Possible situational depression for both client and spouse
C) Financial struggles within the family
D) Spousal abuse


---

A pediatric home health care nurse is making an initial visit to assess the parenting style for a family in preparation for treating a child with drugs to reduce hyperactivity. Which approach should the nurse use for this assessment?

A) Ask the parents, "What are the house rules?"
B) Ask the parents, "How do you handle situations that require limit setting?"
C) Ask the child, "What rule is hardest for you to obey?"
D) Observe the parent interacting with the child for 5 minutes.


---

The nurse provides medication teaching for a client who will be going home on new medications. Which statement by the client best illustrates compliance with the medication plan?

A) "I'm glad to know about my new medications. It makes taking them all a lot easier."
B) "If I take my medications as prescribed, I'll feel better."
C) "I already knew most of what you told me."
D) "I think you should have waited until I was ready to go home. Maybe I'd remember better."


---

The nurse is providing discharge instructions to an older adult client who is going home after having a total knee replacement. Which will the nurse include in the discharge teaching to decrease the client's risk for developing a thrombosis or pulmonary embolism? Select all that apply.
### Question 1318

While reviewing safety precautions with the staff in a long-term care facility, which step should the nurse emphasize that helps to promote a safe environment for the clients?

A) Keep clutter out of the hallway and inside the client's room.
B) Turn off alarms to reduce noise.
C) Provide dim lighting.
D) Have the client wear rubber skid-resistant slippers.


### Question 1319

The nurse is concerned that a client is demonstrating early signs of hypovolemic shock. Which assessment findings support the nurse's concern? Select all that apply.

A) Rapid weak pulse
B) Prolonged capillary refill time
C) Normal respirations
D) Normal blood pressure
E) Slight increase in pulse


### Question 1320

The nurse is providing care to a client diagnosed with alcoholism. The client's physical examination reveals a BMI of 18. Which prescription does the nurse anticipate to manage the client's nutritional status?

A) Methadone
B) Multivitamin with folic acid
C) Sertraline
D) Naloxone


### Question 1321

When the nurse receives a telephone order from the healthcare provider's office, which guidelines are used to ensure the order is correct? Select all that apply.

A) Ask the prescriber to repeat or spell out medication.
B) Know agency policy for telephone orders.
C) Sign the prescriber's name and credentials.
D) Read the order back to the prescriber.
E) Ask the prescriber to speak slowly.


### Question 1322

The nurse is explaining hepatitis to a high school health occupations class. The students all volunteer examples of how hepatitis is transmitted. Which student statement indicates the need for further education?

A) "Bite of an infected mosquito or tick."
B) "Alcoholism or drug overdose."
C) "Contaminated food or fluids."
D) "Body piercing or tattoo with infected equipment."


### Question 1323

The nurse is discharging a pediatric who recently developed acquired immunodeficiency syndrome (AIDS). When discussing appropriate health promotion activities for this child, which immunization is not appropriate for this client to receive due to AIDS diagnosis?

A) Haemophilus influenzae type B (Hib conjugate vaccine)
B) Hepatitis B vaccine (hep B)
C) Varicella vaccine
D) Diphtheria and tetanus toxoids and acellular pertussis vaccine (DTaP)

Question 1324
The nurse is documenting the interdisciplinary team report on an adolescent client who has a 35-degree Cobb angle confirmed by x-ray. Which interventions are appropriate for this client? Select all that apply.
A) Bracing for 12-23 hours per day and support group referral
B) Obtaining a physical therapy consult prior to surgical intervention
C) Administering non-opioid analgesics and TLSO or Milwaukee brace
D) Maintaining the existing curvature with no increase
E) Instructing on exercises and appropriate support groups

Question 1325
A nursing instructor is educating a group of students on culture and diversity as it relates to homicide. Which statement made by a student nurse would indicate to the instructor that further education is needed?
A) "Caucasian individuals are more likely to use a gun as a means of homicide than any other weapon."
B) "The homicide rate among African American individuals is considerably higher than that among individuals of other races."
C) "Stranger homicides typically are not interracial."
D) "Caucasian individuals are significantly more likely to commit homicides involving multiple victims."

Question 1326
The nurse is preparing to admit a client with acute pneumonia who is experiencing severe respiratory acidosis. Which treatments does the nurse anticipate as appropriate for this client? Select all that apply.
A) Administer digoxin for heart failure.
B) Place in a prone position.
C) Reposition frequently.
D) Encourage up to 3L of fluids per day.
E) Administer oxygen prn.

Question 1327
A nurse-supervisor is encouraging nurses to delegate responsibilities whenever possible. Which criteria is used to determine skills that can be delegation? Select all that apply.
A) Is the client frequently complaining?
B) How complex is the task?
C) How busy are you?
D) Is the task unpleasant?
E) Is training or education required?

Question 1328
A client with severe right-sided abdominal pain is experiencing a miscarriage. Which nursing diagnosis is most appropriate for this client?
A) Ineffective Coping
B) Grieving
C) Interrupted Family Processes
D) Anxiety

Question 1329
Which assessment findings indicate to the nurse that a client is experiencing stress? Select all that apply.
A) Reading a magazine
B) Tapping foot
C) Checking cellular phone
D) Chewing on a finger nail
Question 1330
A client is admitted with signs and symptoms of early Alzheimer disease. What would be used to confirm this client’s diagnosis?
A) Abnormal CT scan findings of neuritic plaques and tangles in the brain
B) Positive blood tests for beta-amyloid and tau proteins
C) Client history and physical examination
D) Blood test for amyloid plaques and neurofibrillary tangles

Question 1331
A home health nurse is evaluating a client who had a colostomy placed 6 weeks ago for the treatment of ulcerative colitis. Which assessment will cause the nurse to conclude that teaching goals for this client have been met?
A) Vital signs that reveal a normal temperature
B) A colostomy pouch that is clean and dry
C) The client experiences pain with certain types of food.
D) A stoma that is pink and intact

Question 1332
An older adult client whose spouse died 6 months ago tells the nurse stories about the deceased spouse. When care has been completed, the client thanks the nurse for listening and states, “My children will not listen to these stories.” From which type of care would this client benefit?
A) Antidepressant medication
B) Psychotherapy
C) Individual therapy
D) Group therapy

Question 1333
The nurse is evaluating the components of the computer system used in the healthcare organization. Which should the nurse realize about the functions of the clinical information system and administrative information system? Select all that apply.
A) The systems are separate.
B) They are two independent systems.
C) They serve as tools to manage finances.
D) They are used to store demographics.
E) The systems support each other.

Question 1334
The client has been vomiting for several days. The nurse knows that the client is at risk for metabolic alkalosis because gastric secretions have which characteristic?
A) Gastric secretions have a foul smell.
B) Gastric secretions are acidic.
C) Gastric secretions are alkaline.
D) Gastric secretions are green in color.

Question 1335
The nurse is caring for an adult client who was admitted to the hospital 3 days ago. The client is having a hard time sleeping. The nurse notes that there is documentation of some confusion during waking hours. Based on this data, which nursing diagnosis is the most appropriate?
A) Disturbed Sensory Perception
B) Ineffective Coping
C) Disturbed Sleep Pattern
D) Ineffective Health Maintenance
Question 1336

A client with chronic obstructive pulmonary disease (COPD) is prescribed oxygen 24% 2 L/min. Which is the best method to administer oxygen to this client?
A) Venturi mask
B) Nasal cannula
C) Nonrebreather mask
D) Face mask

Question 1337

The family of an older adult client is concerned about the changes in the client’s behavior. The client used to be a wonderful cook but now cannot even remember how to use a blender. For which causes of impaired cognitive function should the nurse assess the client? Select all that apply.
A) Nutritional deficiencies
B) Obesity
C) Stroke
D) Snoring
E) Medication reactions

Question 1338

The nurse is caring for a client with hypertension. When planning care for this client, the nurse knows that blood pressure is influenced by all but which factor?
A) Heart rate
B) Peripheral vascular resistance
C) Blood volume
D) Pumping action of the heart

Question 1339

A client recovering from knee surgery is being prepared to ambulate for the first time. Prior to getting the client up, what should the nurse do?
A) Conduct a breathing assessment.
B) Ask the client about readiness to walk.
C) Evaluate the client’s level of pain.
D) Call for a wheelchair to start the process.

Question 1340

The nurse is providing care to a client who has a vitamin D deficiency and is at risk for an alteration in skin integrity. The client states, “how can this be? I drink 3 glasses of milk each day.” Which response by the nurse is appropriate?
A) “A loss of melanin causes a decrease in vitamin D.”
B) “Not all milk contains vitamin D.”
C) “The skin synthesizes vitamin D from sunlight.”
D) “Insufficient protein intake causes a vitamin D deficiency.”

Question 1341

A nurse is caring for a client with end-stage liver disease. Which hematological alterations might the nurse anticipate with this client? Select all that apply.
A) Increased serum vitamin K due to impaired clearance of fat-soluble vitamins
B) Increased plasma oncotic pressure due to impaired protein metabolism
C) Elevated serum albumin levels due to increased protein synthesis
D) Decreased clotting factor levels due to impaired clotting mechanisms
E) Hyperglycemia due to disrupted glucose metabolism

Question 1342
The nurses in the emergency department (ED) and the staff nurses on the neurological unit are experiencing conflict. The ED nurses are not pleased with the amount of time it takes for the neurological unit’s admitting nurse to receive face-to-face hand-off communication for clients who are being admitted to that unit. Which type of conflict is being experienced by these nurses?

A) Intergroup conflict  
B) Intrapersonal conflict  
C) Interpersonal conflict  
D) Interorganizational conflict  


Question 1343

A client has been diagnosed with cataracts of both eyes. Which prescription does the nurse anticipate for this client?

A) Corrective lenses for the cataracts  
B) Two procedures, separated by a few weeks, to remove the cataracts  
C) Eye drops to treat the cataracts  
D) One procedure to remove both cataracts at the same time  


Question 1344

During hospitalization for congestive heart failure (CHF), a client awakens during the night frightened and short of breath. Based on this data, what is the client experiencing?

A) Paroxysmal nocturnal dyspnea  
B) Cardiomyopathy  
C) Multisystem heart failure  
D) High-output failure  


Question 1345

The nurse is providing care to a client who has a tracheostomy. The nurse will monitor the client for complications related to the loss of which protective mechanism?

A) Filtration and humidification of inspired air  
B) Decrease in oxygen-carrying capacity of the trachea  
C) The sneeze reflex initiated by irritants in the nasal passages  
D) The ability to cough  


Question 1346

The nurse is providing care to a child who has suffered abuse. Which nursing actions are appropriate? Select all that apply.

A) Ask the child what really happened.  
B) Remind the child that he did nothing wrong.  
C) Follow protocols for mandatory reporting.  
D) Tell the child that the individual who hurt them is a bad person.  
E) Ask the child what he did to cause his parents to beat him so badly.  


Question 1347

The nurse is concerned that a client is demonstrating signs of obsessive-compulsive disorder. Which clinical manifestations observed during the nursing assessment causes the nurse to come to this conclusion? Select all that apply.

A) Client asking to use the bathroom in the middle of the assessment  
B) Female age 25  
C) Not making eye contact with the nurse  
D) Client repeating the words “third floor”  
E) Client checking the contents of a purse several times within minutes  


Question 1348

A client recently diagnosed with rheumatoid arthritis (RA) asks the nurse if the disease is caused by ethnicity. Which response by the nurse is the most appropriate?

A) “RA is most prevalent in men under the age of 20 years.”
Question 1349

The nurse is caring for a client who has just been diagnosed with chronic myeloid leukemia (CML). The client and the nurse are discussing the anticipatory grieving process. Which action by the nurse would be inappropriate at this time?

A) Identify family stress management strategies.
B) Encourage the client to share feelings and discuss grieving.
C) Encourage the client to see an attorney now to get affairs “in order” before it is too late.
D) Make referrals for support or bereavement groups.


Question 1350

During an assessment, a client tells the nurse that she "can't stand her mother" and does "whatever she wants me to do" because the client "can't do anything right anyway." The nurse uses this information to determine which item during the client assessment?

A) Role performance
B) Self-esteem
C) Body image
D) Personal identity


Question 1351

A nurse is planning care for a client with leukemia. The nurse chooses "Risk for Bleeding" as the nursing diagnosis. Which interventions support this nursing diagnosis? Select all that apply.

A) Limit parenteral injections.
B) Educate client in use of soft toothbrush for oral care.
C) Apply pressure to arterial puncture sites for 5 minutes.
D) Use non-electric razor when providing grooming for client.
E) Encourage client to deep breathe and huff cough frequently.


Question 1352

The nurse is auscultating heart sounds for a pregnant client in the third trimester of pregnancy. The client wants to know why her doctor told her she had an extra heart sound at the last visit. Which response by the nurse is appropriate?

A) "You have what is known as atrial gallop and this is cause for concern."
B) "You are likely experiencing heart failure due to the extra fluid that accumulates during this time in pregnancy."
C) "You have what is known as a ventricular gallop and it can be a normal finding during this trimester of pregnancy."
D) "You will need to have an echocardiogram to determine the reason for extra sound."


Question 1353

A nursing instructor assigns a literature review on evidence-based practice (EBP) to a group of students. Which statement demonstrates that the students understands the benefits of EBP?

A) "This project will allow me to teach other students about literature searches."
B) "Literature searches allow nurses to find problems to implement EBP."
C) "I will be able to present a paper about skin assessment from my query."
D) "Clients at risk for skin breakdown should be repositioned every 2 hours."


Question 1354

The nurse is assessing an older adult client during a routine health maintenance visit. To assess the client's range of motion of the knees, which action by the nurse is appropriate?

A) Have the client stand and extend the knee as far as it will go.
B) Seat the client and extend the knee until the client alerts the nurse of severe pain.
C) Place the client prone and gently lift the entire leg.
D) Seat the client and instruct to alert the nurse of any pain.
Question 1355

The nurse is providing discharge instructions for a first time mother and her baby. Which statement is appropriate for the nurse to include in the teaching session?

A) "Your baby’s stools will change to a dark green color when your milk comes in."
B) "Your infant should have 6 wet diapers each day."
C) "You can wipe away any green eye drainage that might form."
D) "Call your pediatrician if the baby’s temperature is 98°F."


Question 1356

An Asian man brings his wife to the clinic and states, "I want you to fix my wife and tell her that there is nothing wrong with her." The client has symptoms of pain, sleep disorders, and stiffness. Which would be most appropriate for the nurse to include in a plan of care for this family?

A) Medications used to treat fibromyalgia
B) Information and literature on fibromyalgia
C) An exercise program to increase energy
D) Suggested dietary changes to help with the pain


Question 1357

The community nurse is caring for a client who is 32 weeks pregnant and diagnosed with preeclampsia. Which statement indicates that the client requires additional teaching?

A) "Pain in the top of my abdomen is a sign my condition is worsening."
B) "Lying on my left side as much as possible is good for the baby."
C) "I should call the doctor if I develop a headache or blurred vision."
D) "My urine may become darker and smaller in amount each day."


Question 1358

A nurse working in the intensive care unit (ICU) is receiving a client diagnosed with early septic shock from the emergency department (ED). The nurse will recognize which symptoms associated with this condition? Select all that apply.

A) Normal blood pressure
B) Lethargic mental status
C) Decreased urine output
D) Shallow respirations
E) Warm and flushed skin
F) Rapid and deep respirations


Question 1359

The nurse is assessing a client who is receiving IV antibiotics. Which item in the client’s health history increases the risk for experiencing a hypersensitivity reaction?

A) Caucasian race
B) 26 years of age
C) Previous antibiotic therapy
D) Concurrent chronic illness


Question 1360

The client is admitted to the hospital following a miscarriage, and she is septic. The healthcare provider orders antibiotics, which the client refuses, stating, "I don’t deserve them. I lost my baby because I had sex outside of marriage." Which is the appropriate response by the nurse?

A) "I think you need to do what is best for you."
B) "I’ll notify your healthcare provider about your decision."
C) "You have a serious infection and really need the medication."
D) "Do you think you should be punished because you had a miscarriage?"

Question 1361
The nurse on the medical unit is admitting a client. When the nurse asks the client about advance directives, the client states, "I have a living will." Which is the purpose of a living will?
A) Provides specific instructions about how decisions are to be made if the client is unable to make the decisions
B) Provides specific instructions about type of medications the client requires to sustain life
C) Provides specific instructions about what medical treatment the client chooses to omit or refuse in the event they can no longer make decisions for themselves
D) Provides specific instructions about who will make healthcare decisions if the client cannot

Question 1362
A client recovering from injuries obtained from a domestic dispute asks to attend Mass at the hospital chapel. Which is the reason why this is important for the client?
A) Show an interest in what is going on in the world.
B) Attend to spiritual needs in order to deal with what has happened.
C) Find a distraction from the injuries.
D) Get back to a normal routine as soon as possible.

Question 1363
The nurse is providing care to an adult client with a long history of chronic obstructive pulmonary disease (COPD). The client is admitted to the intensive care unit with a pneumothorax. Which interventions are appropriate for this client? Select all that apply.
A) Administer prescribed antihypertensive medications
B) Elevate head of the bed
C) Administer intravenous caffeine per order
D) Prepare for a chest tube insertion
E) Administer a high rate of oxygen by nasal cannula

Question 1364
A client who is at risk for developing osteoporosis asks what can be done to decrease the risk of actually developing the disease. Which intervention would be the most beneficial for this client?
A) Increasing regular weight-bearing activities
B) Providing the client with assisted range of motion exercises twice daily
C) Protecting the client's bones with strict bed rest
D) Decreasing the amount of calcium in the client's diet

Question 1365
A community hospital wants to implement a labor delivery recovery postpartum unit to replace the labor and delivery and mother/baby units. The nurses who work on the mother/baby unit are concerned they will not be able to care for a laboring mother and may lose their jobs. The nurse manager for both units supports the plan for an integrated unit, reports that jobs would not be lost and involves the team members in the planning process, which includes cross-training all nursing staff. Based on the information presented, what causes of conflict may occur in spite of the nurse manager's effort for a smooth transition? Select all that apply.
A) Mistrust
B) Miscommunication
C) Resistance to change
D) Ambiguous role expectations
E) Ineffective leadership

Question 1366
During a blood pressure screening, an older adult client tells the nurse about chest fluttering while doing yard work. The client reports no other symptoms and the frequency is intermittent. Which conclusion by the nurse is the most appropriate based on the data provided?
A) Nonspecific cardiac changes with aging
B) Exercise intolerance
C) Underlying illness that requires a medical evaluation

Question 1367

The nurse is caring for a client who has been diagnosed with diabetes mellitus. The client must learn how to independently perform finger stick blood sugar analysis as part of the plan of care. The client says, "I already know what you are attempting to teach because I looked everything up on the internet." Which is the best action by the nurse based on the client's statement?
A) Give the client printed learning materials.
B) Document that the client understands teaching.
C) Teach the client's support system how to perform the procedure.
D) Watch the client perform a return demonstration of the skill.

Question 1368

A multidisciplinary conference has concluded that focused on the care needs of an older school-age client diagnosed with type 2 diabetes mellitus. On which areas should the team focus care to improve this client's long-term prognosis? Select all that apply.
A) Weaning off oral medications
B) Family participation in the lifestyle change
C) Food intake based on age, sex, and physical activity
D) Physical activity to be at least 30-60 minutes per day most days of the week
E) Obtaining adequate rest and sleep

Question 1369

A nurse is educating a client with glaucoma about the different types of the disease. Which statement is appropriate for the nurse to include in the teaching session?
A) "Angle-closure glaucoma is the most common form of glaucoma among adults."
B) "Episodes of angle-closure glaucoma usually affect both eyes at a time."
C) "Open-angle glaucoma usually affects only one eye at a time."
D) "Open-angle glaucoma occurs more frequently in Latinos and African-Americans."

Question 1370

An adolescent is diagnosed with cellulitis from picking the scabs on healing facial pimples. The mother scolds the child for eating too many oily foods that cause the acne. Based on this data, which topic is priority when providing education to the child and mother?
A) Consumption of oily foods poses an increased risk for cellulitis.
B) Oily foods do not cause pimples or cellulitis.
C) Popping the pimples spreads the germs over the face.
D) Antibiotics are the best way to prevent cellulitis.

Question 1371

The nurse on the medical unit is admitting an older adult client whose primary symptoms include fatigue, pruritus, and pain in the right flank area. When conducting this client's assessment, which technique is the most appropriate?
A) Palpation of the lower pole of both kidneys
B) Palpation over the costovertebral angles and flanks
C) Blunt percussion over the costovertebral angles and flanks
D) Capturing of both kidneys

Question 1372

The parents of a child with autism spectrum disorder (ASD) observe that the child has difficulty making friends and are concerned about social expectations for their child. Which is the priority diagnosis for this child based on the parent's concern?
A) Deficient Diversional Activity
B) Ineffective Coping
C) Impaired Social Interaction
D) Social Isolation
Question 1373
A nurse working in labor and delivery is caring for a client with suspected disseminated intravascular coagulation (DIC). Which pregnancy complication does the nurse anticipate when reviewing the client's chart?
A) Placenta previa
B) Placental abruption
C) Polyhydramnios
D) Gestational diabetes

Question 1374
The nurse has instructed a client recovering from a pulmonary embolism on long-term anticoagulant therapy. Which client statement indicates that instruction has been effective?
A) "I need to use a soft toothbrush and an electric razor, and avoid injuries."
B) "I will expect bloody sputum when I brush my teeth."
C) "I need to eat a well-balanced diet with green salads."
D) "I can expect to be bruised, since this is normal."

Question 1375
A nurse manager in the intensive care unit (ICU) notes a pattern for a staff nurse who excessively "wastes" narcotics, and the manager suspects the staff nurse may be impaired. Which clinical situation may have contributed to the staff nurse's problem?
A) Easy access to prescription drugs
B) Caring for clients who require IV medications
C) Caring for clients who require numerous oral medications
D) Easy access to client care areas

Question 1376
The nurse is caring for an adult client who sustained a right distal radial fracture and a left tibia fracture. Which mobility aid is appropriate for this client?
A) Platform crutches
B) Axillary crutches
C) Walker
D) Lofstrand crutches

Question 1377
The nurse is caring for a male client of Japanese descent who is experiencing urinary retention. The client asks the nurse if it is possible that he is experiencing benign prostatic hyperplasia (BPH). Which response by the nurse is the most appropriate?
A) "No, you are not old enough to have BPH."
B) "Your provider will run some tests; however, you are considered low-risk for BPH"
C) "Your symptoms are not consistent with BPH."
D) "Where did you get an idea that you might have BPH?"

Question 1378
The nurse educator in a gastrostomy clinic is teaching a group of clients about how nutrition plays a role in the formation of gallstones. Which client would the nurse expect to benefit the most from this teaching session?
A) The Native American client
B) The Norwegian client
C) The Asian client
D) The African-American client

Question 1379
A nurse is receiving a client from the emergency department diagnosed with an acute exacerbation of ulcerative colitis (UC). The nurse anticipates the
client may present with which clinical characteristics? Select all that apply.
A) Cramping in left lower quadrant; relieved by defecation
B) Steady right lower quadrant or periumbilical pain
C) Tenderness and mass noted in right lower quadrant
D) Fever, malaise, fatigue
E) 5-30 diarrhea stools per day with blood and mucus

Question 1380

The nurse caring for a postpartum client would consider the nursing diagnosis of ineffective individual coping when the client demonstrates which behavior?
A) Lying in bed, lights dim, and refusing to spend time with the baby
B) Cuddling the new infant
C) Talking with friends and family on the phone
D) Reading material on care of a newborn

Question 1381

The nurse is planning care for a newly admitted client diagnosed with pulmonary embolism. The nurse anticipates the client will need anticoagulant therapy. What is true regarding this therapy for the treatment of this condition?
A) Heparin and warfarin (Coumadin) are usually initiated at the same time.
B) It is considered second-line treatment.
C) Major hemorrhage is common.
D) Heparin alters the synthesis of vitamin K-dependent clotting factors, preventing further clots.

Question 1382

A nurse is providing discharge education to a client who is diagnosed with angina. Which statement would the nurse exclude from teaching?
A) “Prinzmetal angina is atypical angina that occurs with strenuous exercise.”
B) “Clients with unstable angina are at risk for a heart attack.”
C) “Unstable angina occurs with increasing frequency, severity, and duration.”
D) “Stable angina is the most common form of angina.”

Question 1383

The nurse is reviewing the immunization record for a client who just learned she is pregnant. Which vaccine is not safe to give during pregnancy?
A) Annual influenza
B) Pertussis

Question 1386

The nurse is developing a plan of care for a client who is at risk for falls. Which interventions would be appropriate for the nurse to include in the plan of care? Select all that apply.

A) Apply physical restraints if the client gets out of bed.
B) Utilize side rails on client beds.
C) Assess the client's vision and make sure he is utilizing any prescribed eyewear.
D) Keep frequently used items within easy reach.


Question 1387

A preadolescent client who fell from a balance beam in physical education is diagnosed with an ankle fracture. Which action by the nurse is appropriate?

A) Assessing the need for a back brace
B) Placing an ice pack on the ankle
C) Referring the client to physical therapy
D) Planning for a corticosteroid injection


Question 1388

The nurse identifies assessment findings for an African-American client with preeclampsia. Blood pressure is 158/100 mmHg; urinary output 50 mL/hour; lungs clear to auscultation; urine protein 1+; 1+ edema hands, feet, ankles. On the next hourly assessment, which new assessment finding would indicate worsening of the condition?

A) Reflexes 2+
B) Urinary output 20 mL/hour
C) Platelet count 150,000
D) Blood pressure 158/100 mmHg


Question 1389

A nurse is teaching a child care class for mothers of young children. What should the nurse teach as being the most common mode of transmission of infectious disease?

A) Children who are playing with the same toy
B) Children who are playing board games
C) Children who don't wash their hands after using the bathroom
D) Children who are sitting together eating meals


Question 1390

The nurse is teaching a child care class for mothers of young children. What should the nurse teach as being the most common mode of transmission of infectious disease?

A) Children who are playing with the same toy
B) Children who are playing board games
C) Children who don't wash their hands after using the bathroom
D) Children who are sitting together eating meals


Question 1391

The nurse is teaching the family of a client who has just been diagnosed with dementia. The family asks what treatments are available that will cure the client. What would be the nurse's best response to the family?

A) "Treatments to cure dementia include the use of vitamin E."
B) "Treatments to cure dementia include the daily use of ginkgo biloba."
C) "There are no treatments that will cure dementia."
D) "Treatments to cure dementia involve hormone replacement therapy."

Question 1392

A client with angina is experiencing acute chest pain. Which actions would the nurse implement at this time? Select all that apply.
A) Implement bed rest.
B) Coach in non-pharmacological pain management techniques.
C) Administer morphine sulfate 2 mg intravenous push as prescribed.
D) Administer antianxiety medication as prescribed.
E) Administer oxygen at 2 liters/minute via nasal cannula as prescribed.

Question 1393

The nurse preparing to assess a toddler-age client ears. Which actions by the nurse are appropriate? Select all that apply.
A) Having the child sit on the examination table.
B) Having the child play with the equipment.
C) Telling the child the examination will not hurt.
D) Asking the child to tilt the head.
E) Having the child sit on the parent's lap.

Question 1394

A young adult pregnant client tells the nurse that she and her husband are going to a 50th wedding anniversary party for her grandparents this weekend. The client asks the nurse if it will be okay to have a few glasses of wine at the party. Which response by the nurse is appropriate?
A) "Drinking any alcoholic beverages during pregnancy puts your baby at risk for injury."
B) "Alcohol during pregnancy can cause the baby to be born without limbs."
C) "Drinking a few glasses of wine will not be a problem."
D) "Wine is acceptable but not hard liquor."

Question 1395

During an assessment, the nurse learns that a client is experiencing numbness and tingling of the feet and hands. Which findings could be contributing to this client's symptoms? Select all that apply.
A) Plays tennis every Saturday
B) Works on the weekends as an automobile mechanic
C) Alcohol intake one six-pack of beer per day
D) Employed as a computer operator
E) Diagnosed with hypothyroidism

Question 1396

The nurse provides discharge instructions to the parents of a child recovering from surgery to repair a congenital heart defect. What statement indicates that teaching provided to these parents has been effective?
A) "Fluids should be restricted to maximize lung function."
B) "Our child should not return to normal activities for at least 2 years."
C) "Our child will need to take antibiotics prior to having dental surgery."
D) "Our child should be restricted in play and activity for at least 6 months."

Question 1397

When planning care for a client with chronic hepatitis, which collaborative discipline will be most helpful in treating continued alcohol use?
A) Social worker
B) Dietitian
C) Primary provider
D) Pharmacist

Question 1398

After an assessment, the nurse suspects a client with multiple injuries is a victim of domestic violence. Which action should occur next?
Question 1399

The nurse is providing care for a client who is newly diagnosed with chronic obstructive pulmonary disease (COPD). Which action by the nurse conveys therapeutic communication with the client?
A) The nurse plans to tell the client about a COPD support group.
B) The nurse bonds with the client by describing her life living with COPD.
C) The nurse asks appropriate questions about the client's medical history.
D) The nurse closes the conversation with an anecdote about breathing.


Question 1400

The nurse is discussing the various people whom the client will see when in the operating room suite. Which individuals should the nurse emphasize when discussing this aspect of the surgical process with the client? Select all that apply.
A) Anesthesiologist
B) Social worker
C) Surgeon
D) Postoperative nurse
E) Circulating nurse


Question 1401

A nurse working in labor and delivery is planning care for a client who is arriving to the unit from a local obstetrician's office with a suspected perinatal loss. Which nursing intervention is most appropriate in this situation?
A) Place the client in a room closest to the nurse's station to closely observe the client.
B) Place the client in the room furthest from the other clients.
C) Call the hospital chaplain to ensure the chaplain can be in the client's room when the client arrives.
D) Call the local funeral home and notify them of the client's situation.


Question 1402

The nurse is caring for a client with rheumatoid arthritis who expresses the desire to remain active as long as possible. In order for the client to meet this goal, what should the nurse prepare to do?
A) Tell the client there is no hope.
B) Teach the client nutrition and joint exercises.
C) Ask the client the reason for the decision.
D) Refer the client to the appropriate professionals.


Question 1403

The nurse is instructing a client with iron deficiency anemia about appropriate menu choices. Which diet choice indicates that teaching has been effective?
A) Broiled fish, lettuce salad, grapefruit half, carrot sticks
B) Roast beef, steamed spinach, tomato soup, orange juice
C) Pork chop, mashed potatoes and gravy, cauliflower, tea
D) Tofu with mixed vegetables in curry, milk, whole-wheat bun


Question 1404

A college student is being treated for Chlamydia. What should the nurse teach this student to decrease the risk of transmitting another sexually transmitted infection?
A) Unprotected sex is acceptable if you know the partner well.
B) Birth control pills will help to decrease the risk of pregnancy and STDs.
C) Latex condoms should be used for all sexual activity.
D) Condoms should be used with petroleum jelly.

Question 1405

The nurse is conducting a health history with a client with erectile dysfunction. Which finding(s) could provide a possible cause for the client’s problem? Select all that apply.
A) Alcohol intake of 4 to 6 beers each day
B) Body mass index (BMI) of 24.5
C) Blood pressure of 118/68 mmHg
D) Plays golf twice a week
E) Treatment for type 2 diabetes mellitus for 7 years

Question 1406

A nurse educator is teaching a group of student nurses regarding depression, its pathophysiology, and the theories related to the disorder. What statements will the nurse instructor include about the theories of depression? Select all that apply.
A) The sociocultural factor theory states that those who are depressed focus on negative messages in the environment and ignore positive experiences.
B) The learning theory states that individuals with depression typically experience little success in achieving gratification and little positive reinforcement in coping with negative incidents.
C) The sociocultural factor theory suggests that gender socialization differences may be a factor in the higher rate of depression in women.
D) Intrapersonal theory focuses on the theme of loss, either real or symbolic.
E) The learning theory states that individuals learn to be depressed in response to a self-perception of a lack of control over their life experiences.

Question 1407

The nurse is caring for a toddler-age client who starts to have a tonic-clonic (grand mal) seizure while in a crib in the hospital. The child's jaws are clamped shut. What is the most appropriate nursing action?
A) Restrain the child to prevent injury.
B) Stay with the child to observe for complications.
C) Place a tongue blade between the child's jaws.
D) Prepare the suction equipment.

Question 1408

The nurse is prioritizing care needed for a group of clients according to urgency. Which care should the nurse identify as being medium priority? Select all that apply.
A) Administering 2 units of fresh frozen plasma
B) Instructing on changing ostomy appliance
C) Performing endotracheal suction
D) Removing splints and providing complete skin care every 2 hours
E) Performing passive range of motion every 4 hours

Question 1409

The nurse completes teaching for a young adult client diagnosed with Parkinson disease (PD). Which client statement indicates teaching has been effective?
A) "Most people get PD when they are my age."
B) "My brain has too much of a chemical called dopamine."
C) "I probably have a genetic mutation that caused PD."
D) "I could have prevented PD with diet and exercise."

Question 1410

The nurse is evaluating care provided to an older adult client with a history of cholecystitis 5 months ago. Which statement indicates the client met a goal in the plan of care?
A) "I have been walking 1 mile every day."
B) "I have increased my intake of fat."

Page 228 of 355
C) "I have been eating out often."
D) "I have been able to gain 5 pounds on the new diet."

Question 1411
A young adult client is concerned because the healthcare provider states that the client is demonstrating signs consistent with early onset of osteoporosis. Which health promotion activities are appropriate for this client?
A) Suggest stopping all physical activity.  
B) Instruct on increasing intake of calcium and vitamin D.  
C) Recommend reducing the intake of dairy in the diet.  
D) Discuss the use of estrogen replacement therapy.  

Question 1412
A nurse educator is teaching nursing students about the application of personal protective equipment (PPE) and emphasizes the importance of appropriate technique when removing the face mask. Which student response indicates appropriate understanding?
A) "I will tie the strings in a bow."
B) "I will touch the mask by the strings only."
C) "I will bend the strip at the top of the mask."
D) "I will loop the ties over the ears."

Question 1413
A client is brought into the emergency department after being in a motor vehicle accident. The client has suffered traumatic injury that may involve multiple body systems. Which is the priority nursing assessment for this client?
A) Airway maintenance with cervical spine protection  
B) Circulation with hemorrhage control  
C) Disability and neurological assessment  
D) Breathing and ventilation  

Question 1414
An older client is diagnosed with disorders of fat metabolism, reduced absorption of fat-soluble vitamins, and slightly elevated blood glucose level. When caring for this client, on which endocrine organ should the nurse focus interventions?
A) Pancreas  
B) Pituitary  
C) Adrenal medulla  
D) Thyroid  

Question 1415
The nurse delegates vital signs and daily weights of assigned clients to the unlicensed assistive personnel (UAP) on duty. Which is the reason for the nurse to assess each client throughout the shift?
A) The nurse maintains the authority to care for the clients.  
B) The UAP cannot report to the next shift.  
C) The nurse remains accountable for the clients' care.  
D) The UAP is not trustworthy.  

Question 1416
The nurse is caring for a client with a history of urinary tract infections (UTIs). Which action by the nurse would decrease the risk of the client experiencing future UTIs?
A) Instruct the client to completely empty the bladder.  
B) Encourage the client to take bubble baths.  
C) Remind the client to wipe from back to front.  
D) Tell the client to increase sugar in the diet.  
Question 1417
The nurse conducts an evaluation after completing a training session for community members on ways to prevent nephritis. When evaluating the success of this session, what responses should the members provide as evidence that learning has been successful? Select all that apply.
A) Limiting alcohol intake
B) Not smoking
C) Practicing good hygiene
D) Controlling high blood pressure
E) Maintaining a healthy body weight

Question 1418
A nurse is teaching a group in the community ways to decrease the spread of infection. Which measure is the most appropriate for the nurse to include when teaching this group?
A) Use personal protective equipment (PPE) sparingly.
B) Place contaminated linens in a paper bag.
C) Cover the mouth and nose when sneezing.
D) Wear gloves at all times.

Question 1419
An older adult client is experiencing confusion, a temperature of 101.5°F, bruising to the arms and legs, and decreased urine output. The medical diagnosis is a urinary tract infection. Which is the most appropriate nursing diagnosis for this client?
A) Impaired Memory
B) Activity Intolerance
C) Risk for Injury
D) Ineffective Breathing Pattern

Question 1420
The nurse is providing care to a pregnant client who will undergo chorionic villi sampling. The client is currently 8 weeks pregnant. When teaching the client about this genetic testing, which layer of the embryonic membrane is tested during this procedure?
A) Ectoderm
B) Amnion
C) Chorion
D) Endometrium

Question 1421
An older adult client tells the nurse that reading is easier when the material is held to the left or right. What should the nurse suspect this client is experiencing?
A) Cataract
B) Macular degeneration
C) Floaters
D) Vision changes from a stroke

Question 1422
The nurse is providing care to a pediatric client who was admitted to the pediatric intensive care unit (PICU) with a partial-thickness thermal burn. When planning care for this client, which should the nurse consider regarding this type of burn?
A) A superficial partial-thickness burn is less painful than a deep partial-thickness burn.
B) A superficial partial-thickness burn extends from the skin's surface into the papillary layer of the dermis.
C) A deep partial-thickness burn is often bright red and has a moist, glistening appearance with blister formation.
D) Partial-thickness burns are deeper than superficial burns but still involve the epidermis only.

Question 1423
The nurse at an acute care facility is being trained as a case manager. In which ways does the electronic medical record assist the case managers in their job duties? Select all that apply.
A) Allow for easier collection of payment
B) Allow for easier access to client payment history
C) Allow for documentation of client education
D) Allow for trending of client progress
E) Allow for observation of client metrics

Question 1424

The nurse is conducting a community assessment regarding risk factors that increase an individual's risk of being raped. When educating the community about these risks, which will the nurse include? Select all that apply.
A) Attends community college
B) Unemployed
C) Previous history of being raped
D) Current substance abuse
E) Lives with parents

Question 1425

The nurse provides education and supportive assistance for the family of a preschool-age client diagnosed with encopresis. Which statement would indicate parental understanding of appropriate care? Select all that apply.
A) "We will establish a limited schedule of activities that has many breaks to provide opportunities to use the toilet regularly."
B) "We will work on regular elimination after morning and evening meals."
C) "We won't change our child's diet because we were afraid it will be stress provoking."
D) "We will schedule an appointment with a play therapist to help our older child adjust to our new baby."
E) "We will continue to punish our child for having accidents as the behavior is learned and attention seeking."

Question 1426

The nurse is assessing a client for symptoms of prostate cancer. Which symptoms would indicate the client is experiencing an enlarged prostate? Select all that apply.
A) Nerve pain
B) Bone pain
C) Bowel or bladder dysfunction
D) Dysuria
E) Hematuria

Question 1427

Handoff communication, the transfer of information during transitions in care such as during change-of-shift reports, includes an opportunity to ask questions, clarify, and confirm the information between sender and receiver. Which is the main objective for ensuring effective communication during a client handoff?
A) To make sure all documentation is done
B) To ensure client safety
C) To avoid lawsuits
D) To facilitate quality improvement

Question 1428

The nurse is providing care to a visually impaired client who is scheduled for a colonoscopy. The client requires a bowel prep prior to the diagnostic test. Which approach will the nurse use to facilitate the client's understanding of the material?
A) Focus on intonation when teaching the client.
B) Explain the procedure to the client using medical terms for clarity.
C) Use layman's term and ask the client to describe the procedure afterwards.
D) Speak slowly to the client.
Question 1429
The nurse is preparing a seminar that discusses the risk and incidence of cancer and culture. What information is considered culturally correct when teaching about the risk of developing cancer? Select all that apply.
A) Hispanics have an increased risk of cervical, stomach, and liver cancer.
B) The incidence and mortality rate of all type of cancers are lowest in the Caucasian population.
C) African-American are more likely to develop cancer than any other ethnic group.
D) African-Americans are less likely to develop cancer than any other ethnic or racial group in the United States.
E) The Asian/Pacific islander population has the lowest mortality rate of any racial or ethnic group.

Question 1430
A client recovering from surgery to repair fractured bones in the face tells the nurse that dinner "tastes horrible." Which response by the nurse is most appropriate?
A) "The facial injuries are affecting your sense of taste and flavor."
B) "The meal on your tray is the best the cafeteria has to offer today."
C) "You do not have to eat anything you don't want to."
D) "Let me see if I can order something else for you from the cafeteria."

Question 1431
The nurse is teaching a mother how to administer optical antibiotics to her child who has conjunctivitis. Which statement made by the mother indicates teaching has been effective?
A) "I will wait 10 seconds between drops."
B) "I will wash my hands before instilling the medication."
C) "I will rub the eye with a cotton ball after I administer the medication."
D) "I will drop the medication onto the eyeball."

Question 1432
A nursing instructor is teaching a group of student nurses about the cultural implications of prostate cancer. Which statement will the nursing instructor include?
A) "African-American men are at lowest risk for prostate cancer."
B) "A diet low in dairy increases a man's risk for developing prostate cancer."
C) "Asian- and Native American men have the highest risk for developing prostate cancer."
D) "Approximately one in eight men ages 70 and older will be diagnosed with prostate cancer."

Question 1433
The nurse is planning to implement addiction treatment groups at the inner city clinic. Which knowledge regarding addictions and its related therapies will facilitate implementation of the groups?
A) Relapse is a common feature of substance abuse.
B) Clients with a substance dependence cannot be held accountable for their actions.
C) Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) are accepted treatment approaches.
D) Hereditary, as well as complex environmental influences, predisposes one to substance dependence.

Question 1434
The nurse is assessing a toddler diagnosed with tetralogy of Fallot. Which clinical manifestations does the nurse anticipate during the physical assessment? Select all that apply.
A) Nail clubbing
B) Knee-chest position
C) Cough
D) Apneic periods
E) Palpable thrill in the pulmonic area
**Question 1435**

Which is the priority nursing action when providing care to a client who demonstrate signs of escalating anxiety?

A) Phone the physician.  
B) Leave the client alone in a room.  
C) Isolate the client in a safe, quiet, and protective environment.  
D) Provide a benzodiazepine.  


**Question 1436**

While preparing a pain medication for a client, the nurse notes that there is a discrepancy with the last removal and reports the incident. Which is an expected consequence of the nurse's action?

A) Being ostracized by the staff  
B) Being protected by the law  
C) Being summoned to testify  
D) Being sued by the nurse who made the error  


**Question 1437**

An older adult client is brought into the emergency room after experiencing a fall. The nurse suspects elder abuse. Which assessment findings support the nurse's suspicions? Select all that apply.

A) Dislocations  
B) Fecal impaction  
C) Intracranial trauma  
D) Poor hygiene  
E) Dehydration  


**Question 1438**

The nurse educator is teaching a group of nursing students about the purpose of documentation and medical records. Which purpose is appropriate for the educator to include in the teaching session with the students?

A) Planning  
B) Auditing  
C) Research  
D) Communication  


**Question 1439**

The nurse is attempting to place a urinary catheter for an older adult female client. The nurse is unable to visualize the client's urinary meatus. Which alternate position for catheterization may be appropriate for this client?

A) Supine, with the bed flat, legs bent and apart in stirrups.  
B) Side-lying, lifting up the buttock.  
C) Supine, with the head of bed (HOB) elevated at 45°.  
D) Supine, with the HOB elevated at 30°.  


**Question 1440**

A hospice nurse is critically evaluating various models of grief used for terminally ill clients and their families. Which should the nurse recognize when applying these models to individual client cases?

A) The Kübler-Ross model is primarily used to describe anticipatory grief.  
B) The models serve as clear and definitive predictors of grief behaviors.  
C) There is strong research proving that these models are not useful for many dying clients.  
D) No clear timetables exist, nor are there clear-cut stages of grief.  


**Question 1441**

The nurse taking care of a Vietnamese client knows to respect the client's cultural views and honor traditions regarding healthcare decision making. In
order to be an effective advocate, which factors are important to the nurse? Select all that apply.

A) Understanding that advocacy may require political action
B) Evaluating advocacy decisions
C) Being assertive and recognizing the rights and values of clients and families
D) Honoring societal differences
E) Being aware that conflicts may arise

Answer: [Link]

Question 1442

The nurse is teaching a class at a local community center about decreasing risk factors for cancer. Which risk factors should the nurse include in the teaching regarding leukemia? Select all that apply.

A) Alkylating agents
B) Bloom syndrome
C) Decreased exercise
D) Exposure to infectious agents
E) Diets low in fat

Answer: [Link]

Question 1443

The nurse is caring for a client from another country who was admitted with hypertension and chronic renal failure. The client is receiving hemodialysis three times a week. The nurse is assessing the client's diet and the client reports the use of salt substitutes. When teaching the client to avoid salt substitute, which rationale supports this teaching point?

A) They will increase the risk of AV fistula infection.
B) They can potentiate hyperkalemia.
C) They will interact with the client's antihypertensive medications.
D) They will cause the client to retain fluid.

Answer: [Link]

Question 1444

The nurse manager of a neonatal intensive care unit (NICU) is planning continuing education for the development of the staff. The manager is asking an expert to conduct a class regarding the newest information on developmentally appropriate care. Which outcome indicates the goal of the education has been met?

A) The staff uses the information on the unit with a client successfully.
B) The staff can set up a developmentally appropriate incubator in the classroom.
C) The unit educator states that the nurses passed the written exam.
D) The staff members state that they feel competent in providing developmentally appropriate care to their clients.

Answer: [Link]

Question 1445

The spouse of a pregnant client tells the nurse that he is not sure he is ready to be a father and wishes his wife had not gotten pregnant. Which response by the nurse is appropriate?

A) "Tell me more about why you feel this way."
B) "Have you considered giving the baby up for adoption?"
C) "Do you think your wife got pregnant on purpose, without your consent?"
D) "Every husband has these feelings, and many times they never go away."

Answer: [Link]

Question 1446

A client being treated for hypovolemic shock is prescribed a low dose of dopamine. Which outcome does the nurse anticipate for this client?

A) Stabilization of fluid loss
B) Urinary output of at least 30 mL/hour
C) Increased cardiac output
D) Vasoconstriction and increased blood pressure

Answer: [Link]

Question 1447

The nurse is caring for the family of a terminally ill client. The family members have been tearful and sad since the diagnosis was given. What is the best nursing diagnosis for this family?
### Question 1448

The nurse is caring for a client with metastatic breast cancer receiving chemotherapy. Even though the prognosis is poor, the client tells the nurse that the plan is to do everything to survive. How should the nurse respond to this client?

- A) "You should face the reality of the situation. You do not have a good chance of survival."
- B) "It is important to plan for your death, even though there is a chance you will survive."
- C) "I am going to speak with your family regarding your unrealistic expectations."
- D) "You have a great attitude and I am here to support you through education to help you survive."


### Question 1449

A client was admitted with a gunshot wound sustained during a robbery. What does the nurse suspect contributed to this client's injury?

- A) The gunman's unemployment
- B) The gunman's age of 45
- C) The crime's suburban location
- D) The gunman's college education


### Question 1450

An Asian-American adolescent is hospitalized following several days of vomiting due to food poisoning. The nurse is planning to include which points when teaching the client's family at discharge? Select all that apply.

- A) Normal laboratory values of the adolescent
- B) Proper food-handling techniques
- C) Nutritional patterns of the adolescent
- D) Signs and symptoms of metabolic alkalosis
- E) Immunizations for the adolescent


### Question 1451

A group of nurses have volunteered to go on a health mission to rural Haiti. The majority of the people the nurses will be working with do not have access to health care and live in poverty. Based on this data, which level of wellness do the nurses' anticipate when providing care during this mission trip?

- A) An emergent high level of wellness in an unfavorable environment
- B) Poor health in an unfavorable environment
- C) Protected poor health in an unfavorable environment
- D) Protected poor health in a favorable environment


### Question 1452

The nurse is preparing teaching for a client with hypertrophic cardiomyopathy. Based on this diagnosis, which medication classification should the nurse prepare to include in the teaching?

- A) Nitrates
- B) Beta blocker
- C) Vasodilators
- D) Digitalis


### Question 1453

The nurse assesses a client with a history of alcoholism who is hospitalized with anorexia, dysphagia, odynophagia, and chest pressure after eating. Which nursing diagnosis is a priority for this client?

- A) Disturbed Thought Processes
- B) Ineffective Coping
- C) Disturbed Sensory Perception
D) Imbalanced Nutrition: Less Than Body Requirements

Question 1454

The nurse is teaching a group of adolescents at a local high school about skin infections. Which students does the nurse identify as at an increased risk for developing cellulitis? Select all that apply.
A) The student practicing hand hygiene.
B) The student who squeezes pimples.
C) The female student who plucks her eyebrows.
D) The student with diabetes.
E) The student who engages in contact sports.

Question 1455

A client sustained multiple fractures in a motor vehicle accident. The nurse determines that the client is at a high risk for osteomyelitis due to which type of fracture?
A) Comminuted
B) Depression
C) Avulsion
D) Open

Question 1456

The nurse suspects that a healthy client could be experiencing stress because of which laboratory result?
A) Serum calcium of 10.2 mEq/L
B) Serum potassium of 4.0 mEq/L
C) Serum glucose of 165 mg/dL
D) Serum sodium of 142 mEq/L

Question 1457

A hospitalized older adult client suddenly does not recognize an adult daughter and states, "Why hasn't my wife come to see me?" The client's spouse has been dead for 5 years. Prior to the hospitalization, the client was clear of mind and thought. Which nursing diagnoses would be appropriate for this client? Select all that apply.
A) Acute Confusion
B) Anxiety
C) Impaired Memory
D) Risk for Autonomic Dysreflexia
E) Ineffective Coping

Question 1458

A nurse is concerned about potential substance abuse by a coworker. Which of the coworker's behaviors would place the clients on the unit at risk for injury?
A) The nurse in question frequently volunteers to give medications to clients.
B) The nurse in question frequently requests the largest client care assignment for the shift.
C) The nurse in question declines to take scheduled breaks.
D) The nurse in question prefers not to be the "medication nurse" on the shift.

Question 1459

The nurse is caring for a client on a medical-surgical unit that has just implemented the electronic medical record for client documentation. The client asks the nurse about the facility's computerized system for keeping client information, especially in regard to confidentiality. Which is the best response by the nurse?
A) "Information in the electronic medical record requires a password to retrieve."
B) "Don't worry; your information is always safe."
C) "I can see why you're worried, with all the computer hackers out there these days."
D) "Our system was designed with a lot of input from nursing staff."
Question 1460

The nurse is reviewing new prescriptions provided by the healthcare provider for a client with metabolic acidosis. Which prescription should the nurse question before implementing it for the client?

A) Administer 1 ampule of sodium bicarbonate now.
B) Draw arterial blood gas samples every 2 hours.
C) Begin intravenous infusion of 0.9% normal saline.
D) Draw serum potassium levels every 2 hours.


Question 1461

An older school-age child is brought to the emergency department after a car accident. The parents witness and stare at the resuscitation scene unfolding before them. The child is not responding to the resuscitative efforts after 30 minutes. Which is the best communication strategy for the nurse to use in this situation?

A) Ask the parents to leave until the child has stabilized.
B) Ask the parents whether they would like resuscitative efforts to be continued at this point.
C) Ask the parents to stand at the foot of the cart to watch.
D) Inform the parents that resuscitative efforts have not been effective and are not beneficial to the child.


Question 1462

The nurse is providing care to a 1-month-old infant who is brought to the pediatric clinic for projectile vomiting. Which data collected during the assessment process would support the diagnosis of pyloric stenosis? Select all that apply.

A) Consistent weight gain
B) Persistent hunger
C) Blood-tinged vomit
D) Low-grade fever
E) Peristaltic wave


Question 1463

The nurse educator is teaching a group of nursing students about factors that increase the risk for premature birth. Which statements are appropriate for the educator to include? Select all that apply.

A) "Lesbians have an increased risk for premature labor."
B) "Pregnancy after the age of 33 years increases the risk for premature labor."
C) "Single women are at an increased risk for giving birth to a premature infant."
D) "Adolescent clients are at an increased risk for giving birth to a premature infant."
E) "Married women are at an increased risk for giving birth to a premature infant."


Question 1464

The nurse is caring for a client who sustained multiple injuries in an automobile accident. As a part of secondary prevention for this client, which does the nurse include in the plan of care?

A) Promote wellness.
B) Prevent the progression of more symptoms.
C) Detect early disease.
D) Restore the client to previous functioning.


Question 1465

A nursing student is talking to the instructor about developing professional behavior. Which action does the instructor recommend to the student in order to access information that may be useful in developing professional demeanor?

A) Join the National Student Nurses Association (NSNA).
B) Use the Internet to obtain information.
C) Join the America Nurses Association (ANA).
D) Read the Nurse Practice Act.

Question 1466

The nurse is caring for a client who was diagnosed with posttraumatic stress disorder 4 months ago. Which should the nurse include in the client's plan of care?
A) Referral to local employment agency
B) Information on the treatments available
C) Guidelines on conducting activities of daily living
D) Information on the need for adequate exercise

Question 1467

The nurse is providing care to a client who returns to the medical-surgical unit after herniated disk surgery. The client's HR is 100, RR 22, BP 130/86 mmHg, temperature 98.8 degrees F, and a pain rating of 7 on a scale of 1 to 10. Which nursing diagnosis is the priority for this client based on the assessment data?
A) Acute Pain
B) Activity Intolerance
C) Chronic Pain
D) Impaired Physical Mobility

Question 1468

A client who is postmenopausal confides in the nurse about pain experienced during intercourse. What should the nurse instruct the client to do?
A) Decrease the frequency of intercourse to decrease the pain.
B) Tolerate this problem because it is a normal part of aging.
C) Avoid intercourse.
D) Use vaginal lubricants during intercourse.

Question 1469

The nurse is preparing to provide an enteral feeding to a preterm infant. Which is the priority nursing action prior to administering the feeding?
A) Weigh the baby.
B) Measure abdominal girth.
C) Weigh the current diaper.
D) Measure pulse oximetry.

Question 1470

A nurse is caring for a client who is newly diagnosed with rheumatoid arthritis (RA). The client asks the nurse what the difference is between RA and osteoarthritis (OA). Which responses by the nurse are the most appropriate? Select all that apply.
A) "With OA, multiple joints are symmetrically affected; RA affects one joint at a time."
B) "The affected joints in RA feel cold to the touch while the joints affected by OA are warm or hot to the touch."
C) "OA is slowly progressive while RA is characterized by exacerbations and remissions."
D) "The pain and stiffness with RA is with activity; OA pain and stiffness is predominant upon arising."
E) "The onset of OA is gradual while the onset of RA may be rapid."

Question 1471

A client with heart failure is admitted to the hospital for the placement of an implantable defibrillator. The client appears comfortable at rest but displays dyspnea with activities of daily living (ADLs). In which stage of heart failure does the nurse classify this client?
A) I
B) II
C) III
D) IV

Question 1472

The nurse is planning care for a baby of African-American descent born to a mother who smoked during the pregnancy. Which nursing diagnosis
Question 1473

A home care nurse is caring for a client who is recovering from recent surgical debridement that produced large amounts of exudate. The client's surgical wound has staples that are aiding in the wound healing. When documenting this client's care, which terminology best describes this client's care?
A) Tertiary intention healing
B) Secondary intention healing
C) Primary intention healing
D) Quaternary intention healing

Question 1474

Parents of a child diagnosed with celiac disease have requested guidance on how to implement an appropriate diet. In addition to a list of foods to include and exclude, which interventions by the nurse are appropriate? Select all that apply.
A) Implementing a recommended exercise program
B) Training on how to read food labels
C) Encouraging the use of a gluten-free cookbook
D) Providing a referral to support groups
E) Obtaining a dietary prescription

Question 1475

A nurse working on a medical-surgical unit wants to ensure care is provided within the standard of nursing care. Which actions by the nurse are appropriate? Select all that apply.
A) Question the value of collaborating with other disciplines.
B) Adhere to national standards of practice and care.
C) Ensure the nursing process steps are practiced.
D) Review and become familiar with the policy and procedure manual.
E) Analyze the position description.

Question 1476

The nurse is caring for a client with functional incontinence. Which are factors in the development of this type of incontinence? Select all that apply.
A) Fecal impaction
B) Depression
C) Impaired mobility
D) Confusion
E) Prostate surgery

Question 1477

The nurse needs to assess the body temperature of a client who has just smoked a cigarette and consumed hot coffee. Which temperature assessment method should the nurse use?
A) Temporal artery
B) Axillary
C) Rectal
D) Tympanic

Question 1478

The nurse is concerned that a client with potential hepatic failure is at risk for developing ascites. Which assessment finding supports the nurse's concern?
A) Yellow-tinged skin  
B) Gallbladder pain  
C) Bleeding and bruising easily  
D) Increased abdominal girth  

Question 1479
A client is recovering from cochlear implant surgery. What is true regarding cochlear implants?  
A) They restore normal hearing to those who could not hear any sound prior to implantation.  
B) With implantation, the structures of the middle ear are reconstructed to improve conductive hearing deficits.  
C) They may be the only hope for restoring sound perception for the client with a total and permanent hearing loss.  
D) Their function is more similar to the way the ear normally receives and processes sounds than it is to that of a hearing aid.  

Question 1480
The nurse is assessing the vital signs of a client experiencing hypoparathyroidism. While monitoring the blood pressure, the nurse notes the client's hand begins to spasm. Which term is appropriate for the nurse to use when documenting this assessment finding?  
A) Turner's sign  
B) Chvostek sign  
C) Trousseau sign  
D) Cullen's sign  

Question 1481
The nurse is providing care to a client who has just received the diagnosis of cancer. Which findings would suggest that the client is experiencing spiritual distress? Select all that apply.  
A) Client discusses possible outcomes with healthcare provider.  
B) Client is talking quietly with spouse.  
C) Client is observed crying with children.  
D) Client turns off the television and stares out the window.  
E) Client refuses to talk with family.  

Question 1482
The nurse is caring for an older adolescent client diagnosed with malignant melanoma. Which nursing diagnoses would be appropriate when planning this client's care? Select all that apply.  
A) Disturbed Body Image  
B) Impaired Skin Integrity  
C) Anxiety  
D) Risk for Compromised Human Dignity  
E) Risk for Acute Confusion  

Question 1483
A nurse is caring for a toddler client whose parent suspects may have attention-deficit/hyperactivity disorder (ADHD). Which statements does the nurse know to be true regarding diagnosis criteria for ADHD? Select all that apply.  
A) Children must have 3 or more symptoms that have persisted for 3 or more months with negative impacts.  
B) Children must have a physical examination prior to the diagnosis of ADHD to rule out other diseases.  
C) Diagnostic criteria for ADHD are nonspecific and vary with every child.  
D) Children with learning disabilities are often misdiagnosed as having ADHD.  
E) Children must have 6 or more symptoms that have persisted for 6 or more months with negative impacts.  

Question 1484
A client with schizophrenia is exhibiting attention deficit and difficulty remembering recent events. Which is an appropriate expected outcome for this client?  
A) Client will interact well with others before discharge.  
B) Client will exhibit an increased attention span in 1 week.
Question 1485
Which statement is a primary and historical barrier to effective nurse-physician collaboration that has persisted over time?
A) The nurses’ and physicians’ perceptions of inequity in their roles, with nurses assuming a subservient role and physicians assuming leadership and superior role in healthcare settings
B) A lack of published evidence about the effectiveness of collaborative efforts among and between nurses and physicians
C) A general lack of education provided in schools for health professionals about the benefits on healthcare quality linked to nurse-physician collaboration
D) The lack support at the federal level for efforts to improve health care among the general population through increased nurse-physician-client collaboration.
E) The view among the general population that that nurses' contributions to clients' care is less important to their health and well-being compared to the contribution of physicians

Question 1486
The nurse receives shift report on a pediatric medical-surgical unit. The nurse has been assigned four clients for the shift. Which client does the nurse plan to assessment first based on the increased risk for dehydration?
A) A 15-month-old child with tachypnea
B) A 4-year-old child with a broken leg
C) A 10-year-old child with cellulitis of the left leg
D) A 16-year-old child with migraine headaches

Question 1487
An older adult client with severe burns over more than half of the body has an indwelling catheter. When evaluating the client's intake and output, which should be taken into consideration?
A) The amount of urine will be reduced during the first 8 hours of the burn injury and will then increase as diuresis begins.
B) The amount of urine will be reduced in the first 24 to 48 hours and will then increase.
C) The amount of urine will be elevated due to the amount of intravenous fluids administered during the initial phases of treatment.
D) The amount of urine output will be greatest in the first 24 hours after the burn injury.

Question 1488
An older adult client, reporting a significant loss of hearing after being involved in an explosion, asks when hearing will return. Which response by the nurse is most appropriate?
A) Loud noises can cause immediate, permanent loss of hearing.
B) Hearing loss attributed to loud noises is normally reversible.
C) The most common cause of hearing impairments is exposure to loud noises.
D) Surgery will help restore the hearing you have lost.

Question 1489
The nurse is preparing to assess comfort for several clients. Which will the nurse assess, in addition to the client's physical experience of pain, during this process? Select all that apply.
A) Psychospirituality
B) Friendship
C) Environment
D) Religion
E) Social interaction

Question 1490
A client with osteoarthritis of the knees tells the nurse that no one else in the family has this disorder. What assessment finding might have increased this client's risk for developing this disorder?
A) History of esophageal reflux disease
Nursing: A Concept-Based Approach to Learning, Volume I - 2195 Total Questions - Biology-Forums.com

Question 1491
The nurse is conducting a home risk assessment for a family with toddler and preschool-age children. Which finding is considered a safety hazard for this family?
A) Lack of helmets next to bicycles
B) Deadbolt locks on the doors
C) Medications on the kitchen counter
D) Safety plugs in electrical outlets

Question 1492
Which assessment findings increase a client's risk for suicidal ideation or behavior? Select all that apply.
A) Widowed for 6 months
B) Recently started a new job
C) Age 59
D) Substance abuse
E) Plays golf twice a week

Question 1493
Which nursing intervention minimizes the stress and anxiety of hospitalization for a client?
A) Explain all procedures in detail before performing them.
B) Let the client make the majority of decisions about the plan of care.
C) Control the environment of healing.
D) Demonstrate staff competence by using multiple nurses for care.

Question 1494
Which observation indicates that interventions provided to a client with neck injuries from a motor vehicle crash have been successful?
A) Moves all four extremities independently, feeds self, and participates in partial bath
B) Rests in bed with lights and television turned off
C) Unable to move independently in bed
D) Urine is clear and odorless from indwelling catheter

Question 1495
A young school-age child is seen in a pediatric clinic for a well-child checkup. The parent tells the nurse that they live in the country and use well water. Based on this data, which statement by the nurse is the priority when conducting client teaching?
A) "Your child will need to be placed on a fluoride supplement because your primary water source is from a well."
B) "I will recommend some mouthwashes that are appropriate for clients that drink well water."
C) "Your child will need to use a teeth whitener in the future because well water is your primary water source."
D) "It will be very important that your child does not eat sugary foods because you drink well water."

Question 1496
The nurse is caring for a client who has been admitted to the unit with respiratory failure and respiratory acidosis. Which data from the nursing history would the nurse suspect contributed to the client's current state of health?
A) A recent trip to South America
B) Recent recovery from a cold virus
C) Use of ibuprofen for the control of pain
D) Aspiration pneumonia
Question 1497

A client is receiving care for an elevated body temperature. Which assessment findings indicate that care has been effective? Select all that apply.
A) Moist mucous membranes
B) Good skin turgor
C) Heart rate of 120 beats per minute
D) Blood pressure of 118/68 mmHg
E) Urine output of 20 ml/hour

Question 1498

After giving birth to a preterm infant who is being cared for in the neonatal intensive care unit (NICU), an adolescent client says, "My baby doesn't seem real because she's in the hospital and I'm at home." What can the nurse do to promote parent-infant attachment?
A) Explain that once the baby is discharged to home, she will have evidence that the baby is real.
B) Limit visits to the intensive care unit so as not to disrupt care of the baby needs.
C) Provide a picture of the infant including a footprint and current weight and length.
D) Have the mother visit when the baby is asleep or resting.

Question 1499

A client is admitted with a diagnosis of post-traumatic stress disorder (PTSD). During a review of the client's history, the nurse is made aware that the client suffers from depression and suicidal thoughts. While interviewing the client, the client tells the nurse he is feeling extremely irritable and that the main reason he is there is because he has been having frequent nightmares. Based on the assessment findings, which medication prescription does the nurse anticipate for this client?
A) Prazosin (Minipress)
B) Propanolol (Inderal)
C) Fluvoxamine (Luvox)
D) Risperidone (Risperdal)

Question 1500

A client comes into the emergency department with an eye injury after being hit with a tennis ball. Which assessment findings does the nurse anticipate? Select all that apply.
A) Decreased visual acuity and a reddish tint to vision
B) Photophobia and eye tearing
C) Eye pain and loss of vision
D) Cloudy cornea
E) Lid ecchymosis with subconjunctival hemorrhage

Question 1501

A client with a walking disability tells the nurse that going out alone at night is not an option for fear of being a target for a crime. Which has the client identified based on this data?
A) A predisposing factor
B) A vulnerability factor
C) A risk factor
D) A precipitating factor

Question 1502

The nurse is assessing an older adult client and observes that the client is having several cognitive problems, including memory and attention deficits and fluctuating levels of orientation. The nurse confirms with the family that the client's symptoms developed over a several-year period. Which health problem is the client most likely experiencing?
A) Delirium
B) Intellectual disability
C) Dementia
D) Depression
**Question 1503**

A nurse preceptor on the progressive care unit is orienting a newly licensed nurse. Which action taken by the newly licensed nurse requires immediate intervention by the nurse preceptor?

A) The nurse preceptor observes the newly licensed nurse recapping the needle with the use of forceps.
B) The nurse preceptor observes the newly licensed nurse picking up contaminated broken glass.
C) The nurse preceptor observes the newly licensed nurse recapping a needle using the scoop method.
D) The nurse preceptor observes the newly licensed nurse disposing of a needle in the sharps container.


**Question 1504**

The nurse is providing care to a client who is experiencing nausea and vomiting during the first trimester of pregnancy. Which actions by the nurse are appropriate based on this data? Select all that apply.

A) Notify the healthcare provider that the client is experiencing hyperemesis gravidarum.
B) Educate the client to notify the healthcare provider if she vomits once per day.
C) Suggest the client use acupressure to pressure points on the wrist.
D) Caution the client against using over-the-counter medications such as over-the-counter antihistamines.
E) Teach the client that ginger may relieve her symptoms.


**Question 1505**

A client diagnosed with chronic pancreatitis, asks if there are any alternative therapies that might help with treating the condition. The nurse teaches the client that which complementary and alternative therapies can be safely used in conjunction with traditional treatment? Select all that apply.

A) Aerobic exercise
B) Magnetic field therapy
C) Qigong
D) Low-salt, low-fat vegetarian diet
E) Herbal kava tea


**Question 1506**

The nurse is caring for client recovering from a liver transplant necessitated by cirrhosis of the liver. Which postoperative outcome would be a priority for this client?

A) Ability to move the legs
B) Moist membranes of the mouth
C) Normal serum bilirubin levels
D) Normal pupil reaction


**Question 1507**

The nurse is caring for a client with cirrhosis of the liver. Which information in the client's health history supports the current medical diagnosis?

A) Plays on an adult softball team several times a week.
B) Drinks a six-pack of beer each evening.
C) Smokes two packs of cigarettes per day.
D) Eats salads for lunch every day.


**Question 1508**

The mother of a preadolescent client meets with the school nurse to discuss the recent diagnosis of scoliosis. The mother shares that she is worried that her child wants to start home schooling due to the need to wear a brace. Which interventions will support the nursing diagnosis of Disturbed Body Image related to deformity and brace? Select all that apply.

A) Suggest that the pediatrician prescribe an anti-anxiety agent for the student.
B) Include the student and family in a meeting to elicit her feelings about scoliosis and wearing a brace.
C) Teach the student and family about clothing that will hide the brace.
D) Offer to arrange a meeting for the student with an 8th grader who has scoliosis.
E) Encourage the student and family to register for home schooling and minimize risk of ridicule.

**Question 1509**

The parents of an infant report that the baby is fussy all of the time and does not eat or sleep well. Which action by the nurse is most appropriate?

A) Observing the interactions between the parents and the infant  
B) Feeding the baby  
C) Giving the baby medicine for colic  
D) Drawing blood for laboratory work  


**Question 1510**

The nurse is taking care of a client being discharged but will need home nursing care, physical therapy, and speech therapy. Which framework helps the client who has multiple care needs?

A) Managed care  
B) Client-focused care  
C) Case management  
D) Multidisciplinary nursing teams  


**Question 1511**

The nurse is working with a family that is new to the pediatric practice. In reviewing the family’s records, the nurse notes that the older children have a large number of dental caries. Which topics will the nurse include when teaching the mother how to decrease the development of dental caries in infants? Select all that apply.

A) Refraining from nursing or giving the infant a bottle at bedtime  
B) Using a toothbrush as soon as the first tooth erupts  
C) Wiping the infant’s gums with soft moist gauze once or twice daily  
D) Giving the infant sugar water only at breakfast time  
E) Using a topical anesthetic daily, beginning as soon as the first tooth begins to erupt  


**Question 1512**

The nurse instructs a married couple on the importance of treatment for a chlamydia infection. Which statements indicate that teaching was effective? Select all that apply.

A) “She could have severe vaginal itching.”  
B) “It could cause us to develop rashes.”  
C) “He could get an infection in the tube that carries the urine out.”  
D) “She could become pregnant.”  
E) “She could develop a worse infection of the uterus and tubes.”  


**Question 1513**

The nursing diagnosis Noncompliance related to unknown factors is established for a client with hypertension who admits to occasionally taking prescribed antihypertensive medications. Which behavior should the nurse demonstrate when discussing reasons for noncompliance with this client?

A) Nonjudgmental  
B) Confrontational  
C) Indifference  
D) Direct  


**Question 1514**

The nurse is providing care for a 2-year-old client. When assessing the client's risk for abuse, which increase this client's risk? Select all that apply.

A) The child has bruises on the knees and shins.  
B) The child's parents are married.  
C) The child's parents are unemployed and receive medical assistance.  
D) The child is deaf.  
E) The child is less than 3 years old.  

### Question 1515
The nurse is conducting a class in the community regarding alcohol use to a group of college seniors. During the class a participant admits to frequently using alcohol. Which is the priority action of the nurse?

A) Complete a crisis assessment.
B) Initiate a community assessment of the campus.
C) Contact the campus nurse and refer the student.
D) Notify campus security to watch for driving under the influence.


### Question 1516
The nurse conducting a 5-minute Apgar assessment on a newborn assigns the following ratings: Heart rate < 100 beats per minute (1 point); slow, irregular respirations (1 point); some flexion of the extremities (1 point); a vigorous cry with flicking of the baby's foot (2 points); and a pink body with blue extremities (1 point). Based on this data, which nursing action is appropriate?

A) Placing the newborn in the mother's arms and asking her to monitor her baby's breathing
B) Swaddling the newborn to decrease the risk of increased energy expenditure
C) Repeating the assessment every 5 minutes for up to 20 minutes
D) Having the aide reassess the newborn's heart rate and respiratory rate when admitted to the nursery


### Question 1517
The nurse is identifying nursing diagnoses appropriate for a client with severe symptoms of tinnitus, vertigo, sensorineural hearing deficit, nausea, and vomiting. Which diagnosis would be a priority for this client?

A) Disturbed Sensory Perception: Auditory
B) Imbalanced Nutrition: Less than Body Requirements
C) Disturbed Sleep Pattern
D) Risk for Injury


### Question 1518
The nurse is preparing discharge instructions for a client with an open surgical wound. Which instructions are important for the nurse to include for this client? Select all that apply.

A) Thoroughly irrigate the wound with hydrogen peroxide.
B) Notify your doctor if you notice edema, heat, or tenderness at the wound site.
C) Apply lubricating lotion to the edges of the wound.
D) Wash hands before and after changing the surgical dressing.
E) Adjust your diet to increase the amount of protein.


### Question 1519
The nurse is caring for a client who returns to the unit following transurethral resection of the prostate due to prostate cancer with a three-way Foley catheter in place. The client states that he has the urge to urinate and wants the catheter removed. The nurse knows that this feeling is caused by spasms. Which response by the nurse is the most appropriate?

A) "This must be a complication, because the Foley catheter is supposed to evacuate clots that cause the sensation you are describing."
B) "This is an expected sensation, but the Foley catheter must remain in place."
C) "The spasm is an unexpected finding because the procedure does not invade the urethra."
D) "The sensation is caused by the silicone used in the catheter. I will speak to the doctor about switching to a different catheter."


### Question 1520
The nurse is providing care to a client diagnosed with chronic obstructive pulmonary disease (COPD)? Which factors in the client's history support the current diagnosis? Select all that apply.

A) Working in an office setting with air conditioning
B) Playing golf several times a week
C) History of asthma
D) Working in an industrial environment
E) Current cigarette smoking


Page 246 of 355
Question 1521

The nurse is caring for a client with acquired immunodeficiency syndrome (AIDS) who is antiretroviral therapy. The client complains of nausea, fever, severe diarrhea, and anorexia. Which prescribed medications does the nurse anticipate in order to relieve the anorexia and to stimulate the client's appetite? Select all that apply.

A) Megestrol (Megace)
B) Dronabinol (Marinol)
C) Zidovudine (Retrovir, AZT)
D) Ciprofloxacin (Cipro)
E) Abacavir (Ziagen)


Question 1522

A client is started on antibiotic therapy for a respiratory infection. Which goal is appropriate for this client?

A) The client's temperature will approach normal within 60 minutes of the administration of the antibiotic.
B) The client's mucus membranes will be dry.
C) The client's temperature will be within normal limits within 48 to 72 hours of the administration of the antibiotic.
D) The client will have no evidence of sweating.


Question 1523

The staff development educators require that all nurses attend an annual cardiopulmonary resuscitation (CPR) update even though the American Heart Association only requires revalidation of knowledge and skill every two years. When asked by a participant why this is a necessary, which response by the staff development educator is appropriate?

A) "We are required to provide a minimum number of contact hours in order to maintain our certification as educators."
B) "Your nurse manager requires this. If you disagree, you should speak directly with the manager."
C) "Why don't you want prove you can perform this mandatory requirement of your position?"
D) "Since this is a mandatory requirement that is not used on a daily basis, we need to assess your skill annually."


Question 1524

The nurse is providing care to a client admitted after experiencing an acute asthma attack. Which assessment findings indicate the need for immediate intervention by the nurse? Select all that apply.

A) Retractions and fatigue
B) Diffuse wheezing and the use of accessory muscles when inhaling
C) Inaudible breath sounds
D) Tachycardia and tachypnea
E) Reduced wheezing and an ineffective cough


Question 1525

A home care nurse is applying an Unna boot on a client with a stasis ulcer. Which statement will the nurse include when providing client education regarding this therapy?

A) "The dressing I am applying is semi-rigid."
B) "The dressing will be applied to the entire length of your leg."
C) "A nurse will change this dressing every 2 days."
D) "It is important that you maintain strict bed rest."


Question 1526

A client is prescribed a beta blocker as treatment for glaucoma. What should the nurse instruct this client about this medication?

A) Expect to have eye pain.
B) Expect the fingers and toes to tingle.
C) Occlude the lacrimal duct after administration.
D) Measure weight daily.

Question 1527

The nurse is evaluating care provided to a client recovering from hip replacement surgery. Which piece of documentation in the medical record indicates that the client has achieved the expected outcome for pain management?
A) The client is crying and requesting pain medication prior to morning care.
B) The client states pain is a 6 on a numeric pain scale of 1 to 10 prior to evening care.
C) The client is using PCA pump around the clock and rates pain as a 2 on a numeric pain scale of 1 to 10.
D) The client refuses pain medication prior to physical therapy. Pain is rated as a 7 on a numeric pain scale of 1 to 10.


Question 1528

The nurse is planning care for a client admitted with heart failure. Based on this diagnosis, which type of renal failure is the client at an increased risk for experiencing?
A) Intrarenal glomerular injury
B) Intrarenal acute tubular necrosis
C) Prerenal low cardiac output
D) Prerenal hypovolemia


Question 1529

A young mother brings her children to the health department for routine immunizations. The mother is crying because she lost her job and fears that her asthmatic daughter may be denied appropriate health care because she is unable to pay for it. The nurse realizes that many clients are experiencing these fears. Which action by the nurse would have the greatest impact for all clients who experience this fear?
A) Becoming involved in the American Nurses Association (ANA)
B) Giving the client medications and supplies from the clinic at no charge
C) Moving to an area that needs healthcare workers
D) Reminding the client that everything will be fine


Question 1530

The nurse is providing care to a client who is diagnosed with a personality disorder. Which finding indicates the treatment plan has been beneficial for this client?
A) The client eats sporadically and reports being told she has been bad and does not deserve to eat.
B) The client asks others for money because the client's was stolen.
C) The client has ceased self-mutilating behavior and bathes once a week.
D) The client sits with others in lounge area conversing about current affairs.


Question 1531

A veteran nurse is working on a large medical-surgical unit. The nurse is caring for a client with MRSA who requires frequent dressing changes. Which action by the nurse would help control the cost associated with this client's care?
A) Wiping down equipment at the end of the shift
B) Making sure the client's room is stocked with all needed supplies
C) Storing equipment in the client's room
D) Placing a cart with supplies outside the client's room


Question 1532

During a care conference the nursing student differentiates between the different theories of caring when discussing client care. Which type of knowledge is the student demonstrating?
A) Aesthetic knowing
B) Personal knowing
C) Empirical knowing
D) Ethical knowing


Question 1533
A client asks the student nurse to explain the pathophysiology of diabetes. The student nurse does not know the answer to this question. What should the student respond to the client?

A) "Why do you need to know that?"
B) "I do not know."
C) "I do not know, but I will find out."
D) "You'll have to ask the doctor that question."


**Question 1534**

A client is receiving care in the hospital for life-threatening injuries sustained in a motor vehicle crash and is taken immediately to surgery. There is no family available to provide consent; however, the client's medical record is available and reviewed by the nurse. Which treatments are inappropriate in this situation? Select all that apply.

A) Medications to treat the injury
B) Treatment that violates religious beliefs
C) Experimental medications for a research study
D) Treatment that was previously refused
E) Emergency surgery


**Question 1535**

The nurse has established as an expected outcome that a client will "demonstrate healing of a stage II pressure ulcer over the coccyx." Which finding indicates that the client failed to achieve this outcome?

A) The client's serum albumin increased over the last month.
B) Nurses did not document disinfection of the wound with alcohol with each dressing change.
C) A right side-back-left side-back turning schedule was utilized.
D) The rubber doughnut pressure relief device was not delivered by central supply.


**Question 1536**

The nurse in the emergency department is preparing to administer methylprednisolone to a client with a spinal cord injury. Which effect will this medication have on the client?

A) Improve the ability to be adequately ventilated
B) Prevent cord damage from ischemia and edema
C) Cause an increase in blood glucose level
D) Improve the level of consciousness


**Question 1537**

A school nurse is providing care to a number of school-age children diagnosed with celiac disease. Which interventions are appropriate for the nurse to implement with this group of students? Select all that apply.

A) Implementing a school based prevention program to eliminate the disease process
B) Labeling gluten-free choices in the school lunch program
C) Teaching about gluten-free food choices
D) Emphasizing low-fat food selections
E) Emphasizing low-calorie food selections


**Question 1538**

The nurse is conducting a crisis assessment for a client who admits to cocaine use. Which questions are appropriate for the nurse to ask the client during this process? Select all that apply.

A) "What other stresses do you have in your life?"
B) "What are the living conditions of the neighborhood?"
C) "Are recreational centers available?"
D) "What is the most significant stress/problem occurring in your life right now?"
E) "How long has this been a problem?"


**Question 1539**
A client being treated with chemotherapy for cancer complains of fatigue, pallor, progressive weakness, exertional dyspnea, headache, and tachycardia. Which diagnosis should the nurse use as the priority when planning this client’s care?
A) Activity Intolerance
B) Ineffective Coping
C) Powerlessness
D) Imbalanced Nutrition, Less than Body Requirements

Question 1540

The American Nurses Association (ANA’s) proposal for entry level for professional practice initiated debate among nurses. Which nurse would be impacted the most if the ANA proposal were implemented?
A) An RN with a BSN who is a staff nurse
B) An RN with a diploma who works in a critical care area
C) An RN with an associate degree who is currently in school
D) An RN with an associate degree who is a nurse manager

Question 1541

A nurse caring for a client with systemic lupus erythematosus (SLE) who is prescribed immunosuppressive therapy. When providing teaching for this client, which topics are appropriate for the nurse to include? Select all that apply.
A) Heavy menstrual bleeding may occur during therapy.
B) Avoid large crowds and situations that increase exposure to infection.
C) Maintain appropriate oral hydration.
D) Report difficulty breathing or cough to the physician if taking cyclophosphamide.
E) Use aspirin instead of acetaminophen if fever develops.

Question 1542

The nurse working in the emergency department is aware that rape victims initially exhibit which emotions? Select all that apply.
A) Denial
B) Disbelief
C) Anger
D) Shock
E) Self-blame

Question 1543

Which intervention would best improve diet adherence of an older Hispanic immigrant recently diagnosed with gastroesophageal reflux disorder (GERD)?
A) Providing printed diet information in Spanish
B) Interviewing the client to assess his current diet
C) Scheduling low-fat meal deliveries to the home
D) Giving a list of foods to avoid to the client’s wife

Question 1544

A nurse is caring for a client who was recently admitted for treatment of cirrhosis. The client is currently experiencing BP of 200/100 mmHg, +3 pitting edema, and shortness of breath. Which nursing diagnosis should the nurse select as a priority for this client?
A) Impaired Skin Integrity
B) Ineffective Tissue Perfusion
C) Excess Fluid Volume
D) Deficient Fluid Volume

Question 1545

The nurse is providing care to a client who is being admitted to rule out acute pancreatitis. Which item found in the client’s history increases the client’s risk for this disease process?
A) Alcoholism
Question 1546
A nurse is caring for a child who is hospitalized for an exacerbation of asthma. The nurse is preparing discharge teaching, as the client will be going home on nebulizer treatments and an inhaler. The family members speak little English. In addition to enlisting an interpreter to help with the language barrier, what should be a priority for the nurse?
A) Make sure the parents can set up the treatments for their child.
B) Provide written instructions before discharge.
C) Make sure the child comes back for the follow-up appointment.
D) Address any healing beliefs the family has.

Question 1547
The mother of a young child with cerebral palsy (CP) is pregnant and asks if the second child will be diagnosed with the same disorder. What risk factors for CP should the nurse explain to the mother? Select all that apply.
A) Mother's age of 42
B) Child has meningitis at birth
C) Child is 9 pounds at birth
D) Father over the age of 20
E) First-born child

Question 1548
An older adult client is scheduled for electroconvulsive therapy (ECT) for the treatment of depression. Which instructions will the nurse include regarding this therapy? Select all that apply.
A) Long term memory loss often occurs after receiving ECT.
B) The treatments are known to help some but not all people with depression.
C) You will need to stop eating and drinking four hours prior to the therapy session.
D) These treatments will cure the depression.
E) Participation in psychotherapy with some medication therapy often needs to be continued after the treatments.

Question 1549
The nurse is documenting care in the medical record. The nurse provides narrative documentation only for abnormal assessment findings. Which type of charting is the nurse using based on this example?
A) Focus charting
B) Computerized documentation
C) Charting by exception (CBE)
D) SOAP charting

Question 1550
A client has just recently been diagnosed with rheumatoid arthritis (RA). The client asks the nurse if RA always causes crippling deformities. Which teaching topics will the nurse include as ways to decrease the likelihood of crippling deformities? Select all that apply.
A) Ignore pain as a warning signal.
B) Use stronger joints for most activity.
C) Avoid stress to any current area of deformity.
D) Type instead of hand-writing items if possible.
E) Stop an activity if it is beyond your ability to perform.

Question 1551
An older adult client with metastasized breast cancer informs the nurse that her doctor is insisting that she participate in a course of chemotherapy, even though the client does not want to have any further treatment. Which actions by the nurse exemplify advocacy for this client? Select all that apply.
A hospice nurse is working closely with a client who, on several occasions, has asked about guidance and support in ending life. The nurse recognizes which in regard to making ethical and moral decisions in this circumstance?
A) Active euthanasia is supported in the Code for Nurses.
B) Assisted suicide is illegal in all states.
C) Euthanasia has legal implications along with moral and ethical ones.
D) Passive euthanasia is an easy decision to arrive at.

An older adult client receiving pain medication for abdominal discomfort reports no relief of pain and continues to describe multiple somatic complaints. Which action by the nurse is appropriate?
A) Reviewing of the client's lab values
B) Assessing the client for depression
C) Contacting the family to talk to the client
D) Obtaining an order for different pain medication

The nurse is conducting a health promotion class to adolescents regarding smoking. Which point is most important to convey to this audience?
A) Smoking causes lung cancer.
B) Alcohol use is strongly associated with smoking.
C) Teens are not strongly influenced by tobacco advertising.
D) Cost is no deterrent to smoking.

The mother of preschool-age client tells the nurse that the client has frequent fevers. Which response by the nurse is appropriate?
A) "Your child must be around people with illnesses."
B) "Fevers are most frequently seen in children because of developing immunity."
C) "Your child's immunity is compromised."
D) "This is unusual because common diseases of childhood rarely result in fevers."

The nurse is instructing a client with a history of acidosis on the use of sodium bicarbonate. Which client statement indicates that additional teaching is needed?
A) "I should call the doctor if I get short of breath or start to sweat with this medication."
B) "I should use the antacid for at least 2 months."
C) "I need to purchase antacids without salt."
D) "I should contact the doctor if I have any gastric discomfort with chest pain."

The school nurse is talking to a child with attention-deficit/hyperactivity disorder (ADHD) who wants to play soccer. Which action is the most appropriate for the school nurse to take?
A) Recommend that the child become active in an individual sport, rather than a team sport.
B) Discourage the child from playing a team sport like soccer.
C) Encourage the child to play soccer.
D) Ask the child's mother to get permission from the child's physician to play soccer.
**Question 1558**

The nurse is caring for a client who requires extensive wound care. The client has consented to participating in a nursing research study regarding the wound care. Which client statement indicates understanding of the goal related to the research?

A) "Nursing care is based solely on research."
B) "I will be helping to validate nursing care."
C) "This research will not influence my care."
D) "I will be paid to participate in the research project."


**Question 1559**

An experienced nurse practitioner is always conscious of the need to maintain a high level of competence within professional nursing practice. Which activities support this nurse’s goal? Select all that apply.

A) Administering medications appropriately
B) Reading professional journals
C) Attending professional workshops and seminars
D) Counseling clients
E) Collaborating with peers


**Question 1560**

The nurse is providing care to a newly diagnosed with asthma. When developing the client’s plan of care, which intervention would be most appropriate to promote airway clearance?

A) Place in Fowler position.
B) Provide adequate rest periods.
C) Assist with activities of daily living.
D) Reduce excessive stimuli.


**Question 1561**

While planning care for a client who has been hospitalized for 2 weeks, the nurse selects the nursing diagnosis of Risk for Disuse Syndrome due to the extended hospitalization. The nurse is assisting the client with a bath and wants to encourage full range of motion in all the client’s joints. Which activity will best support range of motion for the client’s hand and arm?

A) Moving each of the client’s hand and arm joints through passive range of motion
B) Having the client brush the hair and teeth
C) Giving the client a washcloth to wash the face
D) Moving the wash basin farther toward the foot of the bed to encourage the client to reach for the items


**Question 1562**

The nurse is teaching a class on infection control. Which nursing measure is most appropriate in breaking a link in the chain of infection?

A) Place contaminated linens in a paper bag.
B) Cover one’s cough by placing the mouth in the hand.
C) Use personal protective equipment (PPE).
D) Wear sterile gloves for client care.


**Question 1563**

The nurse on third shift is handing off clients to the nurse on first shift. Which key element is most important for the third shift nurse to report during this handoff?

A) The nurse reports, "The client in room 312 continues to complain about a headache unrelieved by pain medication. I am awaiting a call from the physician for orders."
B) The nurse reports, "The client in room 315 received an enema at 2100."
C) The nurse reports on the clients in no apparent order of acuity or room number.
D) The nurse reports, "The client in room 311 was transferred from 212."

Question 1564
While assessing the cognitive status of a school-age child, the nurse notes that the child was unable to perform division problems and unable to name several former presidents of the United States. Prior to determining that this client has cognitive issues, what should the nurse keep in mind?
A) The child's nutritional status
B) The parent's participation in the child's cognitive development
C) The child's home environment
D) The child's developmental level

Question 1565
During a health assessment, a client states, "I only eat carbohydrates and low-fat foods. I don't understand why I am still gaining weight!". What should the nurse consider before responding to this client? Select all that apply.
A) Carbohydrates should only be eaten at breakfast.
B) Excess carbohydrates are converted to fat.
C) A carbohydrate limited diet is the only way to not gain weight.
D) Excess carbohydrates can lead to obesity.
E) Carbohydrates should be high in fiber and low in sugar.

Question 1566
A nurse caring for a client in the intensive care unit (ICU) notes that the client is experiencing a ventricular tachycardia dysrhythmia. Which rhythm is classified as supraventricular?
A) Atrial flutter
B) Junctional escape
C) Torsades de Pointes
D) Sinus tachycardia

Question 1567
A client, who was recently being laid off from work, is scheduled for a biopsy to detect a malignancy. When planning this client's care, which does the nurse include?
A) Medicate around the clock for pain
B) Social services to aid with financial planning
C) Interventions to address anxiety
D) Reasons to delay the biopsy

Question 1568
The nurse is speaking with a client who wants information regarding colorectal cancer. Which statement indicates the client understood the information presented by the nurse?
A) The risk of colorectal cancer decreases with age.
B) Colorectal cancer can be detected in early stages by measuring the level of the carcinogenic embryonic antigen (CEA).
C) Colorectal cancer has no symptoms in the early stage and there are no definitive diagnostic tests.
D) Colorectal cancer occurs more frequently in clients who have a history of ulcerative colitis.

Question 1569
The nurse is providing family therapy for the family of an adolescent diagnosed with schizophrenia. When planning care for this client, which is the focus for the nursing interventions? Select all that apply.
A) Coping mechanisms
B) Preventing future episodes
C) Improving communication
D) Providing happiness
E) Establishing boundaries
Question 1570

The nurse case manager spends the morning in a peer meeting and the afternoon in an ad hoc quality management committee meeting that is led by the hospital administrator. Which two types of groups has the nurse case manager participated in?
A) Support group and governance group  
B) Primary and secondary groups  
C) Disaster group and emergency group  
D) Work group and administrative group  

Question 1571

A client receiving heparin therapy for deep venous thrombosis (DVT) complains of severe chest pain and shortness of breath. Suspecting a pulmonary embolism, which is the priority action by the nurse?  
A) Reassure the client and notify family members.  
B) Apply oxygen and elevate the head of the bed.  
C) Assess pulse, respirations, and blood pressure.  
D) Increase the rate of heparin infusion.  

Question 1572

A nurse is preparing to conduct a research study and wants to do a literature search of relevant articles. Which are elements will the nurse look for as part of an article based on research? Select all that apply.  
A) Results  
B) Abstract  
C) Study  
D) References  
E) Funding  

Question 1573

The nurse is preparing an educational program for the family of a client with Alzheimer disease who is ready for discharge. Which will the nurse focus on to reduce the client’s risk for injury? Select all that apply.  
A) Remove throw rugs and electrical cords.  
B) Check shoes for fit and support.  
C) Be aware that client in the early stages usually have few problems with unfamiliar places.  
D) Keep all familiar objects in the home.  
E) Have all objects in the room be the same color.  

Question 1574

A nurse is caring for a client with systemic lupus erythematosus (SLE) who is taking hydroxychloroquine (Plaquenil). When providing care for this client, the nurse monitors for which adverse effects associated with the prescribed medication?  
A) Retinal toxicity  
B) Cushingoid effects  
C) Renal toxicity  
D) Pulmonary fibrosis  

Question 1575

A client with a history of hypertension, is diagnosed with chronic renal disease. When the client asks the nurse how this occurred, which response by the nurse is the most appropriate?  
A) “Immune complexes form in the kidney tissue that causes inflammation causing this diagnosis.”  
B) “High blood pressure reduces renal blood flow and harms the kidney tissue causing this diagnosis.”  
C) “Thickening of the kidney structures and gradual death of nephrons has caused this diagnosis.”  
D) “Cysts compress renal tissue that destroys the kidneys causing this diagnosis.”  
Question 1576

A nurse is caring for a premature infant with a central line. The infant suddenly develops apnea, bradycardia, and metabolic acidosis. Which is the most likely condition causing this change in health status?

A) Bacterial sepsis
B) Intracranial hemorrhage
C) Hypoglycemia
D) Hyperbilirubinemia


Question 1577

An older adult client is experiencing a tonic-clonic (grand mal) seizure exceeding 10 minutes in length. Which medication should the nurse prepare to administer to this client?

A) Intravenous diazepam slowly over several minutes
B) Intramuscular injection of diazepam
C) 5% dextrose solution IV
D) Intravenous bolus of 10% dextrose


Question 1578

A novice nurse is working in a behavioral health hospital and desires to learn more about bipolar disorder. The nurse understands that bipolar disorders affect clients differently across the lifespan. Which is true regarding bipolar disorder and lifespan considerations?

A) Children with bipolar disorders present with mood changes only.
B) Children with bipolar disorders are usually diagnosed quickly, preventing years of undiagnosed mental illness.
C) Lifetime prevalence of bipolar disorders in adolescents is 0%-3%.
D) Suicide risk does not increase in adolescents and teenagers who are diagnosed with bipolar disorders.


Question 1579

The nurse is providing care to a client who was recently diagnosed with breast cancer. The nurse is providing education regarding the possible treatment options. Which options will the nurse include in the teaching session? Select all that apply.

A) Radiation
B) Lumpectomy
C) Hormone therapy
D) Mastectomy
E) Palliative care


Question 1580

The nurse is working with a client who has agreed to participate in a research study. Which actions would constitute a violation of disclosure for the client? Select all that apply.

A) Withholding information about the study
B) Telling a mutual friend of the client's involvement in the study
C) Suggesting that participation would greatly benefit the client's financial situation
D) Giving the client false information about his or her participation
E) Providing the client's name as a participant in the study


Question 1581

The nurse is placing a newborn baby in the nursery crib with the baby's back down. The mother tells the nurse that she doubts the baby will be able to sleep that way, as all the family members sleep on their stomachs. Which action by the nurse is appropriate?

A) Suggest the mother place the baby on the stomach when at home.
B) Instruct the mother that babies do not really care in which position they are in but placing on the back is easier to provide care.
C) Place the baby on the stomach.
D) Instruct the mother that placing the baby on the back will reduce the risk of sudden infant death syndrome (SIDS).

Question 1582

The nurse is caring for a client with a potassium level of 5.9 mEq/L. The health care provider prescribes both glucose and insulin for the client. The client’s spouse asks, “Why is insulin needed?” Which response by the nurse is the most appropriate?

A) “The insulin lowers his blood sugar levels and this is how the extra potassium is excreted.”
B) “Insulin is safer than other medications that can lower potassium levels.”
C) “The insulin will cause his extra potassium to move into his cells, which will lower potassium in the blood.”
D) “The insulin will help his kidneys excrete the extra potassium.”


Question 1583

The nurse, who has been calling postpartum clients, learns that one client reports having no appetite and wants to sleep all day. What does this information suggest to the nurse?

A) The client may be experiencing postpartum depression.
B) The client’s sleep-wake cycle is disrupted.
C) The client is feeling blue, which is normal.
D) The client is developing postpartum psychosis.


Question 1584

The nurse caring for a child recently diagnosed with cerebral palsy (CP) is discussing the plan of care with the parents. Which is the major goal of therapy for this child?

A) Promoting optimal global development
B) Increasing the child’s IQ level
C) Curing the underlying defect
D) Reversing the degenerative processes that have occurred


Question 1585

A nurse is planning care for a client with sickle cell disease and chooses “Acute Pain” as the nursing diagnosis. Which intervention is inappropriate for the nurse to include in this plan of care?

A) Support the client’s joints and extremities with pillows.
B) Use heat or cold packs as tolerated.
C) Administer ordered analgesic medications around the clock.
D) Place patient in position of comfort.


Question 1586

The home care nurse determines that a client being treated for postpartum depression is improving. Which assessment data supports the nurse’s conclusion?

A) Client watching television in the living room while the baby is in the crib crying
B) Dirty dishes in the sink, beds unmade, and client wearing clothing for sleep
C) Client in casual wear, holding baby while rocking in a chair
D) Spouse making dinner, client in bed asleep, baby in rocker in the kitchen


Question 1587

The nurse working in the emergency department provides care to an infant who arrived in cardiac and respiratory arrest. Resuscitative efforts failed and the infant’s cause of death is sudden infant death syndrome (SIDS). The parents are grieving and will need collaborative interventions. Which interventions does the nurse plan for when providing care to these parents? Select all that apply.

A) A grief counselor referral
B) A visit from the chaplain
C) A social services consult
D) A psychosocial assessment
E) A psychotherapist referral

Question 1588
The novice nurse accepts a job working on a long-term care unit. Nursing care that is required includes caring for clients at the end of life. Which behavior by the nurse indicates a healthy response to the dying client and family?
A) Remaining out of the room at the moment of death to allow the client and family privacy
B) Paying close attention to details regarding the pain and comfort measures for the client
C) Delegating physical care of the client to the LPN and UAP
D) Providing client care without explaining procedures

Question 1589
The nurse is providing care to a client who is experiencing urinary incontinence. Which independent nursing intervention is the most appropriate for this client?
A) Providing catheter care
B) Encouraging increased fluid intake
C) Instructing on self-catheterization
D) Implementing hygiene care

Question 1590
A client receiving treatment for acute respiratory distress syndrome (ARDS) is demonstrating anxiety and fear of having to stay on the ventilator indefinitely. Which interventions by the nurse are appropriate? Select all that apply.
A) Encourage family visits and participation in care.
B) Dim the lights and reduce distracting noise, such as the television.
C) Remain with the client as much as possible.
D) Instruct that intubation and ventilation are temporary measures.
E) Explain about care areas specifically designed for long-term ventilatory support.

Question 1591
A client is brought into the emergency department after being assaulted. It is suspected that the client has a spinal cord injury. Which diagnostic test does the nurse anticipate based on the data collected?
A) Ultrasound
B) Magnetic resonance imaging (MRI)
C) Computed tomography (CT) scan
D) X-ray

Question 1592
The home care nurse is assessing a client with macular degeneration. What interventions would be appropriate to ensure home safety for this client? Select all that apply.
A) Utilize one electrical outlet for devices.
B) Keep the stairs free of clutter.
C) Have grab bars installed in the bathroom.
D) Remove scatter rugs from the floors in the home.
E) Wear socks without shoes when walking in the home.

Question 1593
A young adolescent client is concerned about experiencing severe cramps with menstruation. What should the nurse respond to this client?
A) "You have cramps because you started your periods too early."
B) "Cramps are seen in those who just start having periods and will become less severe as you get older."
C) "You need to see a gynecologist for a pelvic examination."
D) "This is not normal but is something that can be treated."

Question 1594
A client with acute respiratory distress syndrome (ARDS) is being weaned from ventilatory support. Which nursing actions are appropriate for this client? Select all that apply.

A) Provide morning care during the weaning procedures.
B) Place in the Fowler position.
C) Medicate with morphine for pain as needed.
D) Increase percentage of oxygen being provided through the ventilator.
E) Begin weaning procedures in the morning.


**Question 1595**

The nurse is completing a health history with an adolescent client and determines the client would benefit from teaching about substance abuse. Which client statements caused the nurse to come to this conclusion? Select all that apply.

A) "I drink alcohol with my friends on the weekends."
B) "I smoke cigarettes on a daily basis."
C) "I get all A's and B's in school."
D) "I use my seat belt every time I ride in a car."
E) "I became sexually active at the age of 13."


**Question 1596**

The nurse is caring for a client who will be discharged on a new blood pressure medication which increases the risk of orthostatic hypotension. Which should the nurse include in the discharge teaching to decrease the risk of injury at home?

A) Provide a bedside commode.
B) Monitor activity tolerance.
C) Encourage appropriate lighting.
D) Rise slowly when getting up.


**Question 1597**

The nurse manager is considering increasing the number of RN staff because studies have shown that this decreases infection rates. Which purpose will decreasing infection rates serve?

A) A decreased cost of care
B) An increased use of overtime
C) A decrease in client satisfaction
D) An increase in client care supplies


**Question 1598**

The nurse is providing follow-up care for a client who was recently diagnosed with benign prostatic hyperplasia (BPH). Which nursing diagnosis is the priority for the nurse to include in the client's plan of care?

A) Impaired Urinary Elimination
B) Diarrhea
C) Constipation
D) Chronic Pain


**Question 1599**

A client with a history of myocardial infarctions states to the nurse, "I have been smoking for 35 years. It will not matter if I stop now." Which is the priority response from the nurse?

A) "Quitting will enhance the effects of your medications."
B) "Your risk of lung cancer will be reduced."
C) "Your risk of continued coronary heart disease will decrease by half when you stop."
D) "Quitting will decrease any complications you might develop."


**Question 1600**

A nurse educator is teaching a group of student nurses regarding problems of infertility and genetic inheritance of disease. Which statement made by the nurse indicates that teaching has been effective?
A) "An individual is said to have an autosomal dominant inherited disorder if the disease trait is homozygous."
B) "A person's genotype is the observable expression of the traits."
C) "The total genetic makeup of an individual is referred to as the phenotype."
D) "In an autosomal recessive inherited disorder, the individual must have two abnormal genes to be affected."

Question 1601

The nurse is providing discharge instructions about medications and exercise to a client with congestive heart failure. Which action by the nurse ensures that the client is fully informed?
A) Print the discharge instructions and hand them to the client prior to discharge.
B) Ask the physician to reinforce teaching prior to discharging the client.
C) Make sure a relative attends the discharge teaching session.
D) Repeat the discharge teaching sessions twice.

Question 1602

A client with a body temperature of 104°F is entering the flush phase of the fever. Which actions by the nurse are appropriate when providing care? Select all that apply.
A) Provide warmed intravenous fluids.
B) Monitor intake and output.
C) Restrict fluids.
D) Cover the client with a light sheet.
E) Cover the client with warm blankets.

Question 1603

The nurse is planning care for the client with acute renal failure. The nurse plans the client's care based on the nursing diagnosis of Excess Fluid Volume. Which assessment data supports this nursing diagnosis?
A) Wheezing in the lungs
B) Bowel sounds positive in 4 quadrants
C) Generalized weakness
D) Pitting edema in the lower extremities

Question 1604

A client with rheumatoid arthritis (RA) is being seen in the outpatient clinic for a progress check-up. The nurse is reviewing the client's plan of care and determines that the client has met a goal of treatment when the client makes which statement?
A) "I do not perform household chores at all anymore."
B) "I sleep for 10 hours at night."
C) "I have increased pain in my joints all the time now."
D) "I have delegated many household chores to my children and spouse."

Question 1605

A client requests that surgery be delayed for several days until after a period of Holy Days has concluded. Which action by the nurse supports this client's request?
A) Communicate the client's request to the surgeon.
B) Provide the client with alternative forms of treatment to replace having surgery.
C) Remind the client that one's health is more important than following Holy Days.
D) Suggest the client think about whether having the surgery is the right decision, as the client is willing to delay it now.

Question 1606

The nurse is caring for a Catholic client who has suffered a massive cerebral hemorrhage and is not expected to survive. Which intervention is most appropriate?
A) Contact a priest to deliver the Sacrament of the Sick.
B) Make plans for the family to wash the body after death.
C) Contact a rabbi so that the client can participate in prayer.
D) Discuss the need to cremate the client, as burial is not accepted in this faith.

**Question 1607**

While performing nasotracheal suctioning, the nurse notes the older adult client is moving the head around and pulling at the nurse's hand to remove the suction catheter. Which actions by the nurse are appropriate? Select all that apply.
A) Remove the suction catheter
B) Hyperoxygenate the client
C) Lower the head of the bed
D) Hyperinflate the client's lungs
E) Apply restraints to the client's arms and legs

**Question 1608**

A school nurse is reviewing the physical activity for adolescent high school students. Which student has met the outcome for physical activity set by the Centers for Disease Control and Prevention (CDC)?
A) A 17-year-old who jogs for 30 minutes 5 times per week
B) A 15-year-old who runs at a fast pace for 20 minutes 2 times per week
C) An 18-year-old who speed-walks 60 minutes once per week
D) A 16-year-old who lifts moderately heavy weights for 15 minutes 3 times per week

**Question 1609**

A nurse is caring for a client who is pregnant and requires IV antibiotic therapy for treatment of pyelonephritis. Prior to administering the medication, the nurse discovers the medication is Category B for pregnancy. When planning care for this client, which will the nurse take into consideration regarding this medication?
A) Animal studies show teratogenic effects, but no controlled studies in women are available.
B) Evidence of human fetal risk exists, but the benefits of the drug in certain situations are thought to outweigh the risks.
C) There have been no controlled studies in women in particular, but controlled human studies have failed to demonstrate a risk.
D) Controlled studies in women have demonstrated no associated fetal risk.

**Question 1610**

A nurse working on the antepartum unit cares for clients with preeclampsia. When teaching family members about the cause of the condition, which does the nurse include?
A) It is a disorder of excess trophoblast invasion within the placenta.
B) It is a disorder of fetal liver compromise.
C) It is a disorder of maternal hypo responsiveness to vasoactive peptides.
D) It is a disorder of placental dysfunction.

**Question 1611**

The nurse is caring for a client who is about to be discharged from the hospital. The client asks the nurse for suggestions on how to improve the quality of sleep in order to wake feeling refreshed in the morning. After reviewing the client's medical history, which suggestions by the nurse are appropriate? Select all that apply.
A) Adjusting the room temperature to a comfortable level for sleep
B) Changing the time of aerobic exercise to 1 hour prior to sleep
C) Having a cup of tea before bed in order to enhance relaxation
D) Limiting cigarette smoking before bedtime
E) Limiting the use of alcohol to early in the evening

**Question 1612**

The nurse provides teaching about phenytoin (Dilantin) to the mother of a school-age client with a seizure disorder. Which statement made by the mother indicates that teaching has been effective?
A) "I will use a carbonated beverage to dilute his medication."
B) "I will give his medicine on an empty stomach so he will absorb it better."
C) "I will let him chew his tablet."
D) "I will check his gums and increase visits to the dentist."

Question 1613
The nurse is caring for an older adult client who is hospitalized with a second episode of pneumonia in the past 18 months. The client has expressed frustration to the nurse and states, "I never got sick when I was younger. Why is this happening?" Which response by the nurse is most appropriate?
A) "As you grow older, there is an overall increase in the speed and strength of your immune response."
B) "As you grow older, there is an increase in the number of B cells in the circulation, which hinders the immune response."
C) "As you grow older, your immune system just quits working."
D) "As you grow older, there is a decrease in the immune response, which puts you at greater risk for developing an infection."

Question 1614
A client tells the nurse about being diagnosed with osteoarthritis but does not know what that means. When responding to the client's question, which information will the nurse use?
A) A result of synovial inflammation
B) A metabolic bone disease
C) Most commonly seen in thin, small-built female clients
D) Erosion of joint articular cartilage with new bone formation in the joint space

Question 1615
The nurse is planning care for a client with a pulmonary embolism. Which intervention would assist with the client's decrease in cardiac output?
A) Provide oxygen.
B) Monitor pulmonary arterial pressures.
C) Keep protamine sulfate at the bedside.
D) Assess for bleeding.

Question 1616
A nurse is developing a plan of care for a client diagnosed with post-traumatic stress disorder (PTSD) who was admitted to the hospital for suicide ideations and sleep disturbance due to frequent nightmares. Which is the priority nursing diagnosis for this client?
A) Risk for Other-Directed Violence
B) Post-Trauma Syndrome
C) Risk for Self-Directed Violence
D) Disturbed Sleep Pattern

Question 1617
The nurse is providing care to a preadolescent client who is diagnosed with an eating disorder. The client's mother states, "I am very weight and exercise conscious. This must be a genetic trait from her birth mother." Based on this data, which conclusion by the nurse is the most appropriate?
A) The mother is setting a good example with eating and exercise.
B) The child must have inherited a genetic predisposition to an eating disorder.
C) The child must have a neurotransmitter abnormality.
D) The mother is obsessed with weight and exercise, and the child learned the behavior.

Question 1618
During an assessment, the nurse notes leukoplakia when examining the client's mouth. The client is a smoker and explains to the nurse that it has been there for more than a month. After documenting the finding and informing the healthcare provider, what should the nurse anticipate next?
A) A dental consult
B) An order to provide thorough mouth care
C) A biopsy will be performed.
D) Antifungal medication will be prescribed.

Question 1619
The nurse is preparing an educational session on sepsis. Which should the nurse include as a major risk factor for the development of this health problem?
A) Elevated temperature
B) Leukocytosis on the complete blood count
C) Pneumococcal bacteria
D) Undiagnosed urinary tract infection

**Question 1620**

A nurse is screening a client for prostate cancer. Which assessment findings would cause the nurse to suspect that the client has prostate cancer?
Select all that apply.
A) Back pain
B) Hematuria
C) Fatigue
D) Scrotal edema
E) Upper extremity weakness

**Question 1621**

The nurse is providing care for a young adult client with exophthalmos. Which nursing diagnosis would be the most appropriate for this client?
A) Ineffective Coping
B) Disturbed Body Image
C) Activity Intolerance
D) Risk for Injury

**Question 1622**

Whether in the classroom or clinical setting, the way a group functions, communicates, sets goals, and achieves objectives is related to which concept?
A) Group dynamics
B) Commitment
C) Power
D) Cohesiveness
E) Member behavior

**Question 1623**

While making rounds on the night shift, a nursing supervisor notes that one of the nurses has multiple visible bruises. Which action is appropriate by the nursing supervisor in this situation?
A) Do nothing about the situation.
B) Notify authorities regarding the abuse.
C) Notify the security department.
D) Ask the nurse about the source of the injuries.

**Question 1624**

The family of a client with cirrhosis of the liver asks what symptoms they need to look for while the client is being cared for in their home. Which manifestation should the nurse teach the family that indicates that the client is experiencing portal hypertension?
A) Bleeding gums
B) Hypothermia
C) Hemorrhoids
D) Muscle wasting

**Question 1625**

A client admitted to the hospital with a diagnosis of inflammatory bowel disease has also been diagnosed with calcium phosphate renal calculi. When planning care for this client, which medication does the nurse anticipate based on the data?
A) Indomethacin
B) Potassium citrate  
C) Hydrochlorothiazide  
D) Morphine sulfate  

**Question 1626**

The nurse provides an educational session for community members about the risk factors for colorectal cancer. Which participant statement indicates that teaching has been effective? Select all that apply.

A) "Eating a diet high in red meat reduces the risk for developing this type of cancer."
B) "Taking aspirin and a multivitamin each day reduces the risk of colorectal cancer."
C) "People with other bowel disease are at increased risk for developing this cancer."
D) "Eating cereal fiber reduces the risk of developing colorectal cancer."
E) "There is a genetic link in the development of colorectal cancer."


**Question 1627**

A client reports feeling tired and not refreshed after sleeping even when everyone at home laughs about her loud snoring at night. What should the nurse suspect as being the cause of this client's fatigue?

A) Depression  
B) Sleep apnea  
C) Thyroid disorder  
D) Insomnia  


**Question 1628**

A client diagnosed with a deep vein thrombosis (DVT) is receiving intravenous heparin. Which is the priority outcome for this client?

A) The client will not disturb the intravenous infusion.  
B) The client will not experience bleeding.  
C) The client will keep the right leg elevated on two pillows.  
D) The client will comply with dietary restrictions.  


**Question 1629**

The nurse is caring for an adolescent Asian client with a strong family history of breast cancer. What should the nurse instruct the client regarding cancer prevention? Select all that apply.

A) Discuss cancer fears with the healthcare provider.  
B) Perform monthly breast self-examination.  
C) Teach the side effects of cancer treatment.  
D) Talk to family members who have the disease.  
E) Encourage the client to learn more about the disease.  


**Question 1630**

A client experiencing situational depression after the traumatic death of the spouse tells the nurse, "Since I started taking a walk every day, I've been feeling better." Which conclusion regarding the impact of exercise for this client is appropriate? Select all that apply.

A) The client's stress is relieved as a result of the exercise.  
B) The client is experiencing an elevated mood due to exercise.  
C) Exercise is providing a short-term diversion to the pain of losing the spouse.  
D) Exercise has given the client something to do.  
E) The client is experiencing increased brain stimulation as a result of the increased oxygenation that occurs with exercise.  


**Question 1631**

The nurse is caring for a client in an allergy clinic. After completing the client history, the nurse selects the nursing diagnosis of Risk for Shock. Which item in the client's history supports the need for this nursing diagnosis?

A) Anaphylactic reaction to shellfish  
B) A drug reaction to penicillin causing a rash  
C) Dermatitis resulting from a response to changing laundry detergent  

Question 1632
A client with a history of anemia has started a vegan diet. Which addition to meals should the nurse recommend to help ensure that this client has adequate amounts of iron in the diet? Select all that apply.
A) Okra
B) Orange juice
C) Legumes
D) Peas
E) Brewer’s yeast

Question 1633
The nurse observes a healthcare provider discuss an operative procedure with a client and determines informed consent was achieved. Which information was included in the informed consent process? Select all that apply.
A) The expectations of the surgery
B) The purpose of the surgery
C) The provider's disapproval if the surgery is not performed
D) The health problem that requires surgery
E) Outcome if surgery is not performed

Question 1634
A client with urinary calculi is admitted to the hospital. When planning care for this client, which goal is most appropriate?
A) The client will shower independently.
B) The client will request pain medication at the onset of pain.
C) The client will ambulate three times a day.
D) The client will lose 25 pounds in 3 months.

Question 1635
Which intervention would be a priority when providing care to a client recovering from thoracic injuries sustained from a motor vehicle crash?
A) Monitor urine output.
B) Assess vital signs.
C) Assist to deep breath and cough every 2 hours.
D) Perform passive range of motion to all extremities.

Question 1636
A nurse is working in a summer camp for children. One of the children comes to the clinic with several bee stings. Which clinical manifestations would necessitate the need to inject the child with epinephrine (EpiPen)? Select all that apply.
A) The child is hyperactive and hyperverbal.
B) Skin that is cold and clammy to the touch
C) Restlessness and confusion
D) Skin that is warm and dry to the touch
E) Complaints of thirst

Question 1637
The nurse is evaluating teaching provided to a client with peripheral vascular disease (PVD). Which client observation indicates teaching has been effective?
A) Sitting in a chair with left leg crossed over the right
B) Smoking a pipe instead of cigarettes
C) Washing the lower extremities with mild soap, drying the legs, and applying a light moisturizer
D) Sitting in a chair with a pillow behind knees
Question 1638
A child with acute asthma has a PaCO2 of 48 mmHg, a pH of 7.31, and a normal HCO3 blood gas value. The nurse interprets these findings as indicative of which condition?
A) Metabolic alkalosis
B) Metabolic acidosis
C) Respiratory alkalosis
D) Respiratory acidosis

Question 1639
A competent older adult client has a living will that expresses the client's desire to avoid resuscitation and heroic life support measures. The family members are not supportive of this directive and plan to contest the living will. Which nursing action is the most appropriate?
A) Contact the Social Services department.
B) Place the document on the chart.
C) Notify the hospital attorney.
D) Explain to the client that the conflict could invalidate the document.

Question 1640
A nurse is caring for family members who have recently lost their home and belongings in a fire. The family is staying with extended family in the area. Which is the most appropriate nursing diagnosis for this family?
A) Compromised Family Coping
B) Dysfunctional Family Processes
C) Ineffective Individual Coping
D) Readiness for Enhanced Family Processes

Question 1641
A nurse is caring for a client suspected of a cocaine-induced myocardial infarction (MI). When asked to describe how cocaine can induce an MI, which rationale will the nurse use to respond?
A) Alters the body's clotting mechanisms, leading to thrombus formation.
B) Alters electrolyte balance, leading to arrhythmias.
C) Increases sympathetic nervous system stimulation, increasing blood pressure and vasoconstriction.
D) Significantly increases the serum triglyceride level, leading to the development of an atheroma.

Question 1642
A pediatric client with a history of anaphylactic hypersensitivity reactions will be discharged with a prescription for an EpiPen. Which statements are appropriate for the nurse to include in the discharge instructions for this client and family? Select all that apply.
A) "Frequently check the expiration date of the medication."
B) "Keep the medication in one location that is easy to remember."
C) "This medication does not come pre-filled and must be measured."
D) "Keep the medication in the car at all times."
E) "It is recommended that the child wear a medical alert bracelet."

Question 1643
A client prescribed tamoxifen (Nolvadex) for breast cancer treatment asks the nurse how the medication works. What is the best response by the nurse?
A) "Tamoxifen works by inhibiting the cellular mitosis of breast cancer."
B) "Tamoxifen works by inhibiting the metabolism of breast cancer cells."
C) "Tamoxifen works by binding to the DNA of breast cancer cells."
D) "Tamoxifen works by blocking estrogen receptors on breast tissue."

Question 1644
Question 1645

The nurse is providing care to a client with pneumonia is has a fever. Which interventions should the nurse use to attain the goal of normal body temperature? Select all that apply.
A) Promote frequent rest periods to increase energy reserve.
B) Restrict fluids during periods of hyperthermia because of the risk of electrolyte imbalance.
C) Use ice packs and a tepid bath every 2 hours.
D) Increase the temperature of the room environment to prevent shivering.
E) Administer antipyretic medications.


Question 1646

A clinic nurse is preparing a class for new parents on the effects of poor prenatal nutrition. Which is inappropriate to include as an outcome of poor prenatal nutrition?
A) Premature birth
B) High birth weight
C) Altered brain function
D) Low birth weight


Question 1647

A novice nurse has completed a 12-week orientation period in a neurovascular intensive care unit (ICU). The nurse would like a mentor on the unit to go to with questions or concerns. Who is the best choice for this novice nurse's mentor?
A) A charge nurse.
B) The nurse manager.
C) A nurse with 1 year of experience.
D) An informal leader on the unit.


Question 1648

The nurse is providing care to a client who is diagnosed with bulimia. Which clinical manifestations does the nurse anticipate when conducting the physical assessment? Select all that apply.
A) Poor skin turgor
B) Hoarseness when speaking
C) Increased urine output
D) Elevated blood pressure
E) Low body temperature


Question 1649

A nurse working in the intensive care unit (ICU) is caring for a client in progressive hemorrhagic shock. When planning care for this client, which does the nurse anticipate?
A) A blood loss of 25%
B) A change from aerobic to anaerobic metabolism
C) A sustained decrease of 10mmHg of the client's mean arterial pressure (MAP)
D) A decrease in hydrostatic pressure within the capillary, shifting fluid into the interstitial space


Question 1650

The clinical information system committee at a major healthcare organization is designing a plan to ensure the protection of client information. Which
approaches should this committee include in the implementation plan? Select all that apply.
A) Determine how to handle clients who desire to "friend" staff through social media.
B) Create interfaces so that health data can be inputted by the client.
C) Identify a procedure if information is inputted in the incorrect client record.
D) Design policies to address password protection and log-in information.
E) Identify applications that interface with smartphones.

Question 1651

The nurse is determining ways to decrease environmental stimuli for a client with increased intracranial pressure. What actions should the nurse take to support this client's care need? Select all that apply.
A) Provide all care quickly at one time to provide periods of rest.
B) Keep the room dark and quiet.
C) Teach family to speak softly and minimize touching.
D) Elevate the head of the bed.
E) Limit the client's visitors.

Question 1652

A client is diagnosed with viral hepatitis transmitted by the fecal-oral route. Which conditions may be acquired by this mode of transmission?
A) Hepatitis A (HAV) and hepatitis E (HEV)
B) Hepatitis D (HDV)
C) Hepatitis B (HBV) and hepatitis C (HCV)
D) Hepatitis A (HAV), Hepatitis B (HBV), Hepatitis C (HCV), Hepatitis D (HDV), and Hepatitis E (HEV)

Question 1653

The nurse has completed a seminar teaching a group in the community about ways to reduce cancer risks. The nurse returns a month later to evaluate the effectiveness of the seminar. Which statements made by members of the group indicate retention and application of the material presented by the nurse to reduce the risk of developing cancer? Select all that apply.
A) "I have increased the amount of lean red meat in my diet."
B) "I began drinking two glasses of red wine a day with dinner."
C) "I now limit my alcohol intake to three drinks per week."
D) "I have reduced my intake of fiber."
E) "I stopped using tanning booths."

Question 1654

A client is scheduled to undergo a prostate biopsy. The client asks the nurse what is expected immediately following the procedure. Which response by the nurse is the most appropriate?
A) "You will not have any restrictions following the biopsy."
B) "You will likely experience discomfort for 24-48 hours after the procedure."
C) "Your sexual partners will need to be notified."
D) "You will need to avoid strenuous activity for 24 hours."

Question 1655

A female client asks what causes the symptoms of menopause. On which hormonal function should the nurse focus when responding to this client's question?
A) Increased luteinizing hormone levels
B) Increased estrogen levels
C) Increased progesterone levels
D) Estrone as the major hormone

Question 1656

A young client is brought into the emergency department by a friend who says the client was "beat up" at school. The client is reluctant to provide the names of parents or a home address. Which should the nurse suspect has occurred with this client?
Question 1657

A client with terminal cancer has signed an advance directive indicating that no parenteral nutrition or hydration will be implemented. For several days the client has refused food and fluids, pushing the caregiver’s hands away when attempts are made to feed the client or offer any kind of fluid. The family is considering placing a gastrostomy tube because they feel the client is “starving to death.” Which actions by the nurse are appropriate? Select all that apply.
A) Take the case to the hospital’s ethics committee.
B) Honor the client’s refusal of parenteral nutrition and hydration.
C) Honor the family’s wishes and have them sign a consent form.
D) Talk to the healthcare provider so the family’s wishes can be acted upon.
E) Help the family come to terms with the situation.


Question 1658

The nurse identifies the diagnosis Risk for Injury as appropriate for a client with metabolic acidosis. Which strategies should the nurse use to support this diagnosis? Select all that apply.
A) Apply wrist restraints and secure to the bed frame.
B) Keep the bed in the lowest position.
C) Keep bed side rails raised.
D) Discuss chemical restraint use with the healthcare provider.
E) Place a clock and calendar at the bedside.


Question 1659

A nurse is evaluating the plan of care for a client diagnosed with obsessive-compulsive disorder (OCD). Which client statement indicates a positive outcome for the plan of care?
A) “Instead of washing my hands several times a day I use hand sanitizer several times a day.”
B) “I am still hand washing frequently but it is less often than before. I think I am improving.”
C) “I am still hand washing frequently, and even though it is less than before I am a failure.”
D) “I don’t know why I can’t wash my hands several times a day; I have nothing else to do anyway.”


Question 1660

The nurse is planning care for a newly admitted bed-bound older adult client. Which nursing diagnosis would be most appropriate for this client?
A) Disturbed Body Image
B) Risk of Bowel Incontinence
C) Risk of Constipation
D) Risk of Diarrhea


Question 1661

The nurse assigned to the newborn nursery is conducting shift assessments. While assessing one newborn, the nurse notes the respiratory rate is 52 breaths per minute. Which action by the nurse is appropriate?
A) Continue to monitor the newborn per facility policy.
B) Obtain an arterial blood gas for further respiratory assessment.
C) Begin monitoring the respiratory rate every 5 minutes.
D) Notify the healthcare provider of this assessment finding.


Question 1662

The nurse is preparing to teach a class on the prevention of constipation. Which food choice with the nurse include as an example of a high-fiber food?
A) Raw fruits
**Question 1663**

A home health nurse is teaching an older adult client who has returned home after discharge from the hospital about injury prevention. Which goal would be appropriate to include in this client’s plan of care?

A) The client will take prescribed medication as desired.
B) The client will demonstrate an understanding of all limitations.
C) The client will make uninformed choices when addressing health issues.
D) The client will establish a buddy system.

**Question 1664**

The nurse, planning care for a client with Parkinson disease (PD), identifies which intervention as supporting mobility while providing the spouse with an activity that is beneficial for the client?

A) Review the medication administration schedule with the spouse.
B) Instruct the spouse to ambulate the client at least four times a day.
C) Suggest that the spouse use a blender to make foods easier for the client to swallow.
D) Instruct the spouse on proper turning and repositioning techniques.

**Question 1665**

Which client observation indicates that interventions provided to a client in the manic phase of bipolar disorder has improved self-care activities?

A) Cleaned liquid spilled on floor but did not change clothes
B) Washes hands after using the toilet
C) Brushes own teeth every time when reminded
D) Completed morning bath and changed clothes

**Question 1666**

The school nurse cares for students with physical challenges and suspects that the needs for physical safety are not being adequately met for several students in the home environment. Which assessment findings support the nurse's concern? Select all that apply.

A) Limited arm range of motion
B) Scrapes on knees caused by falling from a bicycle
C) Lunch contains leftovers from previous evening dinner
D) Wearing the same clothes to school several days of the week
E) Hand burn from touching a hot stove

**Question 1667**

A client who is 4 days post-cholecystectomy has T-tube drainage totaling 600 mL in 24 hours. Which actions by the nurse are appropriate based on this data? Select all that apply.

A) Clamp the tube q 2 hours for 30 minutes.
B) Place the client in a supine position.
C) Notify the healthcare provider.
D) Assess drainage characteristics.
E) Encourage an increased fluid intake.

**Question 1668**

During a routine physical examination, a preadolescent tells the nurse, “I am too fat and I'm going to do whatever I can to look like the girls on the cover of fashion magazines.” The nurse plans care for this client based on which risk factor for eating disorders?

A) Societal influences on body weight for girls
B) Family influences on body weight
C) A desire for a long-term profession
D) Unrealistic expectations
## Question 1669

A nurse working in the emergency department is providing care for a group of clients. Which client demonstrates a decline immune response that typically occurs with the aging process?

A) An 88-year-old client with pneumonia who has a temperature of 99.5°F  
B) A 70-year-old client who has swelling and redness around an abdominal incision from an open appendectomy  
C) A 56-year-old client who has 8 mm induration at the site of a PPD skin test 72 hours earlier  
D) A 58-year-old client who complains of redness and itching after developing a rash from contact with poison ivy  


## Question 1670

The charge nurse is observing a newly licensed nurse catheterize an older adult client admitted with an enlarged prostate. Which action by the newly licensed nurse requires intervention from the charge nurse?

A) The newly licensed nurse clamps the catheter after draining 500 mL.  
B) The newly licensed nurse injects 10 mL of 2% lidocaine gel into the client's urethra.  
C) The newly licensed nurse clamps the catheter after draining 800 mL.  
D) The newly licensed nurse inserts a 16 French coudé-tipped catheter.  


## Question 1671

The nurse is planning care for a client with osteoarthritis. Which diagnosis would have the highest priority?

A) Chronic Pain  
B) Ineffective Coping  
C) Fatigue  
D) Disturbed Body Image  


## Question 1672

The nurse is providing care to a client who is diagnosed with anorexia nervosa. Which assessment findings indicate the client has met some of the treatment goals related to the disease process? Select all that apply.

A) The client states that her menstrual cycle is regular and she is learning to prepare meals.  
B) The client is observed wearing wrinkled clothes, listening to a portable music device, and staring out the window.  
C) The client is observed telling her mother that she will eat dinner if her mother buys her new jeans.  
D) The client's current weight is 75% of normal after 2 years of treatment.  
E) The client's vital signs are within normal limits.  


## Question 1673

The nurse is caring for a pediatric client with surgical wound. The wound is red with purulent drainage and is causing discomfort for the client. Which diagnostic test will determine if the discomfort of the wound is caused by an infection?

A) PET scan  
B) White blood cell count  
C) X-rays of the site  
D) Electrolyte panel  


## Question 1674

A nurse is preparing to discharge a client who experienced a myocardial infarction. The client will have to make many lifestyle changes and the nurse is providing instruction on how to implement a heart-healthy lifestyle. Which is the best description of the client education the nurse presented to this client?

A) Dependent function of nursing that needs a healthcare provider's order to implement.  
B) Important independent nursing function.  
C) Way to establish the client's dependence on the nurse.  
D) Activity nurses learn on the job.  

Question 1675

A pregnant client experiences abruptio placentae. The father of the baby asks the nurse why this has happened to them. Which risk factor in the
client's history is the likely cause for this condition?
A) Maternal cocaine use
B) The mother having low levels of folic acid
C) Maternal smoking
D) Genetic history

Question 1676

The nurse is planning care for a young adolescent client diagnosed with asthma. Which evidence-based age-appropriate interventions will the nurse
include in the plan of care? Select all that apply.
A) Assessing peer-support when planning care
B) Collaborating with teachers for support in the school setting
C) Referring to a peer-lead support group
D) Teaching the parents how to administer maintenance medication prior to teaching the client
E) Telling the client to avoid medication while at school

Question 1677

The nurse working on a pediatric unit is caring for a client newly diagnosed with asthma. Which assessment data indicates exhaustion and the need
for immediate intervention? Select all that apply.
A) Increased crackles
B) Shallow respirations
C) Slightly diminished breath sounds
D) Increased respiratory rate
E) Decreased wheezing

Question 1678

An adult client who resides in a long-term care facility is diagnosed with osteoporosis. The client has a history of falls and dementia. Which nursing
intervention will best aid in meeting an outcome goal of injury prevention for this client?
A) Keeping a nightlight on in the room
B) Using furniture as obstacles to keep the client in the bed
C) Keeping the bed in the lowest position
D) The use of wrist restraints

Question 1679

The nurse is explaining the alteration in normal function to a client recently diagnosed with gastrointestinal reflux disease (GERD). Which etiology
contributing to GERD will the nurse include in the teaching session?
A) Prolonged constriction of the upper esophageal sphincter
B) Incompetent lower esophageal sphincter
C) Transient constriction of the lower esophageal sphincter
D) Decreased pressure within the stomach

Question 1680

Which statements accurately reflect the distinction between nursing diagnoses arrived at as part of the nursing process and medical diagnoses?
Select all that apply.
A) Both nursing diagnoses and medical diagnoses include a wellness diagnosis component.
B) A nursing diagnosis describes a client's physical, sociocultural, psychological, and spiritual responses to an illness or health condition; a medical
diagnosis refers to disease processes.
C) A nursing diagnosis considers the etiology of the health problem to give direction to required nursing care; a medical diagnosis does not consider
the etiology of the health problem to give direction to medical care.
D) A nursing diagnosis changes as the client's responses to an illness or health situation change; a medical diagnosis remains the same as long as
the disease process persists.
E) A nursing diagnosis is determined following an assessment and analysis of data gathered only by registered nurses; a medical diagnosis is determined following an assessment and analysis of data gathered only by physicians.
F) A nursing diagnosis requires the nurses to consider standards and norms as well as cues from clients in discerning an appropriate nursing diagnostic label; a medical diagnosis uses standards and norms only.


Question 1681

The nurse is caring for a young adult client after a cervical biopsy. The client has expressed anxiety about the results. The healthcare provider peeked into the client's room and says, "The biopsy is negative." The nurse later finds the client sobbing. Which response by the nurse is appropriate?
A) "You seem upset. Do you want to talk to me about the test results?"
B) "The term 'negative' in this case is good!"
C) "Why are you crying with such good news?"
D) "What did the healthcare provider tell you about the biopsy?"


Question 1682

A client is admitted with behavior consistent with a borderline personality disorder. Which prescription does the nurse anticipate for this client?
A) Dialectical behavior therapy
B) Occupational therapy
C) Exercise therapy
D) Vitamin B12 injections


Question 1683

A client with chronic renal disease is experiencing manifestations of anemia. Based on this data, which treatment does the nurse anticipate for this client?
A) Begin a fluid restriction.
B) Begin a low-sodium diet.
C) Administer intravenous glucose and insulin.
D) Epoetin injections


Question 1684

The nurse is conducting a class for a group of pregnant clients. Which topic should the nurse include with regard to safety of the fetus?
A) Drowning
B) Alcohol consumption
C) Pedestrian accidents
D) Suffocation in the crib


Question 1685

Upon entering a room, the nurse quickly scans the environment and then immediately assesses the client for manifestations of metabolic acidosis. Which did the nurse observe to precipitate this client assessment?
A) Half of the client's lunch tray uneaten
B) One formed stool in the bedside commode
C) 1000 mL of intravenous 0.9% normal saline infused in 2 hours
D) Client sleeping with the head of the bed flat


Question 1686

A nurse educator is discussing the changes in the healthcare system with a group of nursing students. The students ask why the cost of health care has increased so much in recent years. Which is the best response by the nurse?
A) "There are not enough technological advances."
B) "There is a decrease in chronic disease."
C) "There is an increased use of alternative medicine."
D) "Many people are forced to seek routine health care in the emergency department."

Question 1687
A nurse enters a client's room to assess an intravenous (IV) infusion because of an alarm on the pump that required the nurse's attention. While assessing the IV infusion, the client is asking the nurse questions regarding religion and the client indicates that he would like to have someone to pray with. Which action taken by the nurse while in the room is an example of transcendent presence?
A) After entering the room and while taking care of the intravenous infusion, the nurse stops and listens to the client's questions and then offers to pray with the client.
B) After entering the room and while taking care of the intravenous infusion, the nurse stops and listens to the client's questions and then offers to call a clergy member.
C) After entering the room, the nurse focuses her attention on the intravenous infusion and does not acknowledge the client.
D) The nurse enters the room and answers the client's questions by nodding while taking care of the intravenous infusion.

Question 1688
The nurse is assessing a client who demonstrates physiologic manifestations of a stress response. Which physiologic manifestations result for the inhibition of the parasympathetic nervous system? Select all that apply.
A) Hypoactive bowel sounds
B) Increased heart rate
C) Increased respiratory rate
D) Dry oral mucous membranes
E) Increased depth of respirations

Question 1689
The nurse is caring for a client who is admitted to the unit with tuberculosis (TB). The client is placed in isolation. To protect the caregivers and other clients on the unit, which type of isolation room is most appropriate?
A) Isolation room with an anteroom and normal airflow
B) Single-door room with positive air flow (Air flows out of the room.)
C) Single-door room with normal airflow
D) Isolation room with an anteroom and negative air flow (Air flows into the room.)

Question 1690
A nurse educator is working with a group of nurses who are working toward earning a graduate degree. The group is interested in replication studies. Which study would be the most appropriate given the changing demographics in the United States?
A) Studying how effective use of supplies affects the cost of care
B) Studying how new technology affects care of clients
C) Studying the ability of families to adapt to acute health problems
D) Studying the ability of an aging population to care for itself

Question 1691
An older adult client with renal failure is diagnosed with anemia. Based on this data, which cause of anemia will the nurse plan for when providing care?
A) A loss of appetite related to elevated blood urea nitrogen (BUN) and creatinine levels
B) Loss of the kidney hormone erythropoietin
C) Loss of blood through the urine because the failing kidney does not function properly
D) The renal dialysis used to treat the chronic renal failure

Question 1692
The nurse suggests that the mother of an infant with failure to thrive (FTT) see a lactation specialist to assist with breastfeeding. Which is an appropriate goal when planning care for this family?
A) Speech therapy
B) An assessment by child protective services
C) Physical therapy to promote development
D) Growth hormone
### Question 1693

The nurse is preparing an educational program on risk factors for the development of prostate cancer. Which information will the nurse include as being the greatest risk factor for developing prostate cancer?

- A) A family history
- B) The client's age
- C) A diet high in fat
- D) A history of a vasectomy

**Answer:** https://biology-forums.com/index.php?topic=406085

### Question 1694

A novice nurse is looking for employment and hopes to find a facility where the nursing staff participates in making, implementing, and evaluating client care policies. Which organizational module implements these practices?

- A) Client-focused care
- B) Differentiated practice
- C) Shared governance
- D) Managed care

**Answer:** https://biology-forums.com/index.php?topic=407717

### Question 1695

A client diagnosed with cardiomyopathy asks the nurse to explain the different types of the disease. Which is inappropriate for the nurse to include in the teaching session?

- A) Arrhythmogenic right ventricular cardiomyopathy
- B) Hypertrophic cardiomyopathy
- C) Dilated cardiomyopathy
- D) Restrictive cardiomyopathy

**Answer:** https://biology-forums.com/index.php?topic=406582

### Question 1696

A nurse is caring for a client who was admitted to the hospital with an exacerbation of rheumatoid arthritis (RA). The client reports pain is a 3 on a scale from 1 to 10 today. Which non-pharmacological interventions can the nurse provide to enhance the client's comfort? Select all that apply.

- A) Offer a massage.
- B) Discourage any position changes.
- C) Immobilize the extremity.
- D) Encourage relaxation techniques.
- E) Provide diversion activities.

**Answer:** https://biology-forums.com/index.php?topic=405991

### Question 1697

During a home visit, the nurse evaluates teaching provided to a client recently hospitalized for metabolic alkalosis. Which observation indicates that additional teaching is required?

- A) Monitors and tracks daily weights.
- B) Ingests bicarbonate of soda after each meal.
- C) Consumes one orange each day with breakfast.
- D) Drinks 2 cups of black coffee each day.

**Answer:** https://biology-forums.com/index.php?topic=405833

### Question 1698

The home health nurse is providing palliative care to a client. When sorting the client's narcotic pain medications for the week, the nurse notes that there is two weeks' worth of medication missing from the client's current prescription. The client says that the only individuals with access to the medication include the client and one other home healthcare nurse. The nurse suspects that the other home healthcare nurse took the missing medication. Which action by the nurse is appropriate?

- A) Tell the client to confront the other nurse.
- B) Have the client file a police report.
- C) Call the authorities immediately.
- D) Call the state board of nursing.

**Answer:** https://biology-forums.com/index.php?topic=407826
Question 1699

The nurse is planning teaching for a client diagnosed with diabetic neuropathy. What should the nurse include in this teaching?

A) Set the water heater at 120°F.
B) Use a mirror to inspect feet daily.
C) Increase medication for pain as necessary.
D) Avoid hand and foot massages.


Question 1700

A client who recently learned of being pregnant tells the nurse that she stopped eating meat years ago and started eating fish daily because it is healthier. Which teaching points are appropriate for this client based on her current diet? Select all that apply.

A) Avoid shrimp, salmon, and catfish because these have higher mercury levels.
B) Follow a complete vegetarian diet while pregnant as an alternative to eating fish.
C) Eat plenty of fish such as swordfish and shark while pregnant.
D) Avoid albacore tuna because it has more mercury than other canned tuna.
E) Eat up to 12 ounces a week of a variety of fish and shellfish.


Question 1701

A client is scheduled to have a suspected cancerous lesion removed from the arm. When planning care for this client, which outcome would be a priority?

A) The client will experience minimal pain after healing.
B) The client will heal without signs of infection.
C) The client will not need to make lifestyle changes.
D) The client will make nutritional changes.


Question 1702

A client is experiencing dysuria, urinary frequency, and vaginal discharge. For which sexually transmitted infection(s) should the nurse prepare the client for testing? Select all that apply.

A) Vaginitis
B) Chlamydia
C) Trichomoniasis
D) Syphilis
E) Gonorrhea


Question 1703

The nurse in the clinic is assessing an adult client who has 2+ ankle edema, crackles throughout the lung fields, and dyspnea on exertion. Which will the nurse inquire about prior to initiating the client's teaching plan?

A) The client's diet.
B) The client's family history.
C) The client's marital status.
D) The number of children the client has.


Question 1704

A nurse is planning a research comparing the use of finger-stick blood glucose testing with the use of alternative sites for adult male clients. Which elements of the PICOT formulation of the clinical question will still need to be defined? Select all that apply.

A) People
B) Issue
C) Time
D) Outcome
E) Comparison

Question 1705
A school-age child, recently diagnosed with celiac disease, is underweight, vitamin-deficient, anemic, and experiences frequent diarrhea. In addition to removing gluten from his diet, what other recommendations will the nurse provide for this child and family? Select all that apply.
A) High protein diet
B) Fat restriction
C) Vitamin supplements
D) A high-carbohydrate diet
E) High-calorie diet

Question 1706
A client with type 1 diabetes mellitus has developed an open sore on the shin and is having trouble meeting daily goals for exercising. The client is scheduled for discharge in a couple of days. When planning for this client's continued care, who will the nurse notify regarding the client's needs after discharge?
A) The pharmacy
B) The physical therapist
C) The case manager
D) The occupational therapist

Question 1707
The nurse is caring for a client with chronic constipation. Which findings in the client's health history could be the cause of the current constipation? Select all that apply.
A) Depression
B) Low-fiber foods
C) Bed rest
D) Chronic laxative use
E) High-fiber foods

Question 1708
A client tells his nurse, "I really don't like the nurse on first shift; she treats me bad." What action should the nurse take as an advocate for this client?
A) Confront the nurse when she comes to work.
B) Tell the client he has the right to switch nurses.
C) Call the local authorities.
D) Call the agency client advocacy department.

Question 1709
A nurse is caring for a client who is receiving IV tobramycin for the treatment of a respiratory infection. On which sensory factor will the nurse focus when concerned about this medication's toxic effects on the body?
A) Vision
B) Taste
C) Swallowing
D) Hearing

Question 1710
The nurse is caring for a client newly admitted to the medical-surgical unit with glomerulonephritis. Which classic manifestations of this disorder should the nurse expect to assess in this client? Select all that apply.
A) Hematuria
B) Proteinuria
C) Weight loss
D) Edema
E) Acute flank pain
Question 1711

A client with glaucoma has been using timolol (Timoptic) to manage the condition for the past 3 years. Which assessment finding indicate the client is experiencing an adverse reaction to the medication?

A) Reduced urinary output  
B) Diarrhea  
C) Excessive salivation  
D) Heart rate less than 57 beats per minute


Question 1712

The mother of an 8-month-old baby who has developed respiratory syncytial virus (RSV)/bronchiolitis wants to know which factors contribute to the risk of contracting RSV. Which response by the nurse is appropriate?

A) "There is a higher risk in children who are being breastfed."  
B) "There is a higher risk in children who are exposed to secondary cigarette smoke."  
C) "It is seen more frequently in children who do not attend daycare."  
D) "There is no way to avoid the illness."


Question 1713

A client recovering from a stroke is being discharged on warfarin sodium (Coumadin). During discharge teaching, which statement by the client would reflect an understanding of the effects of this medication?

A) "I will not eat spinach while I'm taking this medicine."  
B) "I'll check my blood pressure frequently while taking this medication."  
C) "I will stop taking this medicine if I notice any bruising."  
D) "It will be okay for me to eat anything, as long as it is low-fat."


Question 1714

The student nurse attends a workshop on culture and diversity with regards to respiratory syncytial virus (RSV). Which statement made by the student at the end of the workshop indicates understanding of the information presented?

A) "RSV is the major cause of hospitalization for Native American infants."  
B) "RSV is the major cause of hospitalization for African-American infants."  
C) "RSV is the major cause of hospitalization for Asian-American infants."  
D) "RSV is the major cause of hospitalization for Alaskan Native infants."


Question 1715

A nurse educator is teaching a group of students about therapeutic touch. In which situation is it appropriate to use therapeutic touch as a means of communication?

A) When a family member is making inappropriate comments to the nurse.  
B) When an upset spouse is alone and the client has just expired.  
C) When a young male client asks a young student nurse for a hug.  
D) It is never appropriate in the nursing profession.


Question 1716

The nurse overhears a client apologize to the spouse about being ill and leaving tasks at home uncompleted. In addition to this client's reason for hospitalization, the nurse realizes this client is at risk for developing which disease process?

A) Osteoporosis  
B) Diabetes  
C) Depression  
D) Congestive heart failure


Question 1717

After an assessment, the nurse determines that an older adolescent client is experiencing a maturational crisis because of which findings? Select all.
that apply.
A) Cannot sleep at night and skips classes
B) Graduating from high school in 2 months
C) Relationship with significant other ended
D) Inability to focus on school studies
E) Recent death of a friend

Question 1718
A client approaching menopause is interested in oral hormone replacement therapy to manage the symptoms. Which should the nurse include in this client's teaching plans?
A) Hormone replacement therapy is linked to higher rates of deep vein thrombosis and colorectal cancer.
B) Hormone replacement therapy is useful for women who are at an increased risk for the development of osteoporosis.
C) Hormone replacement therapy is associated with a reduced incidence of breast cancer and pulmonary embolism.
D) Estrogen is cardio-protective for women.

Question 1719
The nurse is caring for a client who has recently been diagnosed with fibromyalgia. Which medications does the nurse anticipate will be prescribed as part of the client's treatment plan? Select all that apply.
A) Ibuprofen
B) Pregabalin (Lyrica)
C) Tenormin (Atenolol)
D) Aerobic exercise
E) Zolpidem (Ambien)

Question 1720
The nurse is preparing to analyze a client's arterial blood gas results. List the steps in the order that the nurse should follow when analyzing this laboratory test.
1. Look at the PaCO2.
2. Look at the pH.
3. Evaluate the relationship between pH and PaCO2.
4. Look for compensation.
5. Evaluate the pH, HCO3, and base excess for a possible metabolic problem.
6. Look at the bicarbonate.
7. Evaluate oxygenation.

Question 1721
The nurse is considering nutritional support for a client experiencing severe side effects of chemotherapy. Which independent and collaborative interventions will best limit the adverse digestive and nutritional effects of chemotherapy?
A) Position the client flat during intermittent enteral nutrition feedings.
B) Verify that enteral nutrition and total parenteral nutrition (TPN) are never used concurrently.
C) Offer the client music therapy in addition to IV ondansetron.
D) Encourage client to drink 350 ml of clear liquids within 1 hour prior to meals.

Question 1722
The nurse instructs an older adult client with arthritis on the side effects of nonsteroidal anti-inflammatory drug (NSAID) therapy. Which client statement would indicate that teaching had been effective?
A) "I cannot take other medications."
B) "If I have a change in my mood I will call the prescriber."
C) "Caffeine will decrease the effectiveness of the medication."
D) "I will report any abnormal bruising."

Question 1723
A client has been admitted with chronic obstructive pulmonary disease. Diagnostic tests have been ordered. Which of the tests will provide the most accurate indicator of the client’s acid-base balance?
A) Arterial blood gases (ABGs)
B) Bronchoscopy
C) Pulse oximetry
D) Sputum studies

Question 1724
A client admitted for injuries sustained in a motor vehicle crash states to the nurse, “I was hurt much worse the last time I crashed the car.” Which action by the nurse is appropriate to assist this client?
A) Report the client to the department of motor vehicles.
B) Find out what caused today’s car accident.
C) Suggest attending a driver’s safety course to learn how to avoid crashes.
D) Ask if he enjoys crashing his cars.

Question 1725
A client is admitted to the emergency department with a body temperature of 103°F. It is a hot and humid day, and the client works in a factory with no air conditioning. Which actions by the nurse are appropriate when providing care to this client? Select all that apply.
A) Apply cool washcloths to the face and neck.
B) Restrict fluids.
C) Remove or loosen clothing around the neck and chest.
D) Assess vital signs.
E) Use warm blankets.

Question 1726
The nurse is conducting a health history on a client who is being admitted to a medical-surgical unit for the treatment of chronic pain. The client is concerned about privacy and asks why it is necessary for the nurse to ask for private information and then document it in the medical record. Which response by the nurse is most appropriate?
A) “You will be able to read the record and review your care.”
B) “Your family can review the record and ensure that care is appropriate.”
C) “Documentation decreases the likelihood that you will have to repeat this information to others who will care for you.”
D) “A record ensures there are no breaches of confidentiality.”

Question 1727
The nurse is caring for a school-aged child who had a bone marrow transplant for the treatment of leukemia several weeks ago. The child requires protective isolation. Which statement by the child’s family indicates understanding of this type of isolation?
A) “We will encourage meticulous hand washing among all people in contact with our child.”
B) “It will be important to restrict all visitors.”
C) “You will have to administer all medications by IM injection.”
D) “We will encourage oral hygiene twice a day.”

Question 1728
The nurse is caring for a client who lost a spouse of 30 years, 1 year ago. During care, the client asks the nurse with help in completing certain tasks: pick out a clean shirt, help with shaving, and combing the hair. The client is expecting a visit today from a “special lady friend.” Which goal for grieving has this client met?
A) The client has accepted his disability by asking the nurse for help.
B) The client has emotionally moved on with his life.
C) The client is working through the pain of his wife’s death.
D) The client has adjusted to the hospital environment and the role of the nurse.

Question 1729
The nurse taking care of a client in the clinic notes that the client comes in twice per week, but never seems to have anything majorly wrong. Which is
**Question 1730**

The nurse is providing health education to a diverse group at a neighborhood community center. **Why does the nurse plan to include signs and symptoms of systemic lupus erythematosus (SLE)?**

A) The audience has asked the nurse to include the information.
B) The audience is mainly females of Asian-American descent.
C) The audience is mainly composed of Caucasian women.
D) The neighborhood is composed of many young female children.


**Question 1731**

The nurse manager is conducting audits to help increase efficiency and reduce costs to enhance the quality of client care. Which suggestion by the manager may occur as a result of these audits?

A) Decrease staffing on the unit.
B) Acquire new client care equipment.
C) Install cameras to detect abuse of the clients.
D) Conduct a wound care study to enhance client outcomes.


**Question 1732**

The nurse is providing discharge instructions to an older adult client recovering from a fractured hip. The client is planning to stay with an adult child, who is included in the discharge teaching. **Which statements indicate appropriate understanding of the information presented? Select all that apply.**

A) "I can help out my child with housework while I'm staying."
B) "I will be sure to take oxycodone before I go downstairs in the morning."
C) "I've borrowed a toilet seat riser from the equipment closet."
D) "I have signed a contract with Lifeline."
E) "We are replacing the carpet with laminate flooring."


**Question 1733**

A nurse is providing care for a nonverbal client. The nurse wants to implement strategies that will promote communication with this client. **Which interventions would be appropriate for the client in this situation? Select all that apply.**

A) Employing an interpreter
B) Using a picture board to facilitate communication
C) Making sure that the language spoken is the client's dominant language
D) Facing the client when speaking
E) Having pen and paper on hand for the client


**Question 1734**

While reviewing laboratory results, the nurse notes that a client's potassium level is 2.8 mEq/L and chloride level is 100 mEq/L. Based on this data, which intervention does the nurse plan for this client?

A) Discussing potassium chloride replace therapy with the healthcare provider
B) Reviewing implications of transfusing with ammonia chloride
C) Preparing to administer 0.9% sodium chloride infusion
D) Measuring for nasogastric tube insertion


**Question 1735**

The nurse is concerned that a client with a fluid imbalance is at risk for an alteration in perfusion. Which assessment data indicates that the client is experiencing an alteration in perfusion? **Select all that apply.**

A) Peripheral pulses present and full
B) Capillary refill of nail beds 3 seconds
C) Bowel sounds sluggish in all four quadrants
D) Oriented to person, place, and time
E) Skin turgor 20 seconds

Question 1736
A client with chronic hip pain is diagnosed with osteoarthritis. Which instruction regarding home safety is the most appropriate for the nurse to provide to this client?
A) Walk up and down the steps at home as much as possible.
B) Install grab bars in the bathroom near the commode and in the shower.
C) Rest in a recliner.
D) Place scatter rugs in high-traffic areas.

Question 1737
The nurse is instructing a client about the medication sildenafil (Viagra). Which client statement indicates teaching has been effective?
A) "Grapefruit juice will decrease the effects of Viagra."
B) "Viagra should be taken with food."
C) "I can take Viagra anywhere from 1 to 6 hours before sex."
D) "I can take only one pill in a 24-hour period."

Question 1738
The nurse is caring for an older adult client with decreased energy who needs to get up to prevent the development of pressure ulcers. The client is unable to ambulate and wants to be alone. What should the nurse do?
A) Notify the healthcare provider of the client's noncompliance.
B) Proceed to get help to get the client out of bed.
C) Leave the client alone until ready to get out of bed.
D) Gain knowledge about the client from family to gain compliance.

Question 1739
The nurse determines that a toddler-age client is unable to respond to noises in the environment and has difficulty following the movement of toys. Which diagnostic tools does the nurse anticipate will be used to further assess this client? Select all that apply.
A) Audiology testing
B) CT scan of the brain
C) Nerve conduction studies
D) Vision test
E) Abdominal x-rays

Question 1740
During the assessment, the nurse observes a client who was a victim of a home invasion abruptly stand up and begin to run out of the room in response to hearing a loud bang. Which should the nurse assume regarding the client's behavior?
A) The client wanted to check the cause for the loud noise.
B) The client thought there was an earthquake.
C) The client thought the assessment was concluded.
D) The client was reacting to the loud noise as a form of a flashback.

Question 1741
A school-age client with a history of multiple allergies is prescribed epinephrine (EpiPen) for prevention of anaphylactic shock. The client's mother says to the nurse, "I thought shock was about heart failure." Which response by the nurse is the most appropriate?
A) "Heart failure is the most serious kind of shock; others include infection, kidney failure, and loss of blood."
B) "There are many kinds of shock: heart failure, nervous system damage, loss of blood, and respiratory failure."
C) "There are many kinds of shock that also include infection, nervous system damage, and loss of blood."
D) "Allergic response is the most fatal type of shock; other types involve loss of blood, heart failure, and liver failure."
Question 1742
A nurse is planning care for a client with a contact dermatitis. When conducting discharge teaching, which statement by the nurse is appropriate?
A) "When using steroid ointments, use a thick layer on dry skin for maximum absorption."
B) "Use steroid ointments for 2 to 3 weeks for best results."
C) "Avoid the use of all lotions."
D) "Bathe or shower twice daily to reduce allergen contact."

Question 1743
The nurse is working in a low-income neighborhood as a home health nurse. During one of the home care visits, the nurse notes that the children's playground has broken equipment, which the children continue to play on. The nurse has already contacted the owner of the playground about the issue. What action might the nurse take as a public advocate?
A) Write an article to the local newspaper to gain public attention.
B) Tell the parents they should not pay their rent until the playground is fixed.
C) No action is required; this is a civil problem beyond the realm of the nurse.
D) Call the police to report the owner's neglect.

Question 1744
The healthcare provider prescribes an indwelling urinary catheter for a client with urinary retention. Which intervention, along with strict aseptic technique, will decrease the risk of infection for this procedure?
A) Irrigating the catheter with sterile saline on a daily basis
B) Using an anesthetic lubricating gel during insertion
C) Instructing the client to void around the catheter
D) Inflating the balloon while the catheter is in the urethra

Question 1745
The nurse is caring for a client who is diagnosed with a cocaine addiction. For which additional disorder should the nurse assess this client?
A) Kidney stones
B) Anxiety
C) Diabetes
D) Weight gain

Question 1746
The nurse has identified the diagnosis of Ineffective Coping for a client with severe premenstrual syndrome. What should be included in this client's plan of care?
A) Suggest 4 ounces of wine each day.
B) Encourage exercise and relaxation techniques.
C) Instruct to avoid contraception during menstruation if engaging in sexual intercourse.
D) Encourage frequent rest periods.

Question 1747
An adolescent client hospitalized with asphyxiation from a failed suicide attempt tells the nurse, "I know other kids have the same problems I do, but I just wanted to make it stop." Which action by the nurse is the most appropriate?
A) Suggest the client listen to music and read a light novel to reduce stress.
B) Ask if the client would like to talk about stressors and problems.
C) Ask what is so devastating that the client needed to commit suicide.
D) Discuss the client's attendance at school and what activities are enjoyed.

Question 1748
The nurse is preparing discharge instructions for a client with a foot wound. How will the nursing information system support this client's learning
Question 1749
The nurse is preparing to conduct a cardiac assessment for a pediatric client. Which location will the nurse use when auscultating the apical pulse?
A) At the right nipple
B) At the fifth intercostal space
C) At the left nipple
D) At the 8th intercostal space

Question 1750
A nurse caring for clients with heart failure must be aware of the compensatory mechanisms activated in heart failure. Which physiology is not associated with the neuroendocrine compensatory mechanism?
A) Decreased CO stimulates the sympathetic nervous system and catecholamine release.
B) Antidiuretic hormone is released from posterior pituitary.
C) Decreased CO and decreased renal perfusion stimulate the renin-angiotensin system.
D) Increased cardiac workload causes myocardial muscle to hypertrophy and ventricles to dilate.

Question 1751
The emergency department nurse is caring for a client with multiple injuries. The client has had a diagnostic peritoneal lavage to determine the presence of blood in the peritoneal cavity. Which result would indicate to the nurse that the diagnostic test is considered positive?
A) The solution returns clear and is found to have a red blood cell count of 90,000 mm3.
B) The solution returns pink and is found to have bile, food, or feces.
C) The solution returns pale pink and is found to have a white blood cell count of < 500.
D) The solution returns pale pink and is found to have a red blood cell count of 50,000 mm3.

Question 1752
The nurse is caring for a client who was admitted to a medical-surgical unit in a sickle cell crisis. Which medication should the nurse expect to administer to this client?
A) Acetaminophen (Tylenol)
B) Meperidine (Demerol)
C) Ibuprofen (Advil)
D) Hydroxyurea

Question 1753
The nurse assesses fatigue in an infant with acute bronchiolitis due to respiratory syncytial virus (RSV). Which nursing diagnosis would be most appropriate for the infant?
A) Decreased Cardiac Output
B) Ineffective Tissue Perfusion
C) Acute Pain
D) Activity Intolerance

Question 1754
A client has a laceration that was closed with tissue adhesive. Which is the process by which this wound will heal?
A) Delayed closure
B) Open approximation
C) Primary intention
D) Secondary healing
<table>
<thead>
<tr>
<th>Question 1755</th>
</tr>
</thead>
<tbody>
<tr>
<td>The nurse is providing discharge instructions to the family of a client with schizophrenia. What should the nurse teach regarding effective communication skills? Select all that apply.</td>
</tr>
<tr>
<td>A) Pick a time and topic to practice.</td>
</tr>
<tr>
<td>B) Decrease external stimuli.</td>
</tr>
<tr>
<td>C) Increase the dose of medication.</td>
</tr>
<tr>
<td>D) Talk with family or friends.</td>
</tr>
<tr>
<td>E) Leave the client alone.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 1756</th>
</tr>
</thead>
<tbody>
<tr>
<td>An older adult client with macular degeneration tells the nurse that “all of a sudden” the television screen appeared distorted, with the colors all “wrong.” Which action by the nurse is appropriate?</td>
</tr>
<tr>
<td>A) Check the client's medications for side effects of vision changes.</td>
</tr>
<tr>
<td>B) Contact the healthcare provider for an immediate ophthalmological evaluation.</td>
</tr>
<tr>
<td>C) Ensure the client's safety by raising the bed rails.</td>
</tr>
<tr>
<td>D) Talk with the client to assess for other hallucinations that might be occurring.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 1757</th>
</tr>
</thead>
<tbody>
<tr>
<td>A client tells the nurse about having increasing difficulty seeing the print while reading a newspaper. Which tool will the nurse use when assessing this client?</td>
</tr>
<tr>
<td>A) Rosenbaum eye chart</td>
</tr>
<tr>
<td>B) Cover-uncover test</td>
</tr>
<tr>
<td>C) Snellen eye chart</td>
</tr>
<tr>
<td>D) Penlight</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 1758</th>
</tr>
</thead>
<tbody>
<tr>
<td>The nurse is caring for a client who is receiving multiple drugs for treatment of tuberculosis. The nurse teaches the client the rationale for the multiple-drug treatment and evaluates learning as effective when the client makes which statement?</td>
</tr>
<tr>
<td>A) &quot;Multiple drugs are necessary because I became infected from an immigrant.&quot;</td>
</tr>
<tr>
<td>B) &quot;Multiple drugs are necessary to develop immunity to tuberculosis.&quot;</td>
</tr>
<tr>
<td>C) &quot;Multiple drugs will be required as long as I am contagious.&quot;</td>
</tr>
<tr>
<td>D) &quot;Multiple drugs are necessary because of the risk of resistance.&quot;</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 1759</th>
</tr>
</thead>
<tbody>
<tr>
<td>The nurse is caring for a Spanish-speaking client admitted for exacerbation of chronic obstructive pulmonary disease (COPD). The client speaks very little English and is a smoker. Which action would be the most beneficial for this client?</td>
</tr>
<tr>
<td>A) Encourage aerobic activity.</td>
</tr>
<tr>
<td>B) Obtain educational materials about smoking cessation written in Spanish.</td>
</tr>
<tr>
<td>C) Encourage the client to write down questions prior to seeing the healthcare provider.</td>
</tr>
<tr>
<td>D) Have the adult child of the client translate during the assessment process.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question 1760</th>
</tr>
</thead>
<tbody>
<tr>
<td>The nurse is caring for an older adult client with gallbladder disease recovering from a cholecystectomy. Which risk factors increase this client's susceptibility to infection? Select all that apply.</td>
</tr>
<tr>
<td>A) Non-intact skin</td>
</tr>
<tr>
<td>B) Dry skin</td>
</tr>
<tr>
<td>C) Intact mucous membranes</td>
</tr>
<tr>
<td>D) Active bowel sounds</td>
</tr>
<tr>
<td>E) Advanced age</td>
</tr>
</tbody>
</table>
Question 1761

A client witnessed a violent bank robbery. Which assessment findings would indicate that the client is experiencing posttraumatic stress disorder? Select all that apply.

A) Fear of returning to sleep
B) Hair pulling
C) Excessive sleeping
D) Terrifying nightmares
E) Aggressive behavior


Question 1762

A nurse is caring for a pregnant client who has a history of depression. When including information to decrease the client's risk for having an infant diagnosed with failure to thrive (FTT), which rationale is appropriate?

A) Women with mental illness have a decreased breast milk supply, increasing the risk of FTT.
B) Women with mental illness lack the knowledge required to provide adequate nutrition, increasing the risk of FTT.
C) Women with mental illness may be socially isolated, increasing the risk of FTT.
D) Women with mental illness take medications that pass through the breast milk, increasing the risk of FTT.


Question 1763

A nurse is caring for a client with Alzheimer disease (AD) who has receptive aphasia. Which area of the brain is likely damaged from AD?

A) Frontal lobe
B) Temporal lobe
C) Limbic system
D) Occipital lobe


Question 1764

The home care nurse observes a client scrubbing areas throughout the house over and over, especially areas where the family gathers. Prior to planning care for this client, which must the nurse assess?

A) How frequently the client cleans the house
B) If the client is forgetful
C) If the client vomits during cleaning
D) The impact of symptoms on the family system


Question 1765

A client with congestive heart failure (CHF) is having difficulty breathing. Before leaving the room the nurse ensures the client has an over-bed table to lean on when awake if needed to ease breathing. Which technique did the nurse use to make this decision?

A) Critical thinking
B) Conflict resolution
C) Priority-setting
D) Delegating a task


Question 1766

An adult female client is diagnosed with chronic fatigue syndrome. Which symptom would not be associated with this condition?

A) Confusion
B) Joint pain with swelling
C) Feeling unrefreshed after adequate sleep
D) Mild fever


Question 1767

A post-menopausal adult client is concerned about the development of osteoporosis and wants to begin preventative activities. Which statement by the nurse is appropriate?
A) "Hormone replacement therapy should be initiated as soon as possible."
B) "Weight-bearing exercise and calcium supplements are helpful in the prevention of osteoporosis."
C) "You should first determine if you are at risk for the development of osteoporosis."
D) "After menopause, the decline is too rapid to begin preventative interventions."

**Question 1768**

The nurse is teaching a class on the perception of pain. What will the nurse teach as being the second step in processing pain stimuli?
A) Cerebral cortex
B) Reticular system
C) Thalamus
D) Limbic system

**Question 1769**

During a home visit, the nurse instructs a young mother to bottle-feed the baby in the upright position. Which infectious health problem will this position help to prevent this child from developing?
A) Sinus infection
B) Aspiration
C) Choking
D) Otitis media

**Question 1770**

An older adult client with poor nutritional intake is demonstrating signs of poor wound healing. Which actions by the nurse are appropriate? Select all that apply.
A) Encourage ambulation.
B) Medicate for pain prior to dressing changes.
C) Assist with deep-breathing exercises.
D) Ensure an adequate fluid intake.
E) Request a dietary consult for nutritional support.

**Question 1771**

A client, who received a kidney from a young victim of a car accident, states, "Life is so unfair. Why did this young person have to die so that I could receive a kidney to live!" Which observations demonstrate the client has resolved the moral dilemma? Select all that apply.
A) The client is overheard phoning a travel agent and making plans for a trip in 2 months.
B) The client is overheard asking the organ transplant coordinator for information on how to volunteer to help other clients.
C) The client asked the healthcare provider how many years the new kidney added to his life.
D) The client is watching television and reading the paper.
E) The client is seen talking with the parents of the young victim and thanking them for their son's gift of life.

**Question 1772**

During a home visit, the nurse is concerned that an older client is at risk for nutritional health problems. Which data collected during the home visit caused the nurse to come to this conclusion? Select all that apply.
A) Client's Social Security payments have gone down over the last year.
B) Client's spouse recently died.
C) Client prepared a stew on the weekend and has been eating it for 4 days.
D) Client is prescribed 15 medications.
E) Client's adult children arrive to eat dinner together several times a week.

**Question 1773**

The community health nurse is planning education for a group of individuals from Alcoholics Anonymous on the risk factors for liver disease. The group has a high number of Native Americans in attendance. What should the nurse explain as the reasons for the high incidence of cirrhosis in this ethnic group? Select all that apply.
A) Stress due to socioeconomic factors
Question 1774
The nurse is prioritizing care for a client based upon nursing diagnoses. If following Maslow's hierarchy of needs, list the order in which the nurse should provide care to the client.
A) Fatigue
B) Anxiety
C) Alteration in Perfusion
D) Self-Care Deficit
E) Deficient Knowledge
F) Diarrhea

Question 1775
A nurse is performing an assessment on a client diagnosed with aortic stenosis. At which location will the nurse hear the client's murmur best?
A) Left sternal border, second intercostal space
B) Left sternal border, third to fifth intercostal space
C) Right sternal border, third intercostal space
D) Right sternal border, second intercostal space

Question 1776
An older adult client is diagnosed with cardiomyopathy and a cardiac dysrhythmia. What would the nurse expect to be prescribed for this client?
A) Nitrate medications
B) Fluids
C) Beta blocker
D) Digoxin

Question 1777
The nurse is caring for a client admitted with minor burns and elevated body temperature after being in a house fire. What should be included in this client's plan of care? Select all that apply.
A) Restricting fluids
B) Encouraging fluids
C) Keeping the room temperature warm
D) Providing blankets
E) Lowering room temperature

Question 1778
A primigravida is hospitalized at 32 weeks gestation after a second hemorrhage from a complete placenta previa. The client delivers a stillborn infant 1 week later. Which intervention should the nurse perform to help this family in the grieving process?
A) Refrain from talking about the baby.
B) Remove all baby supplies from the mother's room.
C) Facilitate and support the family viewing and holding the infant.
D) Ask to have the mother moved off the postpartum floor.

Question 1779
The nurse is assessing an African-American client. The client is diagnosed with metabolic acidosis secondary to renal failure. Which nursing actions are culturally appropriate for this client? Select all that apply.
A) Telling the client that ethnic foods must be avoided
B) Assessing dietary intake of sodium
C) Assessing dietary intake of potassium
D) Planning care based on the noncompliance that is often associated with this ethnic group
E) Monitoring for cardiac dysrhythmias

Question 1780

The nurse is concerned that a client whose spouse died 2 years ago is experiencing complicated grief. Which should the nurse consider when planning care for the client? Select all that apply.
A) Substance abuse assessment
B) Monitoring for suicidal behavior
C) Psychotherapy
D) Referral for home care
E) Alcohol abuse assessment

Question 1781

The nurse is evaluating outcome goals written by a student for a client diagnosed with alcoholism who is being discharged from a detoxification program. Which outcomes are appropriate for this client? Select all that apply.
A) Follow a 2000-calorie high-carbohydrate diet.
B) Enroll in the Employee Assistance Program (EAP) through his employer.
C) Sponsor a participant in Alcoholics Anonymous (AA) meetings.
D) Acknowledge the blame that family members must take for codependent behavior.
E) Obtain at least 6-8 hours of sleep per night.

Question 1782

A nurse is caring for a client with congestive heart failure. The healthcare provider prescribes propranolol (Inderal) for the client. Which instruction should the nurse include when administering a beta-adrenergic like propranolol (Inderal) to the client?
A) "This medication causes constipation. You should take a laxative every day."
B) "It is important to notify the healthcare provider if you experience urinary retention."
C) "This medication must be taken on an empty stomach."
D) "You will need to discontinue the medication when your symptoms subside."

Question 1783

The nurse is prioritizing care activities that are to be completed for a group of clients. From highest to lowest priority, list the order in which the nurse should complete the listed activities.
A) Measure blood pressure before administering antihypertensive medication.
B) Request dietary consult for gluten-free diet.
C) Remove an intravenous access device infusing chemotherapy.
D) Change a dressing on an arm wound.
E) Call a family member to bring in shoes.
F) Ambulate to the bathroom using a walker.

Question 1784

A client asks the nurse if the staff members make many mistakes because there are so many posters and signs about safety on the walls. Which response by the nurse is most appropriate?
A) "National safety goals focus on the individual making the error."
B) "We want the public to know we are trying to be safe."
C) "National safety goals seek prevention of injury."
D) "Clinic staff members require frequent reminders about client safety."

Question 1785

The nurse caring for a Muslim client is developing the plan of care. Which intervention would the nurse anticipate to be a priority for this client?
A) The client will be able to participate in observing Sabbath.
B) The client will be able to participate in daily prayer with a rosary.
C) The client will be able to participate in prayer at specific times without interruption.
D) The client will be able to participate in daily meditation.

**Question 1786**

The nurse is caring for the client experiencing hypovolemic shock and metabolic acidosis. Which therapies would the nurse question if planned for this client? Select all that apply.
A) Keep the bed in the locked and low position.
B) Monitor ECG for conduction problems.
C) Limit the intake of fluids.
D) Administer sodium bicarbonate.
E) Monitor weight on admission and discharge.

**Question 1787**

During an assessment, the nurse becomes concerned that an older adult client is at risk for dehydration. Which did the nurse assess to come to this conclusion?
A) Ingests 2 glasses of water each day.
B) Blood pressure 140/98 mmHg
C) Poor skin turgor
D) Body mass index 20.5

**Question 1788**

The nurse is beginning crisis counseling with a client. What actions will the nurse utilize when counseling the client? Select all that apply.
A) Conduct follow-up assessments.
B) Assess physiologic status.
C) Boil down the problem.
D) Assist in coping with the problem.
E) Achieve contact.

**Question 1789**

A group of nurses are in a staff meeting on a medical-surgical unit headed by the new unit nurse manager. The manager announces that nurses should not criticize and make fun of other nurses or there will be repercussions. Several nurses at the meeting suggest that the nurse manager talk to the individual nurses who are exhibiting this behavior. When assessing the staff's group dynamics, which action by the nurse manager is appropriate?
A) Discipline the staff nurses who spoke out.
B) Insist that this is an appropriate new policy.
C) Recognize that the group has already defined behavioral norms.
D) Request a transfer to another unit.

**Question 1790**

The nurse is admitting a child who has had diarrhea for 1 week. Which goal is appropriate for this client when writing the plan of care?
A) The client will defecate regularly by discharge.
B) The client will regain normal stool consistency by discharge.
C) The client will limit fluid intake for 3 days.
D) The client will increase the amount of sugar in the diet.

**Question 1791**

An older adult client is admitted to the medical-surgical unit for a hip fracture. During postoperative recovery, the nurse notices a stage I pressure ulcer forming on the client's sacrum. Which action by the nurse is appropriate to reduce the progression of this ulceration?
A) Maintain the head of the bed at 45° angle.
B) Apply a heat lamp to the area to increase circulation.
C) Apply a dry dressing to the pressure ulcer.
D) Maintain the head of the bed at 30° angle, with client positioned on the right or left side.
Question 1792
The nurse is caring for an African-American client with nephritis. For which long-term complication should the nurse include interventions to prevent when planning this client’s care?
A) Diabetes mellitus  
B) Hypertension  
C) End-stage renal disease  
D) Congestive heart failure  

Question 1793
The clinic nurse is caring for an infant during a routine wellness exam. The parents and infant are of an African ethnic origin and immigrated to America 6 months ago. The mother explains that she believes that an herbal remedy, prepared by the village doctor, is the best way to treat the infant's colic. Which action by the nurse is appropriate?
A) Ask the mother what the ingredients are in the remedy.  
B) Tell the mother not to use the remedy because there is no way to know what the ingredients' scientific effect may be.  
C) Explain how herbal ingredients may be harmful to the infant.  
D) Give the mother an alternate remedy for colic.  

Question 1794
After being diagnosed with cataracts, a client believes the right eye has a cataract but not the left eye, as there are no vision changes with the left eye. Which response by the nurse is appropriate?
A) “Cataracts develop at different rates, so one eye will be more affected than the other.”  
B) “Your doctor must have made an error.”  
C) “Don’t worry about it until you can’t see out of your left eye.”  
D) “Only your doctor can tell if you have a cataract in your left eye.”  

Question 1795
A client, who was raped and refuses to see any male healthcare providers, tells the nurse that she had an "incident" that she does not want to talk about, and wants a bed by the door. Which nursing diagnosis is appropriate for the client?
A) Acute Confusion  
B) Readiness for Enhanced Power  
C) Rape-Trauma Syndrome  
D) Relocation Stress Syndrome  

Question 1796
The nurse instructs a group of community members about ways to reduce the development of cancer. Which participant statements indicate that teaching has been effective? Select all that apply.
A) “I need to cut down on my smoking.”  
B) “I need to keep my children away from smokers.”  
C) “Sunscreen should be applied before spending time outdoors.”  
D) “I need to get my home tested for radon.”  
E) “I should eat at least 2 servings of fruits or vegetables each day.”  

Question 1797
A nurse manager who is employed by a community hospital is asked to implement critical pathways on the medical-surgical unit. When educating the staff nurses about critical pathways, which primary reason for their use with the nurse manager include in the teaching session?
A) “Critical pathways track care provided to clients with certain medical conditions.”  
B) “Critical pathways direct care provided to clients with certain medical conditions.”  
C) “Critical pathways are used to evaluate care provided to clients with certain medical conditions.”  
D) “Critical pathways direct, track, and evaluate care provided to clients with certain medical conditions.”  
Question 1798
The nurse is caring for a client from another culture. The client tells the nurse that he is constipated. What is the nurse's initial action?
A) Obtain an order for a laxative and an enema from the physician.
B) Assess the client's intake of fiber and fluids.
C) Determine what the client means by constipation.
D) Encourage the client to increase fluid intake and activity.

Question 1799
A home health nurse is precepting a new nurse during a routine wound care visit. The new nurse is assessing the client's wound and notes that the wound is showing signs and symptoms of infection. The client's spouse asks the new nurse how the wound looks. The new nurse responds by stating, "It looks fine," but the new nurse's face indicates a different story. When evaluating the new nurse, the preceptor should note that work is needed on which aspect of communication?
A) Clarity and brevity
B) Credibility
C) Timing and relevance
D) Adaptability

Question 1800
A rape victim is being seen in the clinic. Upon assessment it is discovered the client has contracted trichomoniasis. Which prescription does the nurse anticipate for this client?
A) Penicillin
B) Metronidazole
C) Ceftriaxone and azithromycin
D) Doxycycline

Question 1801
A school-age client is admitted with dog bites and scratches obtained when throwing rocks at a neighbor's dog. Which action by the nurse is most appropriate?
A) Tell the client that he might go to jail for hurting the dog.
B) Suggest to the client that it is not okay to harm animals.
C) Ask the client where his parents were when he was hurting the dog.
D) Ask the client what he intended to accomplish by hurting the dog.

Question 1802
A nurse is caring for a client who just found out she has had a miscarriage. The nurse understands that the client will likely grieve over the loss. Which statement is true regarding perinatal loss grieving?
A) Perinatal loss refers only to emotional changes that occur after perinatal loss.
B) Postpartum depression may occur in women who have experienced perinatal loss.
C) Grief is typically less severe when the perinatal loss occurs before 20 weeks' gestation.
D) The grief experienced by fathers after perinatal loss appears similarly to the grief experienced by mothers after perinatal loss.

Question 1803
The client is experiencing urinary urgency and frequency. Which medication should the nurse anticipate may be prescribed by the healthcare provider?
A) Bethanechol chloride
B) Furosemide
C) Oxybutynin
D) Bumetanide

Question 1804
A pregnant woman, who admits to intravenous drug use, had a negative human immunodeficiency virus (HIV) screening test just after missing her first menstrual period. Which assessment data would indicate the client needs to be retested for HIV?

A) Unusual fatigue and oral thrush  
B) Shortness of breath and frequent urination  
C) Hemoglobin of 11 g/dL and a rapid weight gain  
D) Elevated blood pressure and ankle edema


**Question 1805**

A nurse is caring for a client who is diagnosed with skin cancer. Which nursing interventions will reduce the growth of cancer cells and support normal cell function? Select all that apply.

A) Encouraging mobility and exercise  
B) Increasing calorie intake  
C) Assessing normal functioning of organ systems  
D) Reducing oxygen supply to retard growth of cancer cells  
E) Encouraging increased rest and sleep


**Question 1806**

A client who says she is “about 6 weeks pregnant” hears the baby’s heartbeat for the first time through a Doppler. Based on this data, which conclusion by the nurse is the most appropriate?

A) The mother is at 4 to 8 weeks’ gestation.  
B) The mother is at 20 weeks’ gestation.  
C) The mother is at 8 to 12 weeks’ gestation.  
D) The mother is at 16 weeks’ gestation.


**Question 1807**

A client diagnosed with a pulmonary embolism has a reduction in arterial oxygen saturation level and dyspnea. Which is the priority nursing diagnosis for this client?

A) Anxiety  
B) Impaired Gas Exchange  
C) Impaired Physical Mobility  
D) Ineffective Tissue Perfusion


**Question 1808**

During a performance appraisal, a unit manager praises a staff nurse on the ability to use presencing when caring for terminally ill clients. What did the nurse demonstrate that would exemplify this caring behavior? Select all that apply.

A) Sitting quietly with clients  
B) Taking the time to hold a client’s hand  
C) Face-to-face discussions with clients  
D) Guaranteeing quality and safety in care  
E) Instructing clients on how they should perform certain functions


**Question 1809**

The nurse is finalizing a plan of care for a school-age client newly diagnosed with type 1 diabetes mellitus. On which areas should the plan focus to achieve the maximum outcomes for this client? Select all that apply.

A) Ways to minimize the number of school days missed  
B) Signs and symptoms of hypoglycemia and actions to take  
C) Physical activities that limit exposure to injuries  
D) Self-management of glucose monitoring and medications  
E) Identification and referral to community resources


**Question 1810**

The nurse is caring for a victim of rape. Which interventions should the nurse include in the client’s plan of care? Select all that apply.
Question 1811

The nurse is providing care to a client who is diagnosed with mild benign prostatic hyperplasia (BPH) who is experiencing urinary retention. Which goal is the most appropriate for this client?
A) The client will use a T-binder or scrotal support properly.
B) The client will increase fluid intake to at least 2-3 liters daily.
C) The client will voice an understanding of the importance of the use of antiembolic stockings and compression devices.
D) The client lists over-the-counter medications to be avoided.

Question 1812

An older adult client receiving medication for hypertension had a recent fall at home. Which intervention should the nurse include in this client's plan of care?
A) Monitor serum sodium levels.
B) Assess postural blood pressures.
C) Monitor blood pressure every 2 hours.
D) Monitor serum creatinine levels.

Question 1813

The nurse educator is conducting a class for staff nurses on the importance of uniform language within health care documentation. Which statement regarding uniform language made by one of the staff nurses would indicate the need for further instruction?
A) "Uniform language refers to use of a standardized language across multiple disciplines."
B) "Continuity of care improves for the client when standardized terminology is used."
C) "The Do Not Use abbreviation list is one example of uniform language."
D) "The use of uniform language within the electronic health record only provides benefits to the profession of nursing and the health organization."

Question 1814

The nurse is preparing to assess an older adult client admitted with tuberculosis. Which manifestations does the nurse anticipate for this client?
A) Swollen lymph nodes
B) Night sweats
C) Cough
D) Hemoptysis

Question 1815

A non-English-speaking school-age client is hospitalized with encephalitis and is experiencing delirium. Which intervention promotes a therapeutic environment for this child and family?
A) Making sure the child comes back for the follow-up appointment
B) Providing written instructions before discharge
C) Making sure the parents can set up the treatments for their child
D) Encouraging the family to remain at the bedside with the client

Question 1816

A client is admitted to the unit with chronic obstructive pulmonary disease. Blood gas analysis indicates respiratory acidosis. Based on this data, the nurse plans care based on which priority diagnosis?
A) Impaired Mobility
B) Anxiety
C) Impaired Gas Exchange
D) Ineffective Airway Clearance
Question 1817

A child who is hospitalized with acute glomerulonephritis experiences blurred vision and headache while in the playroom. Which action by the nurse is the most appropriate?
A) Reassure the child and encourage bed rest until the headache improves.
B) Obtain serum electrolytes and send a urinalysis to the lab.
C) Obtain the child's blood pressure and notify the physician.
D) Check the urine to see if hematuria has increased.

Question 1818

The nurse is analyzing the intake and output record for a client being treated for dehydration. The client weighs 176 lbs. and had a 24-hour intake of 2,000 mL and urine output of 1,200 mL. Based on this data, which conclusion by the nurse is the most appropriate?
A) Treatment has not been effective.
B) Treatment needs to include a diuretic.
C) Treatment is effective and should continue.
D) Treatment has been effective and should end.

Question 1819

The nurse notices that a client, who is from another country, appears uncomfortable when the nurse asks to look at the client's abdominal incision from a recent surgery. Which nursing action is the most culturally competent?
A) Wait until the next assessment time to observe the incision.
B) Ask the client to explain why she is uncomfortable.
C) Explain the reason for the intervention using lay terms.
D) Close the client's curtain to maintain privacy.

Question 1820

The nurse instructs a client recovering from a mastectomy on ways to prevent lymphedema. Which client statement indicates that teaching has been successful?
A) "I should avoid cleansing my skin with soap."
B) "I should do the exercises on my affected arm every day."
C) "Eating fresh fruits and vegetables will prevent my arm from swelling."
D) "I have to take no special precautions."

Question 1821

The nurse is providing discharge teaching for a client diagnosed with a urinary tract infection (UTI). The client is prescribed a 3-day course of oral trimethoprim-sulfamethoxazole (TMP-SMZ). Which client statement indicates that teaching has been effective?
A) "I will return within 10 days for a follow-up urine culture."
B) "I will practice Kegel exercises on daily basis."
C) "I will only wear 100% cotton underwear."
D) "I will increase my intake of fluids, especially citrus juice."

Question 1822

A client with disseminated intravascular coagulation (DIC) is experiencing joint pain. Which nursing intervention is appropriate for this client?
A) Heat
B) Ice
C) Cool compresses
D) Splints

Question 1823

The nurse is evaluating care provided to a client recovering from surgery for colorectal cancer. Which outcomes indicate that care has been
successful? Select all that apply.
A) Client has an hourly urine output of 45 mL.
B) Client performs morning care with assistance.
C) Client states family members will care for the ostomy at home.
D) Client tolerates full liquid diet and is requesting solid food.
E) Client reports pain level as an 8 on a rating scale of 0-10.

Question 1824

The nurse is providing care to a pediatric client diagnosed with celiac disease. Which outcomes can be anticipated when the appropriate steps for managing celiac disease have been implemented? Select all that apply.
A) The client is able to maintain adequate nutritional status.
B) The client is free of abdominal discomfort including bloating, gas, indigestion, nausea, and vomiting.
C) The client is able to maintain normal or routine bowel habits.
D) The client has diarrhea fewer than 3 days weekly.
E) The client is able to make appropriate menu choices prior to discharge.

Question 1825

A client experiencing situational depression over the loss of a spouse is overwhelmed with having to close the spouse's business, settle finances, and figure out a way to survive financially. Which actions by the nurse are appropriate when assisting this client? Select all that apply.
A) Help the client prioritize things that need to be accomplished.
B) Investigate whether the spouse had life insurance and what income the client can expect.
C) Suggest that the client attend group therapy with a grief counselor.
D) Ask if the client can move in with parents.
E) Help the client focus on strengths.

Question 1826

A client with liver disease presents to the hospital with severe ascites. When providing care for this client, which pathophysiologic principles regarding this diagnosis will the nurse take into account? Select all that apply.
A) Presence of portal hypertension
B) Increased colloidal osmotic pressure
C) Presence of hyperalbuminemia
D) Sodium and water retention
E) Presence of hypoaldosteronism

Question 1827

The nurse manager is meeting with the director of human resources to review information about current clinical staff. How does the clinical decision support system support human resource functions?
A) Recognizing staff who are not discharging clients according to identified lengths of stay
B) Evaluating the number of staff with licensure due to expire
C) Determining if staff are correctly coding client care procedures
D) Identifying staff who are incorrectly charging for resources used for client care

Question 1828

The nurse is conducting a health history during the nursing assessment. The client states to the nurse, "I am allergic to penicillin." Which assessment question is most appropriate to learn more about the client's allergy?
A) "How long did your symptoms last?"
B) "Do any other family members have this same allergy?"
C) "Where did you experience the reaction?"
D) "What type of reaction occurred?"

Question 1829

The x-ray of a client 14 weeks post-ulnar fracture exhibits no callus formation. Based on this data, which action does the nurse anticipate?
A) The nurse will counsel the client on starting range-of-motion exercise.
B) The surgeon will order electromagnetic stimulation.
C) The physical therapist will set up Buck traction.
D) The pharmacist will educate the client on antibiotics.

Question 1830

A client agrees to receive long-term hemodialysis to treat acute renal failure. For which surgical procedure should the nurse instruct this client?
A) Insertion of a subarachnoid-peritoneal shunt
B) Placement of a peritoneal catheter
C) Placement of an arteriovenous fistula
D) Insertion of a double-lumen catheter into the subclavian artery


Question 1831

A client with peripheral neuropathy complains of leg aches and the inability to be comfortable. Which nursing diagnosis would be a priority for the client at this time?
A) Disturbed Sensory Perception
B) Pain
C) Ineffective Coping
D) Anxiety


Question 1832

The nurse is conducting an assessment for an older adult client who experienced a myocardial infarction (MI) a few months ago. The client states, "I just don't feel like doing much. I feel ok physically but I just don't want to be around anyone." Based on this data, which tool should the nurse use to further assess the client?
A) Get-up-and-Go test
B) Geriatric Depression Scale
C) Barthel Index of Activities of Daily Living
D) Short Portable Mental Status tool


Question 1833

The nurse is observing a family counseling session that is focusing on the family members' communication patterns. Which observation indicates that there are existing or potential problems with family communication?
A) All members are participating in the discussion equally.
B) The verbal communication is congruent with the nonverbal messages.
C) Disagreements are ignored by the family leader.
D) A few of the members just sit and listen.


Question 1834

An older adult client recognizes the need for help with personal care at home yet does not want to move to a nursing home or assisted living facility. Which action by the nurse may assist this client?
A) Discuss with the physician and determine that the client is unable to make decisions and must be admitted to a nursing home immediately.
B) Recommend a personal care assistant to help with activities of daily living and self-care.
C) Remind the client that physical strength will grow weaker at home until a nursing home is required.
D) Suggest the client move in with adult children.


Question 1835

A client in the clinic asks the nurse about a medication seen on television. When the nurse suggests a generic, cheaper version of the medication, the client is resistant to this recommendation. When planning care for this client, which is true regarding the healthcare treatment choices of consumers?
A) Inappropriate healthcare treatment choices by consumers have contributed to increases in healthcare costs.
B) Better treatments leading to an increase in medical expenses for more research have contributed to increases in healthcare costs.
C) Decreased longevity due to an increase in chronic diseases has contributed to increases in healthcare costs.
D) The continued lack of accurate diagnoses by the primary medical team has contributed to increases in healthcare costs.
Question 1836

A client's spouse reports the presence of a reddened area on the client's coccyx and wants to massage the area. Which response by the nurse is appropriate?

A) "Massaging the area twice daily will help restore circulation and should be incorporated into the plan of care."
B) "I will need to obtain an order from the healthcare provider to perform a massage."
C) "Massaging the area may actually cause more harm to a potentially compromised area of skin."
D) "I will record these findings in the medical record."


Question 1837

During an evaluation for infertility, a male client is asked to provide a sperm sample. What information from the client's health history could impact the client's sperm? Select all that apply.

A) Use of over-the-counter analgesics
B) Number of siblings
C) Smoking
D) Mumps after adolescence
E) Activity level


Question 1838

The client's case manager, diabetes educator, and nutritionist meet to discuss the client's needs in preparation for discharge to home. The client's primary healthcare provider arrives and states, "I will be making all decisions regarding the client's discharge care." With the primary healthcare provider's decision to lead the team, the dynamic has shifted between which two types of teams?

A) Intradisciplinary to interdisciplinary team
B) Multidisciplinary to intradisciplinary team
C) Interprofessional to interdisciplinary team
D) Interdisciplinary to multidisciplinary team


Question 1839

An older adult client is admitted to the hospital after a fall. The client appears intermittently confused. Based on age and current data, which is the client at an increased risk for developing?

A) Dehydration
B) Kidney damage
C) Stroke
D) Bleeding


Question 1840

A client admitted 3 days prior with an injury to the thoracic area of the spinal cord tells the nurse, "I'm getting worse. It's harder to breathe." Based on this data, which does the nurse suspect?

A) The client is developing pneumonia.
B) The extent of injury cannot yet be determined.
C) The client has atelectasis.
D) The client is improving.


Question 1841

A young adult male client comes to the clinic with complaints of not being able to study effectively. The nurse plans the care based on a nursing diagnosis of Fatigue. Which client statement validates this nursing diagnosis?

A) "I sleep for 9 hours a night."
B) "I work out in the gym two days a week."
C) "I have hay fever."
D) "I drink one beer when I go out with friends."

Question 1842

A client with sepsis has a temperature of 40°Celsius. Which potentially life-threatening dysrhythmia is most likely to occur in this client?
A) Wolff-Parkinson-White dysrhythmia
B) Long QT dysrhythmia
C) Tachyarrhythmia
D) Bradyarrhythmia

Question 1843

A client with liver cirrhosis begins to drain bright red blood through the nasogastric tube. Which should the nurse prepare to administer to this client?
A) Platelets
B) Vitamin K
C) Ferrous sulfate
D) Folic acid

Question 1844

The nurse manager is planning to implement the Lean Six Sigma system on the nursing unit to improve the quality of care. Which should the manager implement when following this model?
A) Replacing a licensed staff member with unlicensed assistive personnel
B) Decreasing staff when the census is low
C) Ordering more supplies than needed on the unit to ensure they never run out
D) Shortening break time

Question 1845

A nursing instructor is evaluating a nursing student's knowledge regarding a client with suicidal thoughts. Which statement made by the student demonstrates an understanding regarding assessing a client with suicidal thoughts?
A) "I should not talk about suicide directly."
B) "I should attempt to make light of the circumstances."
C) "I should be indirect and respectful."
D) "I should directly acknowledge the situation."

Question 1846

The nurse is providing care for a child diagnosed with renal failure who is experiencing hyperkalemia. When planning meals for this child, which choice would be most appropriate for this client?
A) Spaghetti and meat sauce, breadsticks
B) Cold cuts with bun with fresh pears
C) Hamburger on a bun, banana
D) Carrots and green, leafy vegetables

Question 1847

The family members of a recently deceased client wrote a letter to the unit manager, expressing their appreciation for the way the client was treated while dying in the hospital. The family mentioned characteristics that indicate the nurses were caring. What behaviors did the family most likely use to explain the caring actions of the nurses? Select all that apply.
A) Maintained client confidentiality
B) Respected the client
C) Established limits with the client
D) Treated the client as a human being
E) Delivered care with style

Question 1848

The nurse is caring for a client prescribed baclofen (Lioresal) for cerebral palsy (CP). The client's parents speak very little English and the nurse plans
to use an interpreter to teach the parents about the medication. Which instructions should the nurse emphasize during client teaching?
A) "You will need to increase your child's intake of fiber while on this medication."
B) "Do not give your child any aspirin-type drugs while on this medication."
C) "It is important that your child take the medication as prescribed. Do not stop the medication abruptly."
D) "It is important for your child to take the medication on an empty stomach."

Question 1849
The nurse is evaluating a client's understanding of dietary needs to treat dietary deficiency anemia. Which client statement indicates a need for additional teaching?
A) "I will need to include more protein foods in my diet such as meats, dried beans, and whole-grain breads."
B) "I will take vitamins with extra iron in addition to eating a balanced diet with meat to correct my anemia."
C) "I will eat more fruits and vegetables, especially green leafy ones, to get more iron in my diet."
D) "I will decrease foods high in vitamin C, as they decrease my absorption of iron."

Question 1850
The nurse is preparing to assess a 1-year-old client for signs of discomfort. When conducting the assessment, which action by the nurse is the most appropriate?
A) Reading a book to the client during the assessment process
B) Recommending that the parent leave the room during the assessment process
C) Asking the client to rate the pain on a scale of 0-10 during the assessment process
D) Asking the parent to hold the client in the lap during the assessment process

Question 1851
The nurse is creating a plan of care for the family of a client with a terminal illness. Which aspects of this family's care should the nurse emphasize when creating this plan? Select all that apply.
A) Guiding to determine realistic goals
B) Instructing on medication administration
C) Focusing on the client's health needs as a priority
D) Identifying strategies to enhance family functioning
E) Suggesting that cultural practices be minimized at this time

Question 1852
A nurse is caring for an older adult who displays symptoms of cognitive decline. Which is true regarding the aging process and cognition? Select all that apply.
A) Generally, older adults' short-term memory changes significantly.
B) The ability to engage in abstract thought declines slightly.
C) The ability to use and understand word combinations declines steadily with age.
D) Generally, many older adults have increased difficulty finding and rapidly listing words.
E) The ability to acquire practical information declines steadily with age.

Question 1853
The nurse educator is teaching a group of nursing students about the methods that are used by insurance companies to ration healthcare resources. Which method does the educator include in the teaching session regarding this topic?
A) Denying coverage for services not supported by research
B) Increasing healthcare costs through organ donation
C) Covering clients for preexisting conditions only
D) Providing self-care allowances for covered individuals

Question 1854
A client who is recovering from coronary bypass surgery is placed on a critical pathway for extended care. Which client statement indicates appropriate understanding of the plan of care?
A) "I must be able to meet goals that are set for me."
**Question 1855**

A client is admitted to the emergency department for vomiting and diarrhea that has lasted 4 days. The client's current weight is 154 pounds. The health care provider has diagnosed the client with a viral infection. The nurse has been monitoring intravenous fluids and urine output. Which urinary output indicates the efforts to rehydrate this client have been successful?

<table>
<thead>
<tr>
<th>Option</th>
<th>Output (mL per hour)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A)</td>
<td>40</td>
</tr>
<tr>
<td>B)</td>
<td>30</td>
</tr>
<tr>
<td>C)</td>
<td>25</td>
</tr>
<tr>
<td>D)</td>
<td>20</td>
</tr>
</tbody>
</table>


**Question 1856**

A nurse is caring for a client with heart failure secondary to an acute non-cardiac condition. Which condition would be excluded from the client's cause of heart failure?

<table>
<thead>
<tr>
<th>Option</th>
<th>Condition</th>
</tr>
</thead>
<tbody>
<tr>
<td>A)</td>
<td>Hyperthyroidism</td>
</tr>
<tr>
<td>B)</td>
<td>Volume overload</td>
</tr>
<tr>
<td>C)</td>
<td>Massive pulmonary embolus</td>
</tr>
<tr>
<td>D)</td>
<td>Rheumatic fever</td>
</tr>
</tbody>
</table>


**Question 1857**

The nurse is preparing discharge instructions for an older adult client recovering from respiratory acidosis caused by restrictive lung disease and pneumonia. Which topics should the nurse include in the discharge teaching for this client? Select all that apply.

<table>
<thead>
<tr>
<th>Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) Engage in frequent hand washing.</td>
</tr>
<tr>
<td>B) Avoid crowds.</td>
</tr>
<tr>
<td>C) Restrict fluids.</td>
</tr>
<tr>
<td>D) Obtain annual influenza immunization.</td>
</tr>
<tr>
<td>E) Cover the nose and mouth when coughing.</td>
</tr>
</tbody>
</table>


**Question 1858**

The family members of a critically ill client tells the nurse, "We believe in the power of prayer. We will continue to pray that our loved on recovers." Based on this data, which does the nurse realize that the family is demonstrating?

<table>
<thead>
<tr>
<th>Demonstration</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) Spiritual health</td>
</tr>
<tr>
<td>B) Conflict</td>
</tr>
<tr>
<td>C) Denial</td>
</tr>
<tr>
<td>D) Good family support system</td>
</tr>
</tbody>
</table>


**Question 1859**

While preparing a client for surgery, the nurse marks the arm that is to be amputated and participates in a "time out" procedure before the surgery begins. Which sentinel event should the "time out" procedure prevent?

<table>
<thead>
<tr>
<th>Sentinel Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) The client being mildly over-sedated</td>
</tr>
<tr>
<td>B) The lack of healing of the stump</td>
</tr>
<tr>
<td>C) Ineffective control of the client's pain</td>
</tr>
<tr>
<td>D) The removal of the wrong arm</td>
</tr>
</tbody>
</table>


**Question 1860**

The nurse in an urgent care center assesses an adult client who presents with a fever of 101.2°F and complaints of painful urination. What should the nurse ask to elicit further data that indicates cystitis?

<table>
<thead>
<tr>
<th>Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) &quot;Do you have any upper abdominal pain or cramping?&quot;</td>
</tr>
<tr>
<td>B) &quot;Do you have any symptoms of menopause?&quot;</td>
</tr>
<tr>
<td>C) &quot;What color is your urine?&quot;</td>
</tr>
</tbody>
</table>
D) "How long have you had a fever, and have you had chills with this?"

Question 1861
A home health care nurse is providing care to an older adult client who lives alone and has limited financial resources. The client has a history of celiac disease. When planning care for this client, which nursing diagnoses are appropriate? Select all that apply.
A) Risk for Diarrhea
B) Risk for Nutrition, Imbalance: less than body requirements
C) Risk for Constipation
D) Risk for Pain
E) Risk for Fluid Volume Imbalance

Question 1862
The nurse is admitting a client to the medical unit who was brought to the emergency department by a neighbor. The client states, "I ran out of my medication last week. I don't have any family or close friends to help me." Upon assessment, the nurse notes the following findings: oxygen saturation of 93% on room air, breath sounds reveal crackles bilateral bases, P 110 bpm, R 22 breaths per min, BP 110/60 mmHg. Which is the priority psychosocial nursing diagnosis for this client?
A) Impaired Gas Exchange
B) Interrupted Family Process
C) Noncompliance
D) Social Isolation

Question 1863
A nurse is caring for a school-age client who is scheduled to have a tonsillectomy the next day. The nurse has planned a preoperative teaching session for the child, who has a history of attention-deficit/hyperactivity disorder (ADHD). Which teaching technique is most appropriate for this client?
A) Give instructions verbally and use a picture pamphlet, repeating points more than once.
B) Ask other children who have had this procedure to talk to the child.
C) Allow the child to lead the session to gain a sense of control.
D) Play a television show in the background.

Question 1864
A client with primary hypertension is prescribed terazosin (Hytrin) to treat this condition. When teaching the client about how this drug works to decrease blood pressure, which mechanism of action provides the rationale for the use of the medication?
A) Prevents conversion of angiotensin I to angiotensin II.
B) Inhibits the flow of calcium ions across the cell membrane of vascular tissue and cardiac cells.
C) Blocks alpha-receptors in the vascular smooth muscle.
D) Prevents beta-receptor stimulation in the heart.

Question 1865
The nurse is caring for a client who is hospitalized with pneumonia. Which will the nurse assess when determining the impact of the illness on the family? Select all that apply.
A) The financial impact of the illness
B) The meaning of the illness to the family
C) The cause of the illness
D) The duration of the illness
E) The effect of the illness on future family functioning

Question 1866
A newly hired nurse manager believes in the theory of shared governance and directs the unit using that style. Which skills are essential in order for the nurse manager to be an effective nurse leader using this theory? Select all that apply.
A) Being political
B) Empowering others
C) Receiving feedback
Question 1867
An older adult client admitted with pneumonia has a normal body temperature. Which reason for this inconsistency in body temperature will the nurse plan for when providing care to this client?
A) The room is cold.
B) The client is losing body heat.
C) The client does not have pneumonia.
D) The temperature is not a valid indicator of the pathology of the illness.

Question 1868
Which are appropriate responses by the nurse when providing care for a client who is experiencing a situational crisis? Select all that apply.
A) "It could have been worse."
B) "Things will get better and you will feel better."
C) "I know just how you feel."
D) "I am sorry this happened to you."
E) "It's best to stay busy."

Question 1869
The nurse is preparing a seminar for community members on actions to protect sensory functioning when aging. What should the nurse recommend regarding hearing tests for older adults?
A) Schedule an annual hearing test until the age of 50 and then have a test every 6 months.
B) Have a hearing test every 10 years until age 50 and then every 3 years.
C) A hearing test should be done biannually after the age of 60.
D) A hearing test is needed when changing medications.

Question 1870
The nurse manager for a medical-surgical nursing unit is talking to a group of nursing students. The nurse manager is explaining the types of nursing research studies that are conducted on the unit. Which statement by the students indicates understanding about the nature of nursing research?
A) "Nursing research impacts nursing by adding knowledge and changing nursing practice."
B) "Nursing research does not include the study of nurses themselves."
C) "Nursing research is used to enhance medical treatment."
D) "Nursing research does not include nursing education."

Question 1871
The nurse observes a school-age client have an absence seizure. When documenting the seizure in the medical record, which is the most appropriate?
A) "Became unconscious, and all four extremities were jerking uncontrollably for 2 minutes."
B) "Pulled arms in toward the body and flexed hands over the chest. This lasted 2 minutes."
C) "Sat very still and was unresponsive with a blank stare for 2 minutes."
D) "Repeatedly moved from the chair to the bed while touching the arms for a length of 2 minutes."

Question 1872
The nurse is preparing to document care provided to the client during the day shift. The nurse documents that the client experienced an increased pain level while ambulating which required an extra dose of pain medication; took a shower; visited with family; and ate a small lunch. Which information is important to include during the oral end-of-shift reporting? Select all that apply.
A) The client's response to ambulation
B) The last antibiotics given
C) The extra dose of pain medication
D) The client's visit with family
E) The client's taking a shower
Question 1873

While teaching a class on health status, the nurse educator reviews internal variables that affect health status. Which internal variables are appropriate for the nurse to include in the class? Select all that apply.
A) Gender
B) Spiritual and religious beliefs
C) Age
D) Environment
E) Developmental level


Question 1874

The nurse identifies the diagnosis Risk for Impaired Gas Exchange to guide the care of a client with metabolic alkalosis. Which assessment data supports this nursing diagnosis? Select all that apply.
A) Urine output 25 mL/hr
B) Oxygen saturation 89%
C) Restlessness and agitation
D) Respiratory rate 8 per minute
E) Weight loss of 3 kg overnight


Question 1875

A client receiving radiation therapy as treatment for colorectal cancer is experiencing nausea and vomiting. What should the nurse encourage the client to do?
A) Avoid all food and liquid until nausea and vomiting stop.
B) Eat spicy or well-seasoned foods instead of bland foods.
C) Use a commercial mouthwash before eating a meal.
D) Delay the intake of a meal until 3-4 hours after treatment.


Question 1876

During an assessment, the nurse suspects a client is experiencing genital herpes. Which clinical manifestations cause the nurse to come to this conclusion? Select all that apply.
A) Back pain
B) Vaginal discharge
C) Fever
D) Low blood pressure
E) Headache


Question 1877

Which is the most powerful factor in encouraging adoption of the attitudes and behaviors that characterize professionalism in nursing?
A) Licensure requirements
B) Interaction with peers
C) Specialized training
D) Employment opportunities


Question 1878

A client begins to hyperventilate after learning that a breast biopsy was positive for cancer. After a few minutes, the client loses consciousness. Which action by the nurse is the priority?
A) Raise the side rails on the bed.
B) Begin cardiopulmonary resuscitation.
C) Notify the physician.
D) Insert an intravenous access device.

Question 1879

The nurse is providing care to a pediatric client who is HIV-positive. The client's mother is describing the child's current condition and activities to the nurse. Which statements by the mother indicate that the child is currently exhibiting positive outcomes related to the diagnosis? Select all that apply.
A) "My child hasn't shown any sign of infection."
B) "We attend a weekly support group for kids with HIV."
C) "My child has a good appetite and eats regular meals."
D) "My child seems somewhat isolated and doesn't have any real friends."
E) "My child attends school and doing well in class."

Question 1880

The nurse is administering albumin 5% to a client in shock. Which nursing action is appropriate when assessing this client?
A) Auscultate breath sounds for hyperresonance.
B) Auscultate breath sounds for crackles.
C) Auscultate for an absence of breath sounds in the lower lobes.
D) Auscultate breath sounds for inspiratory stridor.

Question 1881

The nurse is planning care for a client admitted with a stroke. Which intervention would support the client's sensorimotor needs?
A) Provide complete care.
B) Encourage use of non-affected arm to feed self, bathe, and dress.
C) Talk loudly and distinctly.
D) Speak in normal conversational pattern and tones.

Question 1882

The nurse completes a teaching session on wound care for a client who will require dressing changes after discharge. The nurse evaluates the effectiveness of a teaching session for wound care with the family and determines that more education is required. Which statement by the nurse is appropriate in this situation?
A) "I do not think you understood me correctly the first time."
B) "Here, let me do it for you."
C) "Let me clarify again some of the steps that are required during wound care."
D) "You did not pay attention, did you?"

Question 1883

A nurse working in labor and delivery is assessing a client's risk for developing postpartum depression. Which is a risk factor for this disorder?
A) History of bipolar disorder
B) History of anxiety disorder
C) Overwhelming family support
D) Multiparity (multiple pregnancies)

Question 1884

The nurse manager is evaluating a staff nurse's knowledge, skills, and attitudes when addressing safety issues with client care. What observations indicate the nurse is skilled when addressing safety concerns? Select all that apply.
A) Participates in root cause analysis when appropriate
B) Documents care immediately after providing it
C) Devises methods that enhance teamwork
D) Recognizes deficiencies between current and best practice
E) Participates in conflict resolution

Question 1885

A client is complaining of dull flank pain. List the order of the steps the nurse should take in conducting the physical assessment for this client.
1. Instruct the client.
2. Assess the general appearance.
3. Position the client.
4. Inspect the abdomen for color, contour, symmetry, and distention.


**Question 1886**

An adolescent client is admitted to the hospital for the treatment of schizophrenia. The client's mother is confused and wants to know what she did to cause this to occur. Which responses by the nurse are appropriate? Select all that apply.

A) "Research indicates that schizophrenia is a genetic disorder."
B) "Schizophrenia is a biological brain disorder."
C) "Schizophrenia is linked to drinking alcohol during pregnancy."
D) "Schizophrenia is due to too much dopamine in certain parts of the brain."
E) "Research indicates that a very stressful environment causes schizophrenia."


**Question 1887**

A client with preeclampsia begins to seize. Which intervention by the nurse is most likely to protect the client and fetus from injury?

A) Place the client on the left side and protect the airway.
B) Elevate the head of the bed.
C) Elevate the client's legs.
D) Place the client in the supine position.


**Question 1888**

The nurse is planning care for a client scheduled for a prostatectomy. The client's spouse wants to know if the client will have any limitations after the surgery. Which diagnoses should the nurse use to plan this client's care? Select all that apply.

A) Sexual Dysfunction
B) Risk for Falls
C) Pain
D) Impaired Urinary Elimination
E) Constipation


**Question 1889**

Which nursing action is most appropriate when communicating with a client who has a hearing deficit?

A) Using shorter phrases, which tend to be easier to understand than longer ones
B) Varying the volume of voice, which is easier to understand than one consistent volume
C) Writing ideas or pantomiming as appropriate in order for the client to understand
D) Overarticulating words in order for the client to understand


**Question 1890**

A nurse is caring for a pediatric client who is receiving an infusion of intravenous antibiotic at the ambulatory clinic. Which clinical manifestation indicates that the client is experiencing a type I hypersensitivity reaction?

A) Fever
B) Erythema
C) Hypotension
D) Joint pain


**Question 1891**

Several nurses are discussing the Joint Commission's 2013 National Patient Safety Goals during a staff meeting. Which goal improves the effectiveness of communication among caregivers?

A) Conduct a verification process to confirm the correct procedure.
B) Use the client's room number as an identifier.
C) Review a list of look-alike/sound-alike drugs used in the organization.
D) Transmit test results in a timely manner to the appropriate staff member.
Question 1892
The nurse is providing care to a pregnant client and her spouse. The client requires an amniocentesis. Which client statement indicates appropriate understanding of the information presented?
A) "If the test determines our baby has Down syndrome, we will not need to take childbirth classes."
B) "The test has to be done before the 14th week of pregnancy."
C) "It is not unusual for amniocentesis to misdiagnose a problem with the baby."
D) "The results of the amniocentesis will take up to 2 weeks."

Question 1893
The staff nurse educator is providing an in-service regarding the cultural and ethnic risk factors for stroke. Which statement will the nurse include in the in-service?
A) The prevalence of hypertension among Hispanics is the highest in the world.
B) African-Americans are more likely to die following a stroke than whites.
C) Hispanics have almost twice the number of first-ever strokes compared with whites.
D) African-Americans have an increased incidence of intracerebral hemorrhage.

Question 1894
A nurse is treating a client with diabetes mellitus who complains of erectile dysfunction (ED). Which hormonal cause contributes to ED?
A) Decreased aldosterone levels
B) Increased prolactin levels
C) Decreased thyroid-stimulating hormone
D) Decreased circulating catecholamines

Question 1895
The nurse is planning care for a client with conjunctivitis. Which client statement supports the nursing diagnosis of Risk for Altered Vision?
A) "My mother is blind from retinopathy."
B) "I have had this infection for 3 days."
C) "I think I caught the infection from my child."
D) "This is the fourth eye infection I have had in the last 6 months."

Question 1896
A client has been prescribed iron supplements to treat fatigue and a hemoglobin level of 9. What additional information should the nurse suggest to the client to help reduce feelings of fatigue associated with a low red blood cell count? Select all that apply.
A) Increasing intake of ice cream
B) Increasing intake of green, leafy vegetables
C) Drinking a glass of orange juice each day
D) Increasing intake of wax beans
E) Increasing intake of red meat

Question 1897
A client recovering from a hysterectomy does not want to take the prescribed estrogen replacement therapy because of the fear of developing breast cancer. Which response by the nurse is the most appropriate?
A) "The risk of breast cancer is slightly increased for women who opt to take estrogen replacement therapy."
B) "The risk of breast cancer is not increased for women who have had a hysterectomy and take estrogen replacement medications."
C) "Taking estrogen replacement is required after a hysterectomy."
D) "Perhaps you should consider an estrogen-progestin combination therapy."

Question 1898
A client in the manic phase of bipolar disorder is unable to sleep during the night. Which interventions could be helpful to this client? Select all that
apply.
A) Extend daytime naps.
B) Assist the client with a warm bath and provide a light snack.
C) Encourage the client to listen to soothing music.
D) Engage in conversation.
E) Encourage the client to watch television.

Question 1899
An older adult client prescribed eye drops as treatment for glaucoma is experiencing a change in eye color after using the medication. When the client asks why this is occurring, which response by the nurse is appropriate?
A) "This is unusual; please come in for an evaluation."
B) "This is an expected side effect of the medication."
C) "What do you mean that your eyes have changed color?"
D) "Are you sure that your eyes have changed color?"

Question 1900
A new mother is distraught because her infant has a fever of 102°F and is diagnosed with otitis media. What should the nurse instruct the mother to help the child's fever and pain?
A) Swaddle the baby in blankets.
B) Bathe the baby with cool water.
C) Feed the baby solid foods.
D) Administer acetaminophen.

Question 1901
A nurse working in the neonatal intensive care unit (NICU) is caring for a preterm infant with a congenital heart defect. When planning this infant's care, which should the nurse take into consideration regarding how this conditions are characterized?
A) By the location of defect
B) By the infant's age when defect diagnosed
C) By the severity of defect
D) By the pathophysiology and hemodynamics of defect

Question 1902
A new nurse on a unit asks to speak to the nurse manager as several clients have complained because family members were able to hear the verbal report outside the room during nursing rounds. The nurse manager asks the nurse for suggestions that could enhance client privacy. Which suggestion by the new nurse is appropriate?
A) Nursing rounds should take place in each client's room.
B) Nurses should tape-record their reports outside the room.
C) Clients should be allowed to choose whether a written or oral report is used.
D) The unit should be closed to family and visitors during rounds.

Question 1903
The nurse is evaluating care provided to a client with osteoarthritis. Which client statement indicates to the nurse that interventions for osteoarthritis have been successful?
A) "I am moving from my two-story house into the first floor of my daughter's home so I won't have to walk steps anymore."
B) "I had to take early retirement and now stay at home all day and rest my legs."
C) "I am sleeping throughout the night and have not missed any work because of knee pain."
D) "I changed my work hours so now I work part time and have a nursing assistant who helps me bathe twice a week at home."

Question 1905
A resident in an assisted-living facility is restless most nights and sits in the lounge area reading. When questioned, the resident reports suffering from insomnia. What should the nurse expect as an outcome if the resident continues with this pattern of sleep?
A) The ability to function during the day may be hindered by these episodes.
B) Onset of cardiac dysfunction
C) Onset of new undiagnosed health problems
D) Safety issues with an unsupervised resident in the lounge area

Question 1906
A nurse working in an outpatient pediatric clinic is speaking to the mother of a school-age client who has a temperature of 101°F. Which statement should the nurse include when instructing the mother on treatment of the fever?
A) "Place the child in a cold bath."
B) "If your child is shivering, it is okay to use several blankets to decrease discomfort."
C) "It is not necessary to treat the fever at this point."
D) "Administer aspirin by either chewable tablet or liquid suspension."

Question 1907
The nurse is caring for a client with a penetrating eye injury. Which action is appropriate for the nurse to include in the plan of care?
A) Stabilize the penetrating object.
B) Apply anesthetic drops.
C) Remove the foreign body.
D) Apply eye ointment.

Question 1908
A client recovering from an acute myocardial infarction is prescribed aspirin. Which teaching points should the nurse include regarding this prescription? Select all that apply.
A) Take at a different time of day than warfarin.
B) Report bleeding or bruising to the healthcare provider.
C) Do not skip any scheduled appointments to have blood drawn for labs.
D) Report any itching after seven days of taking.
E) Check with your healthcare provider before taking herbal remedies.

Question 1909
A student nurse accidentally left an older adult client's bed up after giving a bed bath. Luckily, another nurse found that the bed was not left in the lowest position and was able to rectify the matter before something happened. The student responded, "I know better. I should've double-checked the bed before I left the room." Which characteristic is this student demonstrating?
A) Compassion
B) Fidelity
C) Justice
D) Integrity

Question 1910
While caring for a client with increased intracranial pressure (IICP), a family member asks to assist. Which interventions are appropriate for the nurse to teach the family member regarding this client's care?
Select all that apply.
A) The client should be repositioned as needed.
B) The head of the bed should be elevated to 30 degrees.
C) The client should remain in a supine position.
D) The family should use slow, gentle movements when repositioning the client.
E) Patients with ICP should remain in a stationary position.

Question 1911
A client with renal failure will be discharged to home in the next few days. When conducting dietary instruction, the nurse teaches the client to choose proteins that are high in biological value. Which client statement indicates that teaching has been effective?
A) "I should include vegetables at every meal."
B) "I will eat nuts daily because they are high in protein."
C) "I will be sure to include eggs in my diet."
D) "Legumes should be included in my diet, as they are complete proteins."

Question 1912
The nurse is helping the family of an adolescent understand why their child has been diagnosed with schizophrenia. Which risk factor in the client's history supports the current diagnosis?
A) Genetic predisposition
B) Allergy to shellfish
C) Association with psychotic clients
D) Smoking

Question 1913
A new nurse to the unit is assigned a preceptor. Which skills does the preceptor usually assist the new nurse in performing? Select all that apply.
A) Clinical nursing skills
B) Routine unit activities
C) Leadership expectations
D) Feedback questionnaires
E) Policies and procedures

Question 1914
The parents of a client who committed suicide are observed arguing in the emergency department waiting area. When planning care, which nursing diagnosis is most appropriate?
A) Anxiety
B) Ineffective family coping
C) Risk for violence
D) Situational low self-esteem

Question 1915
Which clinical consideration should the nurse implement for the client in labor who has been diagnosed with preeclampsia?
A) Place the client in left lateral position when the client feels the urge to push.
B) Encourage the client to be alone in the room without family in order to maintain a quiet environment.
C) Monitor client's fetus intermittently while client is in first stage of labor.
D) Place the client in the room closest to the nurse's station, even if it is a shared room.

Question 1916
A client is experiencing an elevated temperature. What should the nurse include in this client's plan of care? Select all that apply.
A) Provide dry clothing.
B) Administer warm intravenous fluids.
C) Apply warm blankets.
D) Administer antipyretic medication.
E) Increase oral fluid intake.
Question 1917

During a clinical rotation, the nursing instructor evaluates that a student is adhering to clinical performance guidelines. Which actions did the instructor observe the student performing in order to come to this conclusion? Select all that apply.

A) Raising the side rails on the client’s bed after completing morning care  
B) Changing an intravenous access device site for the first time without supervision  
C) Observing the staff nurse irrigate a nasogastric tube because the instructor was not available to assist with placement  
D) Researching the client’s prescribed medications before administering them  
E) Reviewing the hospital’s procedure for a treatment before performing it


Question 1918

The nurse is interviewing the mother of a child who is being evaluated for attention-deficit/hyperactivity disorder (ADHD). When assessing the child’s health history, which would the nurse identify as a risk factor for ADHD? 

A) Smoking during pregnancy  
B) The measles, mumps, and rubella (MMR) vaccine  
C) The immune response of the child  
D) Young parental age at conception


Question 1919

A client receiving chlorpromazine (Thorazine) for the treatment of schizophrenia is demonstrating signs of tardive dyskinesia. Which assessment findings does the nurse anticipate for this client? Select all that apply. 

A) Shuffling gait  
B) Lip smacking  
C) Wormlike motions of the tongue  
D) Unusual facial movements  
E) Muscle spasms of the neck


Question 1920

The nurse is providing care to an older adult Asian-American client diagnosed with respiratory alkalosis. The nurse states to the client, "look into my eyes and breathe with me so that we can slow down your breathing rate." The client continues to look down and refuses to make eye contact with the nurse. The client's daughter later asks you to teach her how to help her mother to control her breathing. When documenting this client's care, which statement is appropriate for the nurse to include? 

A) "The client's culture does not allow for direct eye contact with the nurse during care."  
B) "The client is noncompliant with suggested treatment plan."  
C) "The client does not understand the English language."  
D) "The client's daughter may be abusive." 


Question 1921

The nurse is caring for a client diagnosed with chronic obstructive pulmonary disease (COPD). When planning care for this client, which interventions are appropriate to enhance the client's breathing pattern? Select all that apply. 

A) Provide adequate rest periods.  
B) Educate on relaxation techniques.  
C) Educate on pursed-lip breathing.  
D) Administer a cough suppressant.  
E) Assist with ADLs.


Question 1922

A nurse is working in a neonatal intensive care unit (NICU). The nurse wants to teach a mother of a premature baby how to give her baby a bath. Which statement by the mother reflects a readiness to learn? 

A) "I'm so afraid I'll hurt my baby with all these tubes and wires."  
B) "When my baby is just a little bigger, I'll feel more comfortable giving him a bath."  
C) "You'll give us written instructions before we go home, correct?"  
D) "I want to make sure my husband is here, in case I don't hear everything that's said."
Question 1923

A client asks for a hospital bed near the door because of a fear of being trapped in a room and not being able to get out. When planning care for this client, which does the nurse include as a possible cause for this client's fear?

A) Genetic predisposition  
B) Informational transmission  
C) A traumatic event  
D) Observing others


Question 1924

A client worries every day about personal health and states, "I may not have enough medication if the weather takes a turn for the worse.” Based on this data, which diagnosis does the nurse anticipate for this client?

A) Panic disorder  
B) Generalized anxiety disorder  
C) Phobia  
D) Obsessive compulsive disorder


Question 1925

An older adult client experiences an extended hospitalization due to a chronic illness. The client states to the nurse, "I don't know how I can pay for this hospital stay and afford all of the new medication that I have been prescribed.” Which response by the nurse is the most appropriate?

A) "Much of your care will be covered by Medicare.”  
B) "You need to focus on recovering and stop worrying about money.”  
C) "I'll have someone from the business office come and talk to you about your bill.”  
D) "Don't worry. I'm sure everything will work out okay.”


Question 1926

The hospital's nurse case manager has been extensively involved with a shooting victim and members of the client's family in coordinating care of providers from many disciplines as the client progressed from the emergency department (ED) to the intensive care unit (ICU) and then onto the medical-surgical unit. After 3 weeks of hospitalization, the case manager is helping to prepare the client for discharge to a rehabilitation center where treatment will continue. Which outcomes have been documented in the literature as benefits of such collaboration? Select all that apply.

A) Improved client outcomes  
B) Decreased client morbidity and mortality  
C) Increased overall cost of health care services  
D) Reduction in duplication of healthcare services  
E) Higher level of job satisfaction


Question 1927

The nurse is teaching a female client with chronic fatigue due to clinical depression regarding ways to increase energy levels. Which client statement indicates that teaching has been effective?

A) "I will go shopping once a week.”  
B) "I need to increase exercise time each week.”  
C) "I will take Wellbutrin as prescribed.”  
D) "I will spend time with friends.”


Question 1928

Human immunodeficiency virus (HIV) infects and destroys CD4 cells. List the following events in the order in which they occur for a client who is HIV-positive.

A) Virus invades helper T cell  
B) Viral RNA converts with reverse transcriptase to viral DNA  
C) Viral DNA integrates with host cell DNA.  
D) Virus remains latent, or actively replicates.  
E) Virus sheds protein coat.
**Question 1929**

The client is receiving sodium bicarbonate intravenously (IV) for correction of acidosis secondary to diabetic coma. The nurse assesses the client to be lethargic, confused, and breathing rapidly. Which is the nurse's priority response to the current situation?

A) Continue the infusion, because the client is still in acidosis, and notify the healthcare provider.
B) Decrease the rate of the infusion and continue to assess the client for symptoms of alkalosis.
C) Increase the rate of the infusion and continue to assess the client for symptoms of acidosis.
D) Stop the infusion and notify the physician because the client is in alkalosis.


**Question 1930**

The nurse is planning care for an older adult client recently diagnosed with tuberculosis (TB). The client lives alone in an apartment and will continue treatment at home. Which nursing diagnosis is a priority for this client?

A) Deficient Knowledge
B) Ineffective Therapeutic Regimen Management
C) Ineffective Breathing Pattern
D) Risk for Injury


**Question 1931**

A client with systemic lupus erythematosus (SLE) is being treated with immunosuppressant drugs and corticosteroids. When providing teaching for this client, which topics are appropriate for the nurse to include? Select all that apply.

A) Avoid large crowds.
B) Refrain from taking aspirin products.
C) Use contraception to prevent pregnancy.
D) Don't get a flu shot.
E) Report signs of infection to the healthcare provider.


**Question 1932**

A client with a 2-month-old child is experiencing insomnia, mood swings, and crying. Based on this data, which would the nurse anticipate the client would benefit from receiving? Select all that apply.

A) Time management and exercise therapy
B) Cognitive-behavioral therapy
C) Antidepressants
D) Psychosocial interventions
E) Electroconvulsive therapy


**Question 1933**

A nurse educator is talking to a student about how to deal with an ethical dilemma in practice. Which does the nurse educator explain to the student as important regarding actions during an ethical dilemma?

A) Relying on nursing judgment.
B) Examining all conflicts in the situation.
C) Investigating all aspects of the situation.
D) Making a decision based on the policy of the agency.


**Question 1934**

The nurse is monitoring the intake and output for a preterm infant. Which action by the nurse indicates correct assessment technique when monitoring urine output?

A) Insert an indwelling urinary catheter.
B) Apply an external condom catheter.
C) Document "unable to obtain" on the graphic sheet.
D) Weigh diapers using the estimate that 1 ml = 1 gram of weight.

Question 1935
A community health nurse is educating a group of clients on the difference between illness and disease. Which statements are appropriate for the nurse to include in the educational session? Select all that apply.
A) "An individual can feel ill without disease."
B) "Illness and disease are never related to one another."
C) "Illness is an alteration in body function, where disease is highly subjective."
D) "An individual can have a disease and not feel ill."
E) "Illness is synonymous with disease."

Question 1936
The nurse educator is teaching a group of nursing students about the benefits of participating in an interdisciplinary team when planning and implementing client care. When quoting research on this subject, which statement by the educator is appropriate?
A) "Team members feel a greater sense of commitment and contribution to the organization."
B) "Pooling resources and ideas results in greater efficiency in providing care to clients."
C) "Team members report feeling more respected and valued within and across professional disciplines."
D) "Organizations can report greater compliance with the 2010 Patient Protection and Affordable Care Act."

Question 1937
The nurse is providing care to a client diagnosed with end-stage renal disease. When planning a care plan conference for this client, who does the nurse invite to participate?
A) The oncologist
B) The psychiatrist
C) Family members
D) The hospital CEO

Question 1938
A pregnant client presents to the emergency department reporting that she has started labor and is certain the baby is coming "any minute now" and asks to be taken up to the delivery suite. After assessing and monitoring the client, the nurse determines that the client is in "false" labor and is preparing her to for discharge. Which observations support the nurse's conclusion? Select all that apply.
A) The contractions are mostly in her abdomen.
B) Her cervix has dilated 2 cm over the 2 hours of observation.
C) The contractions do not have a regular pattern.
D) The frequency and intensity of the contractions have stayed about the same.
E) Walking seems to increase the strength of the contractions.

Question 1939
A client who was raped tells the nurse that she is planning to have an abortion because she cannot raise a child who was conceived this way; however, abortion is against her religion. Which action by the nurse is the most appropriate?
A) Remind the client that abortion is killing and that's why it is against her religion.
B) Suggest she talk with her clergy.
C) Provide information on giving up children for adoption.
D) Ask the client what she needs to support her decision.

Question 1940
A client with glaucoma is experiencing sensory overload. What can the nurse suggest to reduce this client's visual overstimulation?
A) Insert artificial tears several times a day.
B) Use an over-the-counter eye drop for irritation.
C) Do not go outside during the daytime.
D) Wear sunglasses that block UVA and UVB rays.
Question 1941
A mountain climber in his early 30s with a love for the outdoors became critically ill with pancreatic cancer. The client states to the nurse, "I want to die outdoors where I can see the mountains.” The nurse takes the client to an outdoor patio that overlooks open space and the distant mountains. The nurse is applying the carative factor of "Engaging in creative, individualized problem-solving caring processes.” This action exemplifies which theory of caring in nursing?
A) Leininger's Theory of Culture Care Diversity and Universality
B) Roach's Theory of Caring as the Human Mode of Being
C) Watson's Theory of Human Care
D) Benner and Wrubel's Theory of Caring

Question 1942
A client scheduled for surgery wants to continue to wear a religious medal. Which actions by the nurse support the client’s religious needs? Select all that apply.
A) Keep the medal on the client but remove it once anesthesia is provided.
B) Document that the medal is being worn by the client.
C) Explain that the medal can be safety pinned to the client’s gown.
D) Ask the client if wearing a medal is going to ensure a successful surgery.
E) Suggest the client not wear the medal because it will most likely be lost.

Question 1943
A toddler cannot stand next to furniture and does not try to pull himself up from a sitting position. Based on this data, the nurse plans care for this client based on which deficiency?
A) Growth
B) Development
C) Height
D) Behavior

Question 1944
A client with a history of breast cancer who is entering menopause is seeking information about how to manage hot flashes. What information can be provided to the client?
A) Estrogen is the only reliable method of treatment for hot flashes.
B) Olive oil and black cohosh are effective in the management of hot flashes.
C) Soy and black cohosh can be used to manage the hot flashes associated with menopause.
D) The client should be advised that she will have to wait until menopause has finished for the hot flashes to cease.

Question 1945
The case manager interviews an older adult client hospitalized after hip replacement surgery. The client requires in-patient rehabilitation prior to being discharged home. The case manager works with the hospital nursing staff, the rehabilitation center, the client's family members, and other care providers to assist with a smooth transition. Which is the primary goal of the care management model described here?
A) To help manage concerns that are related to the client's medical care and treatment regimen only
B) To track a client's progress to ensure that appropriate care is provided until the time of discharge
C) To provide a continuum of clinical services in order to help contain costs and improve client outcomes
D) To provide greater peace of mind for the client and his or her family members

Question 1946
A client who has been divorced for 1 year begins to take classes at a community college and has enrolled the children in daycare. When documenting the client's actions, which phrase is the most appropriate for the nurse to use?
A) Turning point in life
B) Maturational crisis
C) Responding to stress
D) Situational crisis
Question 1947

The nurse is caring for a client who is receiving intravenous fluids postoperatively following cardiac surgery. The nurse is aware that the client is at risk for fluid volume excess. The family asks why the client is at risk for this condition. Which response by the nurse is the most appropriate?

A) "Fluid volume excess is caused by new onset liver failure caused by the surgery."
B) "Fluid volume excess is caused by the intravenous fluids."
C) "Fluid volume excess is caused by inactivity."
D) "Fluid volume excess is common due to increased levels of antidiuretic hormone in response to the stress of surgery."


Question 1948

A client who is at 12 weeks' gestation is experiencing nausea, breast tenderness, and fatigue. She tells the nurse her husband is upset with her constant complaints. Which is the priority nursing diagnosis based on this data?

A) Fatigue
B) Dysfunctional Family Processes
C) Ineffective Breastfeeding
D) Nausea


Question 1949

The nurse working in the emergency department (ED) is assessing an infant client. Which findings support the diagnosis of respiratory syncytial virus (RSV)? Select all that apply.

A) Irritability
B) Grunting
C) Bradypnea
D) Rhinorrhea
E) Tachypnea


Question 1950

The nursing supervisor in a small rural hospital is asked to help manage the switch from paper to electronic records. Which standard managerial steps will the nurse supervisor take to initiate this process? Select all that apply.

A) Synthesizing
B) Experimenting
C) Planning
D) Criticizing
E) Organizing


Question 1951

A client who sustained a cervical neck injury 2 days ago is demonstrating an irregular respiratory pattern with the rate of 8-10 breaths per minute. Based on this data, which is the priority nursing diagnosis?

A) Autonomic Dysreflexia
B) Ineffective Breathing Pattern
C) Impaired Gas Exchange
D) Impaired Physical Mobility


Question 1952

The nurse is providing care to a client who is "in crisis." The client recently lost a job, was served with divorce papers, and has been sick with a cold for 1 month. Which nursing statement demonstrates understanding of the care of a client in crisis?

A) "Men often handle crisis better individually, whereas women do better with a counselor."
B) "Once you reach the crisis state, you may remain there for several months until you recover."
C) "People generally find it easier to work through a crisis if someone is working with them."
D) "Experiencing a crisis is never positive, so we must work to relieve your anxiety as soon as possible."

Question 1953
A client diagnosed with open-angle glaucoma asks the nurse what that means. Which response by the nurse is appropriate?

A) "It is a rare type of glaucoma."
B) "It means that the condition occurs within days."
C) "The eye cannot drain the fluid that it produces."
D) "One of the first signs of it is pain behind the eyes."

Question 1954
The nurse is providing care to a client who is experiencing an elevated body temperature. Which classification of medication does the nurse anticipate will be prescribed for this client?

A) Sedative
B) Antihypertensive
C) Antipyretic
D) Muscle relaxant

Question 1955
A client of Hispanic descent delivers a newborn son and plans to breastfeed. When the nurse attempts to help the newborn latch on for breastfeeding, the client states, "I would like to bottle feed my baby for the first few days." Which reason does the nurse anticipate regarding why the client wants to delay breastfeeding?

A) Breast milk causes skin rashes.
B) Thin milk causes diarrhea.
C) Colostrum is bad for the baby.
D) It will cause "evil eye."

Question 1956
The nurse is presenting a program on surviving a fall at a senior center. Which statement indicates that the participant needs clarification of the content on emergency actions after a fall?

A) "I need to subscribe to an emergency call service like Lifeline."
B) "To call for help, I can scoot on my bottom to a low wall-mounted phone."
C) "I should crawl to a phone on the affected side to keep it stable against a hard surface."
D) "If possible, I can crawl to a stairway and use the stairs to lift up to a standing position."

Question 1957
The nurse suspects a client is experiencing posttraumatic stress disorder when which are noted during the assessment process? Select all that apply.

A) Observed family member be raped and murdered
B) Restores antique automobiles as a hobby
C) Recently terminated from employment
D) Has a history of anxiety disorder
E) Lives with spouse and has a garden

Question 1958
A nurse receives a shift report and is preparing to care for clients assigned on a medical-surgical unit. Which client should the nurse plan to assess first?

B) The client experiencing shortness of breath.
C) The client who needs assistance with activities of daily living.
D) The client who needs help ambulating to the bathroom.

Question 1959
The nurse is assessing an older adult client in the free clinic. The nurse notes that the client’s cholesterol level is higher than the target and has
increased since the client’s last visit. The nurse assesses the client for possible causes for this increase. After determining that the client has not changed dietary and exercise habits, which conclusion by the nurse is the most appropriate?
A) The client may not be taking medications as prescribed.
B) The client needs more aerobic activity.
C) The client has increased egg consumption.
D) The client may be experiencing high triglyceride levels.

**Question 1960**

A nurse is caring for an older adult client with terminal cancer. The client’s family wants to continue treatment, but the client would like to discontinue treatment and go home. The nurse agrees to be present while the client tells the family. Which principle is the nurse supporting?
A) Justice for the client
B) Nonmaleficence for the client
C) Autonomy for the client
D) Beneficence for the client

**Question 1961**

The nurse is caring for a client following hemodialysis. The nursing assessment reveals the client is tachycardic; has pale, cool skin; and has a decreased urine output. Based on this data, the nurse determines that the client has not met which expected outcome associated with hemodialysis?
A) Cardiac decompensation
B) A reduction of extracellular fluid
C) The effects of rapidly infused intravenous fluids
D) The pharmacological effects of a diuretic infused in the dialysate

**Question 1962**

An older adult client recovering from prostate surgery is waking up frequently during the night. Which client statement supports the nursing diagnosis Disturbed Sleep Pattern?
A) "I take my Zoloft as soon as I get up in the morning."
B) "I have one cup of regular coffee in the morning."
C) "I walk for half an hour after I eat breakfast."
D) "The pain in my hips is unbearable at times."

**Question 1963**

After completing an assessment, the nurse determines a client is at risk for safety issues. Which data supports the nurse's conclusion? Select all that apply.
A) Prescribed antihypertensive and pain medication
B) Lives with adult married daughter and family
C) Receives an annual ophthalmologic examination
D) Occasional dizziness with walking
E) Ingests three meals a day and two snacks

**Question 1964**

A healthcare provider caring for a client with hypoplastic left heart syndrome has provided the client's family with information regarding which surgical repair necessary for this condition?
A) Damus-Kaye-Stansel procedure
B) Glenn procedure
C) Fontan procedure
D) Jatene procedure

**Question 1965**

The nurse is teaching a group of parents at the local elementary school health fair about immunity and the importance of vaccination. Which scenario will the nurse provide as one in active immunity is acquired?
A) Becoming ill with tetanus and receiving tetanus toxoid
Question 1966

The nurse is providing care to several clients on a medical-surgical unit. Which clients would necessitate a vegetarian diet due to religious beliefs?

Select all that apply.
A) A catholic client.
B) An Anglican client.
C) A Seventh-Day Adventist client.
D) A Hindu client.
E) An Episcopalian client.


Question 1967

The nurse is conducting an assessment on a client who is 36 hours postoperative following an appendectomy. During the assessment, the nurse is unable to hear any bowel sounds. The client denies passing flatus. Which action is most appropriate by the nurse?

A) Encouraging the client to increase solid food intake to promote peristalsis
B) Encouraging the client to increase fluid intake to promote peristalsis
C) Withholding food and fluid intake until intestinal motility has returned
D) Encouraging the client to decrease the amount of oral intake


Question 1968

The nurse educator is teaching a management and leadership class to a group of nursing students. The educator presents information regarding case management and case manager. Which statement, if made by a student, indicates the need for additional education on this subject matter?

A) "A case manager’s typical caseload is 10-15 clients, mostly representing high-volume, high-cost, and high-risk diagnoses for the hospital."
B) "The collection of baseline data for conditions or diagnoses that will be managed is an essential component of case management."
C) "Case managers usually do not provide direct client care; instead, they coordinate and monitor others providing direct client care."
D) "Case managers can only be licensed professional nurses who have extensive patient care experience."


Question 1969

A female client tells the nurse about having no interest in sex since it has become painful. Which intervention(s) would be appropriate to help the client with this problem? Select all that apply.

A) Suggest antibiotics to treat the pain.
B) Discuss the need to be screened for sexually transmitted infections.
C) Ask when the last Pap smear was performed.
D) Instruct on the use of artificial lubrication.
E) Encourage the client to discuss with the healthcare provider because there are medications to help with this problem.


Question 1970

A client with impaired hearing is scheduled for a test to measure the compliance of the middle ear to sound transmission. Which diagnostic test will the nurse include in the client's education?

A) Weber test
B) Whisper test
C) Tympanometry
D) Rinne test


Question 1971

A nurse is developing a plan of care for a client with traumatic injuries from a motor vehicle crash. Which nursing intervention does the nurse include in the plan of care to reduce the risk of integumentary complications?

A) Assist the client in turning at least every 8 hours.
B) Assist the client in turning at least every 2 hours.
C) Provide active or passive exercises at least once every 8 hours.
D) Encourage coughing, deep breathing, and incentive spirometry.

Question 1972
The nurse is planning a teaching session regarding peptic ulcers for the residents of an assisted-living complex. Which concepts about peptic ulcer disease should the nurse include in the presentation to the residents? Select all that apply.
A) Many peptic ulcers are infected with H. pylori and are treated with antibiotics.
B) The individual with a peptic ulcer will most likely experience pain after eating.
C) Gastric ulcers are more common than duodenal ulcers.
D) A colonoscopy is the most common test used to diagnose the presence of a gastric ulcer.
E) The first sign of a peptic ulcer may be serious gastrointestinal bleeding.

Question 1973
The case manager assembles a team of healthcare professionals, including the client's primary healthcare provider, physical therapist, and social worker, for the purpose of collaborative discharge planning and decision making. Which type of team did the case manager assemble? Select all that apply.
A) Primary nursing care team
B) Intradisciplinary team
C) Management team
D) Interdisciplinary team

Question 1974
When assessing the risk of a newborn for sudden infant death syndrome (SIDS), which are risk factors that the nurse should consider? Select all that apply.
A) Father's age
B) Race
C) Age
D) Gender
E) Eye color

Question 1975
The nurse teaches families about recognizing signs of dating violence in their teenage children. Which participant statement indicates that teaching about safe sexual practices has been effective?
A) "We noticed our daughter seems very happy lately."
B) "Our son has a new girlfriend."
C) "We taught our children about dating violence when they were 6 years old."
D) "Our daughter has come home with the odor of alcohol on her breath."

Question 1976
The nurse has just completed the assessment of a client admitted with a gunshot wound to the femoral artery. Which is the priority nursing diagnosis for this client?
A) Ineffective Coping
B) Ineffective Airway Clearance
C) Decreased Cardiac Output
D) Deficient Fluid Volume

Question 1977
An older adult client is talking with the nurse about sleep problems. Which fact regarding sleep should the nurse teach this client?
A) All elderly individuals experience disrupted sleep and depression.
B) Normally, a person should not awaken more than once during the night.
C) The elderly do not experience as much deep sleep as a younger person.
D) The need for sleep decreases with age.
Question 1978

The nurse is providing care to a client who is exhibiting clinical manifestations of a severe fluid and electrolyte imbalance. Based on this data, which health care provider prescriptions does the nurse prepare to implement? Select all that apply.

A) Initiate intravenous therapy
B) Administer antibiotics
C) Administer red blood cells
D) Administer diuretics
E) Initiate hypodermoclysis


Question 1979

The nurse is caring for a client who is having difficulty understanding the wound care dressing changes that need to be completed in the home after discharge. The client asks the nurse to demonstrate the procedure again and allow the client's spouse to perform the procedure while the nurse watches. Which is the most likely outcome of this assertive request by the client?

A) Less compassionate care for the client due to the spouse’s irritation by the request.
B) A guarantee that the spouse will change the dressings correctly.
C) A slightly increased chance that the wound will become infected due to exposure during dressing changes.
D) A greater likelihood that the wound will heal appropriately.


Question 1980

A nurse is providing discharge instructions to a client with iron deficiency anemia who is experiencing glossitis. Which statements will the nurse include in the discharge teaching for this client? Select all that apply.

A) Use an alcohol-based mouthwash every 2-4 hours.
B) Monitor the condition of the lips and tongue daily.
C) Use a soft toothbrush or sponge to provide oral care.
D) Apply a non-petroleum-based lubricating jelly or ointment to the lips after oral care.
E) Provide frequent oral hygiene.


Question 1981

The nurse is caring for a client who is experiencing intermittent diarrhea. The client has been advised to increase the amount of soluble fiber in the diet. Which food selections by the client indicate that teaching has been effective? Select all that apply.

A) Spinach salad
B) Peas
C) Carrot slices
D) Corn muffins
E) Sunflower seeds


Question 1982

The nurse is planning care for an adolescent client experiencing the manic phase of bipolar disorder. Which intervention would address hallucinations?

A) Discuss a homework assignment.
B) Keep isolated in a quiet room.
C) Explain that hallucinations are not real.
D) Encourage spending time with others.


Question 1983

An adult client is diagnosed with bone spurs of the vertebral column. Which is the priority action by the nurse?

A) Teach relaxation techniques.
B) Assess pain management.
C) Refer to a dietitian.
D) Implement low-level exercise program.

Question 1984

The nurse is instructing a client with an anxiety disorder on behavioral tools to help with coping. Which tools to help with coping should the nurse include in the teaching session? Select all that apply.

A) Journaling
B) Distraction
C) Thought stopping
D) Reading self-help literature
E) Practicing yoga


Question 1985

The nurse educator is providing information to a group of nursing students regarding appropriate assessment techniques that can be applied across the life span. Which statements will the educator include in the teaching session? Select all that apply.

A) "Use age-appropriate terminology for explaining procedures and actions."
B) "Use the assessment process to teach about exam procedures and findings."
C) "Use standard precautions during the history and physical examination process."
D) "Perform invasive procedures like pharyngeal and otic exams at the end of the assessment."
E) "Auscultate the chest while the client is sleeping to obtain the most accurate assessment of the heart."


Question 1986

The nurse is caring for a family with four children whose third child has been diagnosed with attention-deficit/hyperactivity disorder (ADHD). After completing an assessment, which statement made by the mother leads the nurse to a diagnosis of compromised family coping?

A) "I'm not sure if we should let my child act in the school play."
B) "I don't know how to tell the rest of the family or how we will manage the other children."
C) "We need to alert the teachers at school so they will know how to give the medication."
D) "Will he have to be put in an institution?"


Question 1987

A client is admitted to the hospital with an elevated temperature, nausea, and pain and tenderness in the lower right quadrant of the abdomen. After receiving pain medication, the client continues to complain of pain at a level of 8 on a 1-10 pain scale. Pain medications are not due for at least another 2 hours. Which statement by the nurse is appropriate?

A) "I will inform the healthcare provider about your continued pain."
B) "Try to rest for a while longer until it is time to receive your medication."
C) "I do not have any medications ordered for you at this time."
D) "Let's try a heating pad or warm blanket to see if that helps with your discomfort."


Question 1988

A client comes to the clinic and is found to have a sexually transmitted infection (STI). The client states to the nurse, "Promise you won't tell anyone about my condition." According to the Health Insurance Portability and Accountability Act (HIPAA) of 1996, which action must the nurse take?

A) Honor the client's wishes.
B) Not disclose any information to anyone.
C) Respect the client's privacy and confidentiality.
D) Communicate only necessary information.


Question 1989

The nurse working in a neonatal intensive care unit (NICU) is caring for a critically ill 28-week-old preemie. The parent calls the nurse and asks if it would be possible to bring the client's 2-year-old sibling to visit because the sibling is having nightmares about the client's death. Small children are not permitted to visit because of the risk of infection to the infants on the unit. Which action by the nurse is appropriate?

A) Tell the parent that visiting is not permitted and offer to take pictures of the client.
B) Tell the parent to bring the sibling in to visit in the middle of the night.
C) Seek permission from unit management and the neonatologist to allow the sibling to visit.
D) Offer to make counseling available to the sibling.

Question 1990
A student nurse is assisting in the care of a client with bipolar disorder. The student nurse researches the disorder further, focusing on the pathophysiology and etiology of the disorder. Which are true regarding the pathophysiology and etiology of bipolar disorder? Select all that apply.
A) Children of parents with bipolar disorder have an increased risk of developing the disorder.
B) Immunological abnormalities may contribute to the pathophysiology of mania and bipolar disorder.
C) Bipolar disorders, anxiety disorders, and personality disorders share biological susceptibility and inheritance patterns.
D) No definitive cause or specific pathophysiology has been identified for bipolar spectrum disorders.
E) Stressful life events and an emotionally overinvolved, hostile, and critical communication pattern are factors associated with heritability of the disorder.

Question 1991
The nurse is reviewing the laboratory values of a client who is newly diagnosed with acquired immunodeficiency syndrome (AIDS). Which values should be reported to the client's healthcare provider? Select all that apply.
A) CD4 cell count 1,100/mm³
B) WBC 6,500
C) T4 cell count 150
D) Viral load 11,500 copies/mL
E) CD4 lymphocytes 12%

Question 1992
A nurse is caring for a pregnant client who has rheumatoid arthritis (RA). Based on this data, which does the nurse anticipate when providing care to this client?
A) A higher risk for preterm delivery.
B) A continued risk for anemia.
C) An acute exacerbation of symptoms.
D) An increased need for medication.

Question 1993
A client is admitted with manifestations of metabolic alkalosis. Which diagnostic test findings support the admitting diagnosis? Select all that apply.
A) Electrocardiogram changes consistent with hypokalemia
B) Intravenous pyelogram shows kidney stones
C) Bilateral lower lobe infiltrates noted on chest x-ray
D) Serum glucose level 142 mg/dL
E) Blood pH 7.47 and bicarbonate 34 mEq/L

Question 1994
A nurse evaluating the therapeutic effect of the drug sodium polystyrene sulfonate (Kayexalate) for a client diagnosed with chronic renal failure. Which therapeutic effect from the medication does the nurse anticipate?
A) Increased serum sodium
B) Decreased serum potassium
C) Decreased urine specific gravity
D) Increased stool excretion

Question 1995
Which situation indicates a conflict in morality?
A) The nurse purchases the daily newspaper for a client who does not have any money but will when his wife comes to visit.
B) The nurse provides over-the-counter pain relievers to the daughter of a client because of a headache.
C) The nurse provides the mother of a dying neonate a cup of coffee in the intensive care unit.
D) The nurse provides a terminally ill client a meal that includes foods that should be avoided but were requested.
Question 1996
The nurse is reviewing discharge instructions with a client who is newly diagnosed with asthma. Which client statement indicates a need for further teaching?
A) "I need to take my Singulair at least 1 hour before I eat."
B) "I need to rinse my mouth after every use of my inhaler."
C) "I can resume my ephedra when I return home."
D) "Because I am on theophylline, I will need to have therapeutic blood levels drawn."

Question 1997
The nurse is caring for a client with leukemia who is experiencing neutropenia as a result of chemotherapy. Which action should the nurse include in the plan of care for this client?
A) Replace hand hygiene with gloves.
B) Insert an indwelling urinary catheter to prevent skin breakdown.
C) Restrict fluid intake.
D) Restrict visitors with communicable illnesses.

Question 1998
The nurse providing care to a client whose medication therapy for the treatment of renal calculi has failed. Based on this data, which treatment option does the nurse anticipate for this client?
A) Lithotripsy
B) Surgical removal
C) Initiation of IV fluids
D) Dietary control

Question 1999
The nurse is providing care to a client who is receiving treatment for diabetic ketoacidosis (DKA) who is experiencing an acid-base imbalance. Which is the reason for the associated altered metabolism that the client is experiencing?
A) Insulin deficiency
B) Hyperparathyroidism
C) Hypothyroidism
D) Ascites

Question 2000
A client who sustained a gunshot wound has symptoms below the level of T-12 of ipsilateral motor paralysis, loss of proprioception and vibratory sense, and contralateral loss of pain and temperature sensation. When planning care for this client, which assumptions by the nurse are appropriate based on the provided data? Select all that apply.
A) The spinal cord injury is incomplete.
B) American Spinal Injury Association Impairment Scale score is A.
C) Some recovery of sensory function is higher.
D) Hemisection of the spinal cord is likely.
E) These findings are consistent with Brown-Sequard syndrome.

Question 2001
The nurse is preparing to perform a health assessment on an adult client who has a family history of cancer. Which questions should the nurse ask the client to assess for the early warning signs of cancer? Select all that apply.
A) "Have you had any changes in bowel or bladder habits?"
B) "Do you have a cough that is associated with seasonal allergies?"
C) "Have you noticed a change in your appetite?"
D) "Have you experienced any problems swallowing?"
E) "Have you noticed any cuts that have not healed?"
Question 2002

A school nurse is working with a group of teachers to help them address the developmental needs of preschool students. The nurse tells the group that preschool-age children are experiencing the stage of initiative versus guilt described in Erikson's theory. Which activity should the nurse suggest to foster development at this stage?

A) Helping them develop skills needed in the adult world, such as allowance budgeting
B) Allowing "pretend" time during their classes, such as dress-up or role-playing activities
C) Presenting diversity in culture and practices as part of classroom study
D) Providing time for running and playing sports, such as basketball, to increase gross motor skills


Question 2003

The nurse is collecting data about a client's current health status. Which statement would assist in gathering subjective data about the client?

A) "Your skin appears to be dry and irritated."
B) "Your eyelid is red and swollen."
C) "I see that you have bruises on your legs."
D) "Tell me why you have difficulty sleeping."


Question 2004

A nurse is on the elevator preparing to start a 12-hour shift after visiting a sick family member when two other nurses enter. The nurses start talking negatively about a client they are caring for on a medical-surgical unit in the hospital. Although there are no clients on the elevator, which action by the first nurse in the elevator is appropriate?

A) Report the nurses to the risk manager.
B) Report the nurses to the unit manager.
C) Ask the nurses to stop talking in public.
D) Speak to the nurses in a private place.


Question 2005

The interdisciplinary treatment team proposes interventions to improve and maintain physical function for an adult client with Parkinson disease (PD). Which interventions are supported by research? Select all that apply.

A) Use of resistance bands
B) Walking barefoot indoors
C) Active and passive range of motion
D) High-intensity treadmill training
E) Low-intensity treadmill training


Question 2006

During a routine physical examination, a client tells the nurse, "I don't know what to do anymore since my husband died and left me alone." Which is the priority nursing diagnosis for this client?

A) Anxiety
B) Overload Stress
C) Helplessness
D) Imbalanced Nutrition


Question 2007

The nurse is caring for a client who is diagnosed with fibromyalgia. Based on this diagnosis, which clinical manifestations does the nurse anticipate for this client? Select all that apply.

A) Irritable bowel syndrome
B) Nausea and vomiting
C) Anxiety
D) Insomnia
E) Pain in the calves of the leg

Question 2008

An older adult client with cardiac disease describes a decline in the amount of sleep and difficulty falling asleep at night. What should the nurse consider is occurring with this client?

A) Signs of anxiety and depression  
B) Normal signs of respiratory disease  
C) Normal signs of aging  
D) Normal signs of cardiac disease  


Question 2009

A hospice nurse is working with a client who has ovarian cancer. The client is concerned that her two daughters are at an increased risk for cancer and asks for the nurse’s help. Which actions by the nurse are appropriate? Select all that apply.

A) Provide the family with information on hereditary cancer risks.  
B) Arrange for the client to have genetic testing.  
C) Tell the client that her additional worrying is too stressful.  
D) Offer to refer the daughters to a genetic counselor.  
E) Assure the client that ovarian cancer is not hereditary.  


Question 2010

The family of a school-age client is very upset because the child does not seem to know the family. The client has been admitted with pneumonia and has a high fever. What should the nurse teach this family to alleviate stress about the child's confusion? Select all that apply.

A) Explain that high fevers can cause delirium.  
B) Teach the family how to care for the child upon discharge.  
C) Encourage the family remain at the bedside as much as possible.  
D) Reorient the client to time and place as much as possible.  
E) Reassure that the confusion will not last very long.  


Question 2011

During an assessment, an adolescent reports: "I get up at 6 a.m., I attend early-morning band classes three times each week, I play sports for 2 hours each day after school, and homework takes me 3 hours each night. I always feel tired." Based on this data, which question will the nurse ask while continuing the client’s history?

A) "Have you considered talking with your teachers about decreasing your homework, since you have so many extracurricular activities?"  
B) "Do you consume foods high in iron such as red meat and green, leafy vegetables?"  
C) "Do you think you are involved in too many activities?"  
D) "How many hours of sleep do you get each night?"  


Question 2012

A client with depression is receiving electroconvulsive therapy (ECT). Which interventions should the nurse plan when caring for this client? Select all that apply.

A) Place in the supine position with the head flat.  
B) Administer intravenous fluids for 8 hours post procedure.  
C) Maintain nothing-by-mouth status until fully awake.  
D) Place in the lateral recumbent position.  
E) Provide oral fluids immediately after the procedure.  


Question 2013

The nurse is planning care for a child with respiratory syncytial virus (RSV) bronchiolitis with the nursing diagnosis of Impaired Gas Exchange. Which interventions should be included in the child's plan of care? Select all that apply.

A) Weigh diapers.  
B) Administer oxygen as prescribed.  
C) Monitor vital signs and pulse oximetry.  
D) Provide frequent rest periods.  
E) Weigh daily.  

Question 2014

The nurse is planning care for a client diagnosed with influenza. Which interventions should the nurse include when planning this client’s care? Select all that apply.
A) Placing the client in a negative air flow room
B) Using appropriate PPE
C) Notifying other departments of the diagnosis
D) Placing droplet and contact precaution signs on the client room door
E) Placing a ventilator in the room

Question 2015

A client with terminal colon cancer is refusing all food and fluids. The client has a living will that states no artificial nutrition is to be provided; however, the family is asking for a gastrostomy tube. What should the nurse do?
A) Honor the family’s wishes and have them sign a consent form.
B) Talk to the physician so he or she can move forward with the family’s wishes.
C) Honor the client’s refusal and help the family come to terms with the situation.
D) Take the case to the hospital’s ethics committee.

Question 2016

The nurse is providing care to a client diagnosed with chronic obstructive pulmonary disease (COPD). Which clinical manifestations indicate the client's perfusion is affected? Select all that apply.
A) Confusion
B) Bounding pulse
C) Pink nail beds
D) Wheezing
E) Acrocyanosis

Question 2017

A nurse is caring for a child who is diagnosed with complicated grief after the recent death of a parent. Which symptom supports this child’s nursing diagnosis?
A) Preoccupation with death as a concept
B) Confusion and restlessness
C) Abnormal or nonexistent progression through the grieving process
D) Nightmares and/or sleeplessness

Question 2018

In arranging community services for a client who is diagnosed schizophrenia, the nurse case manager discusses options with the Assertive Community Treatment (ACT) team. Which team disciplines should the nurse expect will be part of the client’s ACT interdisciplinary team?
A) Teachers, school administrators
B) Psychiatrists, nurses, social workers, employment specialists, substance abuse specialists
C) Handi-Cab drivers
D) Speech pathology, occupational therapy

Question 2019

A nurse is caring for a client with hypothermia and frostbite of the nose and fingers. Which action by the nurse is inappropriate for this client?
A) Massage frostbite areas to rewarm them and increase circulation.
B) Debride blisters.
C) Keep the client on bedrest with the affected parts elevated.
D) Rapidly rewarm affected areas in circulating warm water.
Question 2020

The nurse is presenting a talk for the monthly Nursing Case Study education group. Which client would be a good choice for a case study on multiple sclerosis (MS)?
A) African-American man in his 20s with a vitamin D deficiency
B) Northern Canadian who has smoked for 25 years
C) Brazilian with chronic parasitic infestation
D) Italian with colonized methicillin resistant staphylococcus aureus (MRSA)

Question 2021

The nurse is providing care for a client recently diagnosed with type 2 diabetes mellitus. Which is the reason for using the Nursing Outcomes Classification (NOC) system when formulating client outcomes when planning care?
A) The NOC allows better nursing communication.
B) The NOC facilitates the collection of client care data.
C) It would be easier than forming other types outcomes.
D) The NOC looks more professional in the plan of care.

Question 2022

The nurse is caring for an adult client who has been diagnosed with high cholesterol. Which is important for the nurse to consider when teaching this adult client?
A) Adults usually can find information on their own.
B) Adults are more likely to adhere to a regimen than are children.
C) Adults are more oriented to learning when the material is useful immediately.
D) Adults do not need to be evaluated for understanding as children do.

Question 2023

A nurse is caring for a client with cardiomyopathy who has a nursing diagnosis of Activity Intolerance. Which intervention is inappropriate for this nursing diagnosis?
A) Assisting with client ADLs as necessary.
B) Spacing out nursing activities so client fatigue is lessened.
C) Consulting with a physical therapist on an activity plan.
D) Using passive and active range-of-motion (ROM) exercises as tolerated.

Question 2024

A young female client presents to the emergency department with vague physical symptoms and does not make eye contact with the nurse during the interview. Which assessment question from the nurse is the most appropriate to gain understanding of the cause of the client's symptoms?
A) "What kind of problems are you having?"
B) "Is someone hurting you?"
C) "Can you explain what your family life is like?"
D) "Can you tell me what's been going on in your life lately?"

Question 2025

A pediatric nurse is assigned telephone triage for the day at a pediatric clinic. The nurse receives a phone call from the mother of a newborn. The mother states, "I am concerned about my baby. When she first goes to sleep, her eyes dart around under her eyelids, she doesn't breathe regularly, and she sometimes twitches." Based on this data, which response by the nurse is the most appropriate?
A) "You should ask the doctor about these symptoms at your next checkup."
B) "Please bring your baby in immediately for a checkup."
C) "These are common behaviors in newborns and are normal."
D) "If your baby does this again, take her to the emergency department."

Question 2026
The nurse is planning care for a client admitted to the unit with dehydration. The client’s lab values indicate a low level of serum sodium. Based on the assessment finding, the nurse determines an appropriate nursing diagnosis to be electrolyte imbalance. Which medical condition supports this nursing diagnosis?
A) Hypotonic dehydration
B) Isotonic dehydration
C) Osmotic pressure
D) Hydrostatic pressure

Question 2027

A nurse is caring for a client with chronic myeloid leukemia (CML) who is neutropenic. Which interventions will the nurse implement to ensure this client's safety? Select all that apply.
A) Administer granulocyte colony-stimulating factor (G-CSF) as ordered.
B) Administer neutrophil colony-stimulating factor (N-CSF) as ordered.
C) Place client in reverse isolation.
D) Place patient in standard precaution isolation.
E) Administer a prophylactic gram-negative antibiotic.

Question 2028

A nurse working on an antepartum unit is providing care for a client with preeclampsia. Which clinical manifestation does the nurse anticipate for this client?
A) Increased nitric oxide production
B) Decreased blood urea nitrogen (BUN)
C) Decreased serum sodium
D) Increased serum creatinine

Question 2029

The nurse is administering a bed-bath to a client in a long-term care facility. The nurse is careful to cover the client during the bath. Which nursing role does this action describe?
A) Caregiver
B) Communicator
C) Client advocate
D) Teacher

Question 2030

A student nurse is completing a community assessment with a group of students. The student must research the location of the main healthcare facilities and the number of health professionals in the community. Which would be the best source for this information?
A) Local health department
B) State census data
C) Police department
D) City health planning board

Question 2031

A client being treated for depression reports the desire to get out of bed, shower, eat, and contact friends and family for socialization. Which conclusion regarding the client’s behavior is appropriate by the nurse?
A) Risk factors for self-harm
B) The need for assistance with activities of daily living
C) Improvement in depression
D) Denial of the diagnosis of depression

Question 2032

A home health nurse is providing care for a client with congestive heart failure. The client is taking furosemide (Lasix). The nurse reviews the client’s most recent serum potassium, which was 3.4 mEq/L. Based on this data, which food will the nurse encourage the client to consume?
Question 2033
The community health nurse, working with a group of women from another country who smoke, encourages them to stop smoking before and during pregnancy. A participant asks the nurse, “why is it important to stop smoking before and during pregnancy?” Which health problem associated with smoking before and during pregnancy will the nurse include in the response?
A) Unhappy memories
B) A personality disorder
C) Attention-deficit/hyperactivity disorder (ADHD)
D) Benzodiazepine withdrawal

Question 2034
The nurse is conducting a physical assessment of a middle-age client upon admission to the cardiovascular care unit for cardiopulmonary problems. Which position is likely to be contraindicated for this client?
A) Supine (horizontal recumbent)
B) Sims (side-lying)
C) Dorsal recumbent (back-lying)
D) Sitting with back unsupported

Question 2035
A toddler-age child with otitis media is prescribed amoxicillin clavulanate 250 mg/5 mL three times daily by mouth for 10 days. Which should the nurse teach the mother about this medication?
A) “It is important to measure the prescribed dose in a household teaspoon.”
B) “Be sure to administer a loading dose of the medication when you get home.”
C) “It is ok to stop the antibiotic if the child begins to have side effects.”
D) “Give the antibiotic for the full ten days as prescribed.”

Question 2036
A nurse working in the intensive care unit (ICU) is caring for a client who is 10 days postoperative after open abdominal surgery. The client has a well-approximated midline surgical incision that has numerous staples and a “healing ridge” noted. Which healing phase best describes the incision?
A) Proliferative phase
B) Inflammatory phase
C) Synthesis phase
D) Maturation phase

Question 2037
The nurse is planning care for the client diagnosed with chronic obstructive pulmonary disease (COPD) who has a breathing rate of 32 per minutes, elevated blood pressure, and fatigue. Which nursing diagnosis is the priority for this client?
A) Ineffective Airway Clearance
B) Anxiety
C) Ineffective Coping
D) Ineffective Breathing Pattern

Question 2038
The nurse is providing care to an infant in the emergency department (ED). Initial assessment indicates that the infant is experiencing an asthma attack. The infant is unresponsive to medication and a chest x-ray reveals a foreign body partially obstructing the airway. While placing an oxygen mask on the infant, the nurse notes a total obstruction of the airway. Which nursing action is appropriate?
A) Attempt to clear the obstruction by delivering back blows.
B) Attempt to clear the obstruction by delivering abdominal thrusts.
C) Attempt to clear the obstruction by delivering back blows and abdominal thrusts.
D) Attempt to clear the obstruction by delivering back blows and chest thrusts.

Question 2039
The nurse is caring for a client who is diagnosed with dysfunctional grieving after the loss of a child. Which treatment approaches are appropriate for the nurse to include in the plan of care for this client? Select all that apply.
A) Antidepressants
B) Anger management
C) Instruction about maladaptive dependence on the nurse
D) Cognitive therapy
E) Talk therapies

Question 2040
The nurse at a local hospital is conducting a safety workshop for expectant parents addressing newborn injury prevention and car seat safety. Which statement made by a parent indicates a need for further teaching?
A) "My newborn should ride rear-facing until at least 1 year of age and more than 20 pounds."
B) "It is good if I place a blanket over the baby and then buckle the baby onto the seat."
C) "My newborn should be in a car safety seat every time he is in the car."
D) "Never place a rear-facing car safety seat in the front seat with an active passenger air bag."

Question 2041
The nurse identifies the nursing diagnosis of Imbalanced Nutrition as appropriate for a client with osteoporosis. Which client statement supports the use of this diagnosis when planning care?
A) "I am allergic to dairy products."
B) "I frequently take long walks in the sun."
C) "My pain is relieved by Tylenol."
D) "I have removed all scatter rugs from my home."

Question 2042
The nurse teaches a client about lifestyle modifications to help manage hypertension. Which client statement indicates teaching has been effective?
A) "I need to get started on my medications right away."
B) "I won't be able to run in marathons anymore."
C) "I know I need to give up my cigarettes and alcohol."
D) "My father had hypertension, did nothing, and lived to be 90 years old."

Question 2043
The nurse is assessing a client's spirituality. Which findings indicate the client is experiencing spiritual strength? Select all that apply.
A) Wringing hands and softly repeating "I am not ready to die"
B) Telling her family over the telephone that the diagnosis is bad
C) Crying while sitting in a chair, alone
D) Watching a religious service on the television
E) Reading spiritual material

Question 2044
The nurse is caring for a client who was admitted to the hospital 1 day prior with cholelithiasis. Which new assessment finding indicates the stone has probably obstructed the common bile duct?
A) Nausea and vomiting
B) Elevated cholesterol level
C) Right upper quadrant (RUQ) pain
D) Jaundice
### Question 2045

While conducting a well-child assessment, the nurse suspects a 2-month-old has failure to thrive (FTT). Which height and weight measurement parameter should the nurse use to help diagnose this health problem?

- A) Height and weight below the 15th percentile
- B) Height and weight below the 5th percentile
- C) Height and weight below the 10th percentile
- D) Height and weight below the 50th percentile

**Answer:** https://biology-forums.com/index.php?topic=406826

### Question 2046

A nurse on the behavioral health unit is caring for a client diagnosed with depression, who just lost a spouse in a motor-vehicle accident. The client states to the nurse, "my wife would not have wanted to live if she were disabled." Based on this statement, which defense mechanism is the client using?

- A) Displacement
- B) Denial
- C) Intellectualization
- D) Identification

**Answer:** https://biology-forums.com/index.php?topic=407264

### Question 2047

The nurse instructs a client on ways to reduce premenstrual difficulty. Which client statement indicates the instruction was beneficial?

- A) The client states the need to increase dietary sugar intake to promote energy.
- B) The client states that guided imagery does not help with the symptoms.
- C) The client states that reducing caffeine intake will help.
- D) The client states the need to increase intake of simple carbohydrates.

**Answer:** https://biology-forums.com/index.php?topic=407245

### Question 2048

While receiving discharge teaching, an adult client recovering from a prostatectomy is distressed to learn that episodes of incontinence may occur. Which should the nurse teach the client to help minimize incontinence?

- A) Fluid restriction
- B) Kegel exercises
- C) Steps to change the Foley catheter bag every day
- D) Proper administration of incontinence medication

**Answer:** https://biology-forums.com/index.php?topic=406088

### Question 2049

An adult client is experiencing paroxysmal supraventricular tachycardia. Which nursing interventions are appropriate based on the data provided? Select all that apply.

- A) Administer intravenous adenosine.
- B) Massage the carotid arteries.
- C) Prepare for cardioversion.
- D) Begin anticoagulation therapy.
- E) Administer a beta blocker.

**Answer:** https://biology-forums.com/index.php?topic=406850

### Question 2050

The nurse is caring for an adolescent client who has just learned she is pregnant. In order to decrease the risk of perinatal loss with this client, the nurse wants to assess the client for specific risk factors. Which assessment questions are most appropriate to determine the client's risk for perinatal loss?

- A) "Do you use any substances such as drugs, alcohol, or tobacco products?"
- B) "When was your last menstrual period?"
- C) "What are your dietary habits?"
- D) "Is this your first pregnancy?"

**Answer:** https://biology-forums.com/index.php?topic=407007
Question 2051
A young adult client is admitted to the emergency department with symptoms of hypothermia. Which data collected during the health history supports this diagnosis? Select all that apply.
A) Walking outdoors in 30°F weather
B) Consuming alcohol
C) Wearing a hat
D) Wearing sandals
E) Standing outdoors during a snow storm without a coat

Question 2052
A nurse caring for a client with disseminated intravascular coagulation (DIC) is reviewing the client's diagnostic tests. Which test result is common in DIC?
A) Increased platelet count
B) Decreased fibrinogen level
C) Decreased prothrombin time
D) Decreased partial thromboplastin time

Question 2053
The nurse is providing discharge instructions to a client being treated for cancer. For which symptoms should the client be instructed to call for help at home? Select all that apply.
A) Difficulty breathing
B) New onset of bleeding
C) Desire to end life
D) Significant increase in vomiting
E) Improved sense of well-being

Question 2054
The nurse is caring for several medical-surgical clients. The nurse has delegated skin care of an incontinent client to new unlicensed assistive personnel (UAP) on the unit. Which action by the nurse will improve effectiveness of the client care provided?
A) Demonstrate the appropriate care needed, then delegate the task for the remainder of the shift.
B) Ask the client if the care was appropriate.
C) Closely observe the UAP each time the care is given.
D) Ask the UAP if the care was given.

Question 2055
A client being treated for newly diagnosed schizophrenia will be discharged to the family home. The family is developing an image of the disease process and expectations of mental health professionals and has reached Stage 2 of family recovery. Which concepts are included in this stage of recovery? Select all that apply.
A) Problem solving
B) Personal and political advocacy
C) Coping
D) Recognition
E) Acceptance

Question 2056
The nurse is planning discharge teaching for a child with epilepsy who is prescribed phenytoin (Dilantin). Which information is important for the nurse to include in these instructions?
A) Take the medication with milk.
B) Brush teeth less frequently.
C) Increase fluid intake.
D) Increase vitamin D intake.
Question 2057

A client asks the nurse how glaucoma develops. Which response by the nurse is appropriate?
A) "People with arthritis develop glaucoma most often."
B) "When the pressure in the eye is high enough to cause optic nerve damage, glaucoma can develop."
C) "Heart disease is a risk factor in the development of glaucoma."
D) "Blue eyes are a risk factor in the development of glaucoma."


Question 2058

The nurse gives discharge instructions to an adult client who sustained a bicycle fall and underwent open reduction and internal fixation of a fractured hip. After the teaching is complete, which statements by the client indicate appropriate understanding of the information presented? Select all that apply.
A) "I only need to use my walker during physical therapy appointments."
B) "I will take my prescribed ibuprofen to decrease the risk for a deep vein thrombosis."
C) "I might experience bruising because of the prescribed warfarin."
D) "I will use my abduction pillow while sleeping to maintain proper hip alignment."
E) "I will use the high toilet seat to prevent excess flexion of my hip."


Question 2059

The nurse is planning care for an older adult client with type 2 diabetes mellitus. Which nursing diagnosis would be most appropriate for this client?
A) Risk for Infection
B) Risk for Falls
C) Ineffective Tissue Perfusion: Cardiac
D) Impaired Tissue Integrity


Question 2060

The nurse is appointed to a clinical-administrative task force studying critical staffing issues and care delivery models for the hospital. Which evidence on the effects of different staffing choices and care delivery models should the task force consider? Select all that apply.
A) Higher nurse-client ratios have been linked to a decrease in the amount of time clients are hospitalized.
B) Research indicates that functional assignment of staff improves the likelihood of meeting clients’ emotional needs.
C) There is little or no research studying nursing ratios and client outcomes.
D) Shared governance is linked to a reduction in adverse outcomes.
E) A higher proportion of registered nurses can reduce the risk of mortality in surgical clients.


Question 2061

A client is admitted with the diagnosis of fever of unknown origin. Which diagnostic tests does the nurse anticipate for this client? Select all that apply.
A) Bone scan
B) Urinalysis
C) CT scan of the abdomen
D) Chest x-ray
E) Complete blood count


Question 2062

The nurse for a urology clinic is planning an in-service about urinary infections for a group of novice nurses. Which should the nurse include in the presentation?
A) Women require a shorter course of antibiotic therapy to manage a urinary tract infection than men.
B) The rate of urinary tract infections is similar between men and women.
C) Straight catheterization is the only way to evaluate for the presence of a urinary tract infection.
D) Men are most likely to experience descending urinary tract infections.


Question 2063
The nurse is preparing to provide care to a group of clients. Which specific areas should the nurse focus in order to prioritize the clients' care needs? Select all that apply.

A) Identifying clients with specific medication times
B) Noting number of licensed staff assigned for the shift
C) Noting which clients have particular safety needs
D) Noting time when the attending physicians make rounds
E) Asking if any clients have complex issues


Question 2064

When palpating the fundus of a woman on her first day postpartum, the nurse finds that the woman's uterus is higher than expected and is deviated to the right. She is not having excessive uterine bleeding. Which is the priority nursing action for this client?

A) Ask the client to void and then reassess fundal height.
B) Ask another nurse to assess the client to verify the findings.
C) Perform a straight catheterization on the client and then reassess fundal height.
D) Notify the client's midwife of this condition.


Question 2065

The nurse is planning care for an infant with congestive heart failure (CHF). What should the nurse include in this child's care?

A) Organize activities to allow for uninterrupted sleep.
B) Monitor respirations during active periods.
C) Give larger feedings less often to conserve energy.
D) Force fluids appropriate for age.


Question 2066

A nurse educator is explaining the idea of health care as a partnership between provider and client. Which are client responsibilities that some hospitals have included in their client bill of rights? Select all that apply.

A) Immediately paying all expenses not covered by insurance
B) Involving your family in your healthcare decisions
C) Accepting the consequences if you fail to comply with instructions given to you
D) Asking questions asked by your healthcare team
E) Reporting accurate and complete information about your health to your healthcare team


Question 2067

The nurse is discussing a new diet prescription with a client who is seeking help to lose weight. The client asks the nurse how to best balance the new diet. Which response by the nurse is most appropriate?

A) "Your diet should consist of 1,250-1,500 calories per day, with 15% of the calories being sources of protein."
B) "Your diet should simply cut 500 calories per day from your normal intake."
C) "Your diet should consist of 1,000-1,200 calories per day, with less than 15% of the total calories coming from fat."
D) "Your diet should be consist of 750-1,000 calories per day, with less than 15% of the total calories coming from fat."


Question 2068

The nurse is providing care for a client of Asian descent who admits to an alcohol addiction. The client admits to being able to hide the addiction from family and friends. Based on this data, which independent nursing intervention is appropriate for this client?

A) Family therapy
B) Assertiveness training
C) Milieu therapy
D) Communication training


Question 2069

The nurse is planning care for a group of clients. Which client has the greatest risk for developing deep venous thrombosis (DVT)?

A) The client admitted with community-acquired pneumonia.
B) The client recovering from knee replacement surgery.
C) The client recovering from laparoscopic gallbladder surgery.
D) The client admitted with new-onset type II diabetes mellitus.

### Question 2070

The nurse on a medical-surgical unit is asked to participate in data collection on skin care for the unit. Which is the rationale for cooperating with this request?

- A) Advance the nurse's practice
- B) Participate in the quality improvement process
- C) Fulfill legal requirements
- D) Prevent problems from arising in the unit


### Question 2071

The nurse identifies the diagnosis Ineffective Peripheral Tissue Perfusion related to decreased arterial flow to extremities as appropriate for a client. Which activity will the nurse recommend in order to improve the client's blood flow?

- A) Elevate the feet while reclining.
- B) Cross the legs at the knees when seated.
- C) Position with the extremities dependent.
- D) Use a heating pad to increase warmth.


### Question 2072

The nurse is caring for a client who is experiencing a systemic infection after a total knee replacement. Which diagnostic tests will be used to validate the presence of this infection? Select all that apply.

- A) Serum electrolyte levels
- B) Urinalysis
- C) Wound culture
- D) White blood cell differential
- E) White blood cell count


### Question 2073

A client in the clinic is being asked to participate in a research study. The client asks why a nursing research study is necessary because research on this subject has already been published by the American Medical Association (AMA). Which goal of nursing research will the nurse share with this client regarding the goal of nursing research?

- A) It validates nursing through medical research.
- B) It supports products used in nursing care.
- C) It supports the medical profession.
- D) It validates nursing care, not medical care.


### Question 2074

The nurse is planning a seminar to instruct community members on ways to reduce the development of chronic kidney disease. Which topics should the nurse include in the seminar? Select all that apply.

- A) Avoid smoking.
- B) Control blood glucose levels in diabetes mellitus.
- C) Avoid eating red meat.
- D) Participate in regular exercise.
- E) Adhere to medication regimen to control hypertension.


### Question 2075

The nurse is providing care to a client in labor who experiences spontaneous rupture of membranes. The fetus is in the vertex position. The nurse notes that the amniotic fluid is meconium stained. Based on this data, which is the priority action by the nurse?

- A) Beginning continuous fetal heart rate monitoring
- B) Administering oxygen at 2 liters per minute
- C) Changing the client's position in bed
D) Notifying the healthcare provider that birth is imminent

Question 2076
A nurse is educating a client with cardiomyopathy about diet choices which are appropriate for the client's condition. Which statement is inappropriate for the nurse to include in the teaching session?
A) "It is important to monitor your sodium intake."
B) "Here is a list of high-fat, high-cholesterol foods to avoid."
C) "Increasing your dietary protein helps with cardiac cell repair."
D) "I have notified the dietitian regarding your condition in order to provide you with more information."

Question 2077
A client being treated for nephritic syndrome is a vegetarian and has a poor oral intake. Which action should the nurse take to meet this client's nutritional needs?
A) Explain that the client will be returning home soon and can resume a preferred diet.
B) Request a dietician to discuss the client's dietary preferences.
C) Request that the healthcare provider prescribe an appetite stimulant.
D) Encourage the client to eat the food provided on the meal trays.

Question 2078
The nurse is providing care to a client on a medical-surgical unit. Which activities will the nurse perform to support this client's spirituality through the use of presence? Select all that apply.
A) Stating personal religious beliefs
B) Being available to the client
C) Sitting quietly while the client cries
D) Listening to the client
E) Reading a newspaper at the nurse's station

Question 2079
A nurse is caring for a client with a fever who is experiencing tachypnea. Which is true regarding this client's condition?
A) One degree of temperature elevation causes an increase in respiratory rate by four breaths per minute.
B) The decrease in prostaglandin production causes the respiratory rate to increase.
C) Although it sometimes occurs, an increased respiratory rate is not a common reaction to fever.
D) One degree of temperature elevation causes an increase in respiratory rate by two breaths per minute.

Question 2080
An older adult client is admitted with pneumonia. Which manifestations would the nurse expect to find when assessing this client? Select all that apply.
A) Respiration of 24
B) Increased appetite
C) Lethargy
D) Hemoptysis
E) Change in level of consciousness

Question 2081
The nurse is caring for a client who is diagnosed with cancer. Which diagnostic tests may be helpful to assist with treatment options? Select all that apply.
A) Tumor markers
B) Stool analysis
C) Physical assessment
D) MRI
E) Urinalysis
Question 2082

The nurse is providing care to a client who has a history of chronic obstructive pulmonary disease (COPD) who wants help and information regarding nicotine addiction and ways to quit smoking. After providing education to this client regarding smoking cessation, which statement indicates appropriate understanding of the information presented?

A) "I will chew sugar-free gum when I want a cigarette."
B) "I will keep a pack of cigarettes in my closet in case I need it."
C) "I will eat a snack when I am feeling nervous."
D) "I will taper off smoking gradually."


Question 2083

A nurse educator is teaching a group of student nurses about newborn skin and factors that relate to this concept. Which statement will the educator include in the teaching session?

A) "The newborn's skin has a greater percentage of underlying subcutaneous fat compared to adults."
B) "The newborn's skin contains more water than an adult's and has loosely attached cells."
C) "The newborn's skin is about 40% to 60% thicker than an adult's skin at birth."
D) "The newborn's thicker skin decreases absorption of harmful chemical substances and topical medications."


Question 2084

A nurse is caring for a client with tuberculosis (TB) who is taking Rifampin for treatment of the disease. Which nursing interventions for this client? Select all that apply.

A) Monitor CBC, liver function studies, and renal function studies for evidence of toxicity.
B) Administer the medication on an empty stomach.
C) Record a baseline visual examination before initiating therapy.
D) Administer the medication with meals to reduce gastrointestinal side effects.
E) Administer the medication by deep intramuscular injection into a large muscle mass.


Question 2085

The nurse is planning care for an older adult client with chronic venous insufficiency. Which will the nurse include in the client's teaching plan?

A) Wear elastic hose as prescribed.
B) Keep the legs dependent as much as possible and elevate only when asleep.
C) Cross legs only at the knees.
D) Standing will prevent the progression of the disease.


Question 2086

The nurse is caring for a client with leukemia. Which treatment should the nurse expect to be prescribed for this client?

A) Electrolyte replacement therapy
B) IV fluid therapy
C) Diuretic therapy
D) Chemotherapy


Question 2087

The nurse knows that communication among healthcare team members is essential during mass casualty events. Which is essential when communicating under these circumstances?

A) Documenting to prevent legal issues
B) Providing concise, accurate, and timely information
C) Coordinating care between management and clinicians
D) Preparing for ethical challenges


Question 2088

The nurse is providing education to a client who wants to quit smoking. Which statements are appropriate for the nurse to include in the teaching
session with this client? Select all that apply.
A) "A piece of nicotine gum should be chewed for 5 minutes of every waking hour then held in the cheek."
B) "There is no adverse risk if the client chooses to smoke while wearing a nicotine patch."
C) "Bupropion (Zyban) is used to suppress the craving for tobacco."
D) "Most persons quit smoking several times before they are successful."
E) "Alternative therapies should be considered to help reduce the stress that accompanies smoking cessation.*

**Question 2089**

A college student attends a seminar on alcohol abuse. Which statement would alert the nurse that the student needs more education?
A) "The children of alcoholics are less likely to become alcoholics."
B) "Married college graduates are less likely to become alcoholics."
C) "Childless people are more likely to become alcoholics than parents."
D) "Native Americans are more likely to become alcoholics."

**Question 2090**

The nurse is conducting a seminar regarding rape-trauma. Which does the nurse include as the underlying issue of most rapists? Select all that apply.
A) Acting out aggression
B) An uncontrollably strong sex drive
C) A desire to play out fantasies
D) A desire to overpower and control
E) The inability to control intense anxiety

**Question 2091**

The nurse is caring for a client who is newly diagnosed with human immunodeficiency virus (HIV). The client asks the nurse if there are ways to protect the client's life partner from getting the HIV virus. After educating the client, which statement indicates the need for further education?
A) "I know I have to practice safer sex with my partner by using a latex condom."
B) "I will not share my razor with my partner."
C) "I can still kiss and hug my partner to show affection."
D) "I know to use an oil-based lubricant to prevent spread of the disease to my partner."

**Question 2092**

A young adult waiter has been treated for viral hepatitis at a health care clinic. Which client outcome indicates the need for additional intervention? Select all that apply.
A) Red scratch marks are noted on the arms and trunk.
B) Social Services notified the Health Department of the occurrence.
C) Return demonstration of hand washing is correctly performed.
D) Client denies abdominal or epigastric pain.
E) Body mass index (BMI) changes from 24 to 21.

**Question 2093**

A client who gave birth to her first child 12 hours ago has the following assessment findings: nausea for 2 hours; boggy fundus that firm with massage; moderately heavy lochia rubra; ecchymotic and edematous perineum; and pain rating of 6 on scale of 1-10. The client's partner is present and supportive. Breastfeeding has been successful three times. Based on this data, which is the priority nursing diagnosis?
A) Deficient Knowledge related to birth of first child
B) Risk for Deficient Fluid Volume secondary to boggy fundus and nausea
C) Readiness for Enhanced Family Coping related to partner involvement
D) Acute Pain related to perineal trauma

**Question 2094**

The nurse is caring for a group of clients on a medical-surgical unit. Which client does the nurse anticipate to be at the greatest risk for alterations in urinary elimination?
A) An 80-year-old male reporting frequent urination at night
Question 2095
A client of Eastern European descent who gave birth to her third child on the previous shift tells the nurse that she wants to get cleaned up and have something to eat so that she can be ready to go home in the morning. Which action by the nurse is appropriate?
A) Suggest that her plans to go home depend upon her physician.
B) Instruct the client to pace herself and that there is no hurry rush to go home.
C) Suggest that the client take advantage of the rest since she has other children at home who will also need her care.
D) Assist the client with self-care requests and check on when the meals will be delivered.

Question 2096
The nurse is discussing goals to relieve pain and fatigue with a client newly diagnosed with fibromyalgia. Which goal statement would be realistic for this client to achieve within 30 days?
A) Get a job outside the home.
B) Join an exercise group.
C) Cook dinner five nights a week.
D) Walk her son to school daily.

Question 2097
The nurse at a health fair is educating clients on risk factors associated with urinary incontinence. Which risk factor does the nurse include as a non-modifiable risk factor for urinary incontinence?
A) Smoking
B) Diabetes
C) Age
D) Obesity

Question 2098
A client who sustained burns to both lower extremities complains to the nurse about feeling frustrated by not being able to provide self-care. Which nursing diagnosis would be appropriate for the client at this time?
A) Powerlessness
B) Ineffective Coping
C) Anxiety
D) Situational Low Self-Esteem

Question 2099
A pediatric nurse is assigned phone triage for the shift. The nurse takes a call from the mother of a 3-month-old infant. The mother tells the nurse that the child has been vomiting and experiencing diarrhea for several days. Which response by the nurse is the most appropriate?
A) “Give your baby 50 mL of glucose water every hour.”
B) “You should bring the infant in to be seen by the doctor.”
C) “Give your baby at least 2 ounces of juice every 2 hours.”
D) “Measure your baby’s urine output for 24 hours and call back tomorrow.”

Question 2100
A pediatric nurse is caring for a toddler-age client at a well-child clinic. When providing education regarding the client's oral health, which topics are appropriate for the nurse to include? Select all that apply.
A) Instructions on brushing the client's teeth once daily.
B) Instructions on eliminating the client's milk consumption.
C) Hazards of fluoride use in tooth development.
D) Instructing the parents that the client needs dental care prior to when the client begins to lose the primary teeth.
E) Parental smoking cessation resources.
Question 2101
The nurse is caring for an older adult client with cholecystitis. The client has been admitted to the hospital for diagnostic testing and pain control. Which nursing diagnosis would be a priority for this client?
A) Anxiety
B) Impaired Comfort
C) Imbalanced Nutrition: Less than Body Requirements
D) Risk for Infection


Question 2102
An adult client with a BMI of 39 who smokes 1 pack of cigarettes per day is admitted to the hospital with chest pressure. After myocardial infarction is ruled out, the client is diagnosed with erosive esophagitis through upper GI endoscopy. The client is now refusing all medications and states "I'm not getting hooked on any pills." What would the nurse recommend for the multidisciplinary collaborative plan? Select all that apply.
A) Enlist the client's son to elevate the foot of the client's bed at home 6 inches.
B) Omit the pharmacist notification of the Multidisciplinary Team meeting about the client.
C) Interview the client and spouse for a 24-hour recall of usual food content, intake, and meal times.
D) Assess the client's readiness for change in smoking cessation and weight loss.
E) Offer the client a surgical consult to reduce the necessity of medication.


Question 2103
The nursing instructor is conducting a class regarding nursing ethics with a group of first-year nursing students. The instructor determines that the students have retained the necessary information when the student makes which statement regarding the ANA Code of Ethics?
A) "It is used by all health care professionals."
B) "It forms the basis for possible lawsuits."
C) "It guides nurses in their professional behavior and relationships."
D) "It is the only code of ethics available for nurses."


Question 2104
During a treatment meeting on an oncology unit, the nurse learns that a client is scheduled for chemotherapy before and after surgery. What are the purposes for this client to receive chemotherapy at these specific times? Select all that apply.
A) Eradicate all cancer cells.
B) Kill remaining cancer cells.
C) Shrink the tumor.
D) Improve wound healing.
E) Allow the immune system to kill cancer cells.


Question 2105
The nurse working in a community hospital is caring for a client who does not seem to be responding well to the current plan of care that has been implemented by the nursing team. Which actions by the nurse are appropriate based on this data? Select all that apply.
A) Trying a different approach to care against policy
B) Networking online with other nurses giving similar care
C) Asking the doctor for a new nursing approach to care
D) Accessing research journals for evidence that would support a change in the plan of care
E) Proposing a nursing research project to the manager


Question 2106
A supervisor on a medical-surgical unit excels at scheduling staff and allocating resources. However, when new policies are being implemented, the supervisor has great difficulty getting staff cooperation. Based on this data, why is the supervisor considered a manager and not a leader?
A) A leader clarifies the organizational structure.
B) A leader always assigns and coordinates tasks.
C) A leader exerts influence by using a flexible combination of personal behaviors and strategies.
D) A leader must use contingency planning.
Question 2107

A client who has experienced domestic violence in the past has decided to stop participating in counseling. Which client statement would indicate that therapy has been effective?
A) "Everyone knows what my problems are, and there is nothing I can do about it."
B) "It is so draining to deal with the same painful issues all of the time."
C) "My friends tell me that I have improved so this is a good time to stop."
D) "I am functioning fine now but I know that when problems come up again, I will ask for help."


Question 2108

The nurse is reviewing the discharge instructions for administration of home medications with an older adult client. In considering the normal changes experienced with aging, which activity should the nurse incorporate into the teaching plan?
A) Considering holding sessions for longer periods than usual so the client can learn
B) Giving written materials to compensate for short-term memory losses
C) Using tools that repeat the information until the information is understood
D) Providing instruction to relatives so that the client will not need to learn everything


Question 2109

The nurse is caring for a child with disseminated intravascular coagulation (DIC). Which is a priority intervention for this child?
A) Preparation for radiograph procedures
B) Maintenance of skin integrity
C) Frequent ambulation
D) Monitoring of fluid restriction


Question 2110

The nurse is caring for a client with cancer who is struggling with chronic pain. The nurse tells the client, "It is normal to feel frustrated about the discomfort." Which skill associated with the working phase of the nurse-client relationship does the nurse’s statement best reflect?
A) Genuineness
B) Concreteness
C) Confronting
D) Respect


Question 2111

An older adult client is diagnosed with a left cerebral hemorrhage. To meet the needs of the client and family, the nurse will provide teaching in which areas? Select all that apply.
A) Transfer techniques
B) How to use a sign board
C) Information about impulse control
D) Nutrition support
E) Time adjustment to complete activities


Question 2112

During a postpartum examination of a client who delivered an 8-pound newborn 6 hours ago, the nurse assesses the following: fundus firm and at the umbilicus, and moderate lochia rubra with a steady trickle of blood noted from the vagina. Which assessment finding requires immediate follow-up?
A) Steady trickle of blood
B) Fundus at the umbilical level
C) Firm fundus
D) Moderate lochia rubra


Question 2113
The nurse is caring for a child with heart failure (CHF). Which clinical manifestations does the nurse anticipate when assessing this child? Select all that apply.
A) Weight loss
B) Increased blood pressure
C) Bradycardia
D) Shortness of breath
E) Tachycardia

Question 2114

The nurses in a nursing home have a unique nursing team consisting of all four generational cohorts. Which is the best use of each generation's contributions by nursing management?
A) The contributions from each generation's strengths
B) Those of the adaptable, techno-savvy Generation Xers
C) Those of the hardworking, loyal veterans
D) Those of the young, optimistic Millennials

Question 2115

A client was discharged after hospitalization for acute pancreatitis with instructions on the use of analgesics, cautions on the importance of avoiding alcohol and smoking, and recommendations for a low-fat diet. Which outcomes would indicate that the client has implemented the recommendations? Select all that apply.
A) The client remains free from alterations in fluid balance.
B) The client returns to work.
C) The client is free from nausea.
D) The client is free from alterations in nutritional status.
E) The client experiences reduction or elimination of pain.

Question 2116

A newly admitted client with increased intracranial pressure caused from a head injury has a Glasgow Coma Scale (GCS) score of 6. Which action by the nurse is the most appropriate?
A) Get a complete history from the client.
B) Treat the client's pain.
C) Assess airway, breathing, and circulation.
D) Assess patency of the Foley catheter.

Question 2117

A nurse is explaining the need to obtain laboratory tests on client who has an infection and is of a cultural group different from the nurse's. During the interview, the client averts eye contact and refrains from answering questions for long periods of time. Which does this behavior indicate to the nurse?
A) In this client's culture direct eye contact may show disrespect.
B) Leave the room and come back after having learned more about this particular culture.
C) Have another nurse finish the interview, because there is something uncomfortable the client senses.
D) Come back at a different time, when the client is feeling more communicative.

Question 2118

A client, who has multiple sclerosis, is complaining of fatigue. What should the nurse recommend?
A) Advise the client to begin a high-intensity exercise program.
B) Tell the client that she will have to adjust to fatigue and that, with MS, nothing will help.
C) Tell the client to begin a mild-to-moderate exercise program, with the approval of her physician.
D) Suggest that the client restrict her activity as much as possible.

Question 2119

The nurse identifies that a client with macular degeneration is experiencing disturbed sensory perception. What interventions should the nurse plan for this client? Select all that apply.
A) Instruct on increasing fruits and vegetables in the diet.
B) Restrict fluids.
C) Provide information learning how to read Braille.
D) Maintain on bed rest.
E) Provide large-print reading materials.

Question 2120
An adolescent with otitis media is experiencing extreme pain. Which should the nurse emphasize to address the diagnosis of Acute Pain for this client?
A) Report abrupt relief of pain immediately.
B) Continue plans for air travel.
C) Report increased pain when moving the outer ear.
D) Apply a cold compress to the affected ear.

Question 2121
The client is receiving risperidone (Risperdal) for the treatment of schizophrenia. Which client statement indicates the medication is effective?
A) "I will start going to group therapy."
B) "I am not hearing the voices anymore."
C) "I promise not to skip breakfast anymore."
D) "I feel better and I am ready to go home."

Question 2122
A nursing supervisor has been told to ensure that the hospital's new electronic records system is properly implemented on the nursing unit. Which actions by the supervisor are the best use of exercising the managerial role? Select all that apply.
A) Continuing to use paper records until the staff is completely comfortable with the new system
B) Providing regular training sessions in the new system
C) Creating a "buddy" system that pairs staff members who are less technologically comfortable with staff members who may require more assistance with the new system
D) Establishing a regular spot check of each staff member's effective use of the system
E) Informing staff that the new system is optional

Question 2123
The nurse is planning care for a client with peripheral vascular disease (PVD) who is at risk for Impaired Skin Integrity. Which intervention is appropriate for the nurse to include in the plan of care?
A) Encourage bed rest with legs elevated on pillows.
B) Keep the skin clean and dry, and moisturize areas of dryness.
C) Restrict fluids.
D) Consult a dietitian for low-protein diet.

Question 2124
The nurse is providing care for a client diagnosed with chronic obstructive pulmonary disease (COPD). Which interventions are appropriate in order to control the client's breathing pattern? Select all that apply.
A) Teach visualization and meditation.
B) Provide oxygen 2 liters nasal cannula.
C) Deep breathing and coughing every hour.
D) Instruct in abdominal breathing.
E) Instruct in pursed-lip breathing.

Question 2125
An adult client tells the nurse, "No matter what I do, I never can make my parents happy." Which action by the nurse may enhance the client's self-concept?
A) Suggest that the client reduce the amount of time spent with her parents.
Question 2126
A novice nurse has just completed orientation in the pediatric intensive care unit (PICU). The nurse is striving to attain the required skill level to care for children returning from open-heart surgery. The mentor want to assist the novice nurse in reaching this goal. Which assignment would allow this to occur?
A) A pediatric client who is recovering from heart surgery on the step down unit.
B) A pediatric client who requires emergency resuscitations.
C) A pediatric client who is recovering from open heart surgery and requires discharge teaching.
D) A critically ill pediatric client who is recovering from a major abdominal surgery.

Question 2127
The nurse is evaluating the care received by a client who has a hearing deficit. Which client statement indicates that care has been effective?
A) "I might use the hearing aid when I go shopping."
B) "I hear better when the television volume is raised."
C) "I ask others to face me when they talk, as I can hear them better."
D) "I will change the battery in my hearing aid once a month."

Question 2128
A student nurse studying informatics would be aware that which are examples of clinical decision support tools? Select all that apply.
A) Clinical guidelines
B) Documentation templates
C) Focused data reports
D) Condition-specific order sets
E) Budgeting spreadsheets

Question 2129
The nurse is conducting a health history for a client and wants to determine the client's alcohol use. What question from the nurse will provide the greatest amount of information?
A) "Is alcohol use a concern for you?"
B) "How many alcoholic beverages do you drink each day?"
C) "Drinking doesn't cause any problems for you, does it?"
D) "Are you a heavy drinker?"

Question 2130
A clinic nurse is assessing a client who is experiencing crisis. The nurse needs to determine the client’s immediate needs. Which is the priority action by the nurse?
A) Explore perceptions of the crisis.
B) Scan for physical distress.
C) Assess for immediate safety needs.
D) Develop a follow-up plan.

Question 2131
A nurse is caring for a child who has been diagnosed with attention-deficit/hyperactivity disorder (ADHD). The client's healthcare provider has prescribed amphetamine-dextroamphetamine (Adderall) to treat the child's disorder. Which statement regarding the use of the medication is appropriate for the nurse to include in the medication teaching?
A) "This medication may increase the risk of psychosis."
B) "Your child's liver function should be monitored with this medication."
C) "This medication has less abuse tendency because it is not a stimulant."
D) "Your child's growth may be delayed with this medication."
Question 2132
The nurse is caring for a client who is experiencing anaphylactic shock following the administration of a medication. Which position is the most appropriate for the nurse to place the client based on this data?
A) Trendelenburg position
B) Supine position
C) Flat, with legs slightly elevated
D) High Fowler position

Question 2133
The nurse is providing care for a client admitted during an acute exacerbation of asthma. Which medication does the nurse anticipate to relieve the acute symptoms exhibited by the client?
A) Oral anticholinergics
B) Inhaled short-acting beta-agonists
C) Inhaled long-acting beta-agonists
D) Oral corticosteroids

Question 2134
A female client is prescribed an androgen medication to treat an estrogen-sensitive type of breast cancer. What should the nurse instruct this client about the medication? Select all that apply.
A) Monitor weight weekly.
B) It must be taken with food.
C) There is an increased risk of multiple births.
D) Report calf pain or dyspnea.
E) Secondary male sex characteristics may develop.

Question 2135
A pediatric nurse is educating the client with sickle cell disease and the client's family regarding the genetic implications of the disease. Which information is inappropriate for the nurse to share with the client's family?
A) If both parents have the trait, then with each pregnancy, the risk of having a child with the disease is 50%.
B) The sickle cell gene may have originated to protect against lethal forms of malaria.
C) The disorder is transmitted as an autosomal recessive genetic defect.
D) In African-Americans, sickle cell disease occurs in 1 out of every 500 births.

Question 2136
During an assessment, the nurse becomes concerned that a client is at risk for developing metabolic alkalosis. What did the nurse assess that caused this concern?
A) Daily ingestion of a banana with breakfast
B) Daily use of prescribed NSAIDs for arthritic pain
C) Daily use of sodium bicarbonate for gastric upset
D) Daily weight consistent

Question 2137
A client who is attending a Narcotics Anonymous (NA) program asks the nurse what the most important initial goal of attending the meetings is. When responding to the client, which will the nurse take into account?
A) To learn problem-solving skills
B) To make amends to people they have hurt
C) To admit to having a problem
D) To take a moral inventory of self
Question 2138

The nurse is assessing a client for spiritual distress. Which observations indicate that a client is experiencing spiritual distress? Select all that apply.

A) The client states he has lost his faith in God since he’s gotten ill.
B) The client is crying, pacing, and moving his head from left to right.
C) The client is sitting in a chair before breakfast reading the Bible.
D) The client is watching a religious program on the television.
E) The client is overheard arguing with clergy about the existence of God.


Question 2139

The nurse observes a toddler-age client, admitted with possible respiratory syncytial virus (RSV) bronchiolitis, grunting with expiration. Which action by the nurse is appropriate?

A) Limit fluids.
B) Suction the airway to relieve the obstruction.
C) Assist the child to clear the nasal passages.
D) Lay the child on his back.


Question 2140

A client with clinical depression asks the nurse for suggestions on how to improve the quality of sleep. After reviewing the client's history, which suggestion by the nurse is the most appropriate? Select all that apply.

A) Adjust the temperature in the room to a comfortable level.
B) Avoid smoking before bedtime.
C) Change the time of aerobic exercise to 1 hour prior to sleep.
D) Avoid the use of alcohol late in the evening.
E) Consume a cup of tea before bed to relax.


Question 2141

The nurse is planning to teach food-drug interactions for a client who was recently diagnosed with hyperthyroidism. Which food should the nurse teach the client to avoid?

A) Soy sauce
B) Milk products
C) Caffeine-free soda
D) High-calorie foods


Question 2142

A nursing student is preparing an educational program on hemolytic anemia for the residents of an assisted-living center. Which extrinsic causes of hemolytic anemia should the student include in the program? Select all that apply.

A) Bacterial infection
B) Ibuprofen use
C) Thalassemia
D) Acetaminophen use
E) Prosthetic heart valves


Question 2143

The nurse is providing care for a client who is experiencing an alteration in mobility. Which independent nursing intervention is appropriate?

A) Identifying necessary modifications to the home environment
B) Administering a prescribed NSAID
C) Instructing on the importance of proper nutrition and an active life style
D) Prescribing a skeletal muscle relaxant


Question 2144
A nurse is teaching environmental control to the parents of a child with asthma. Which statement by the parents indicates effective teaching?
A) "We will replace the carpet in our child's bedroom with tile."
B) "We'll be sure to use the fireplace often to keep the house warm in the winter."
C) "We're glad the dog can continue to sleep in our child's room."
D) "We'll keep the plants in our child's room dusted."

**Question 2145**

The nurse is concerned that a school-age client has undiagnosed type 1 diabetes mellitus and is experiencing diabetic ketoacidosis (DKA). What did the nurse assess in the client to come to this conclusion? Select all that apply.
A) Sluggish bowel sounds
B) Blurred vision
C) Irregular heartbeat
D) Dry mucous membranes
E) Sunken eye sockets

**Question 2146**

A nurse working in the pediatric intensive care unit (PICU) is caring for a pediatric client with human immunodeficiency virus (HIV). The client is severely symptomatic with the additional diagnoses of lymphoma and wasting syndrome. Based on this data, which clinical stage of HIV does the nurse anticipate for this client?
A) Category A
B) Category B
C) Category C
D) Category N

**Question 2147**

An adult client recently diagnosed with multiple sclerosis is a full-time aerobics exercise instructor at a local fitness center. Which statements contain the correct information to give the client when answering specific questions about lifestyle? Select all that apply.
A) "You will tolerate exercise better in an air-conditioned room."
B) "Hyperbaric oxygen treatment is recommended prior to vigorous physical exercise."
C) "Acupuncture may benefit some of your symptoms."
D) "You will be able to maintain your exercise teaching schedule."
E) "Drinking cold water is recommended during exercise."

**Question 2148**

An older adult client diagnosed with cardiomyopathy reports having to rest between activities during the day. The client asks the nurse why this is occurring. Which reason should the nurse include in the response to the client?
A) Increased blood pressure
B) Increased stroke volume
C) An elongated and dilated aorta
D) Decreased cardiac output

**Question 2149**

A client is receiving procainamide hydrochloride (Pronestyl) for treatment of a dysrhythmia. Which outcome indicates the client is adhering to the provided medication instruction?
A) The client will take the medication with food.
B) The client will take the medication as directed, even when feeling well.
C) The client will take the medication on an empty stomach.
D) The client will monitor the pulse and not take the medication if the pulse is less than 60.

**Question 2150**

A nurse providing hospice care for an older adult client. The nurse is approached by the client's adult child. The adult child believes that her other parent, who is in a nursing home, is being neglected. What suggestions can the nurse offer in this situation? Select all that apply.
A) Contact the consumer protection agency.
B) Contact the client advocate at the nursing facility.
C) Contact the local newspaper.
D) Report suspicions to the licensing agency.
E) Encourage the daughter to immediately place her mother in a different facility.

**Question 2151**

A client with newly diagnosed otitis media tells the nurse that the left ear has been aching for weeks. Since this health problem has been untreated for so long, which additional problem is this client at risk for developing?

A) Influenza
B) External otitis
C) Meningitis
D) Pneumonia


**Question 2152**

The nurse on the mother-baby unit is confronted by a client who states, "I know my rights and you have to do what I tell you!" Which response by the nurse is most appropriate?

A) "Do you want me to take the baby to the nursery so you can calm down?"
B) "Why do you feel angry...did I do something you did not like?"
C) "I don't mind doing anything within reason, but you have a responsibility to be considerate to the staff as well."
D) "That statement is not included in your patient rights; don't yell at me."


**Question 2153**

The nurse suspects that the client is experiencing a reaction to a specific antigen. Which laboratory result supports the conclusion made by the nurse?

A) 2% eosinophils in the WBC count
B) Patch test with a 1-inch area of erythema
C) Indirect Coombs' showing no agglutination
D) Rh antigen with negative results


**Question 2154**

A nurse educator is teaching student nurses about methods of cellular transport. When instructing on passive transportation, which information will the nurse include in the teaching plan?

A) Facilitated diffusion
B) Exocytosis
C) Phagocytosis
D) Endocytosis


**Question 2155**

An adolescent client with fetal alcohol syndrome was arrested for assaulting another teenager after being distracted and missing the school bus. Which is the most likely reason for the adolescent's behavior?

A) Dislike of the other teenager.
B) Anger over being distracted.
C) Fetal alcohol syndrome.
D) Fetal alcohol syndrome and an environmental stressor.


**Question 2156**

During the assessment of a client, the nurse finds that the client's lower extremities are both warm, sensation is intact, and motion is unrestricted. What does this finding suggest to the nurse?

A) Cartilage connecting bones has a good blood supply.
B) Smooth muscle attached to bones via ligaments will require further assessment.
C) Skeletal muscle attached to bones via tendons is performing correctly.
Question 2157

A client has an excoriated skin area with drainage. Which diagnostic test does the nurse anticipate to diagnose the skin lesion?

A) Culture
B) Wood's lamp
C) Skin biopsy
D) Patch test


Question 2158

A home health nurse is planning care for an adult client being discharged from the hospital after experiencing complications of diabetes mellitus. The client requires an extensive dressing change twice a day, help with activities of daily living, and comprehensive education. The nurse is coordinating home visits from aides and therapists. Which role is the nurse assuming by coordinating this client’s care?

A) Case manager
B) Collaborator
C) Health educator
D) Health promoter


Question 2159

The nurse is assessing an older adult postmenopausal client. Which question should the nurse ask to assess for signs of osteoporosis?

A) "Are you having problems with swelling in your feet?"
B) "Have you experienced any palpitations?"
C) "Is constipation a problem for you?"
D) "Are you having any low back pain?"


Question 2160

The nurse assumes care for a client who was brought to the hospital after a morphine overdose. What acid-base imbalance does the nurse expect to observe in this client?

A) Metabolic alkalosis
B) Respiratory alkalosis
C) Respiratory acidosis
D) Metabolic acidosis


Question 2161

The nurse is preparing to assess a client when one of the client’s family members begins showing symptoms of a latex sensitivity. Which action by the nurse is the most appropriate?

A) Ask the family member to leave the unit.
B) Wait until Monday to report the problem to the supervisor of the unit.
C) Obtain latex-free products for the client’s room.
D) Transfer the client to a department that does not use latex products.


Question 2162

A charge nurse is making assignments for the shift and notes that a client from a different culture was recently admitted and will require a thorough admission assessment during the upcoming shift. Which generation of nurse is likely to be the most culturally sensitive and the best choice for this client assignment?

A) The baby boomer nurse
B) The Millennial nurse
C) The veteran nurse
D) The Generation X nurse

Question 2163
A nurse is educating a client with anemia about the pathophysiological mechanisms of anemia. Which should be excluded in the nurse’s teaching plan for this client?
A) Altered hemoglobin synthesis.
B) Altered DNA synthesis.
C) Bone marrow failure.
D) Decreased hemolysis.

Question 2164
While caring for a client with respiratory alkalosis caused by hyperventilation, the nurse decides that having students in the room may increase the client's anxiety and decides to assign another client for care. Which type of knowledge is the nurse demonstrating when assigning another client for care?
A) Personal
B) Aesthetic
C) Creative
D) Empirical

Question 2165
What statement made by the client would indicate understanding of discharge teaching for self-care after hospitalization for acute pancreatitis?
A) "I will take the antibiotics for 2 weeks."
B) "I will avoid alcoholic beverages."
C) "I will get immunized prior to my vacation."
D) "I will avoid onions, caffeine, and spices."

Question 2166
The nurse is providing teaching for an inpatient lupus support group meeting. Which group behaviors indicate the teaching was effective?
A) The group avoids discussion about lupus signs and symptoms.
B) The group appears self-conscious when asked questions about lupus.
C) Group members are tentative in expressing feelings to the group.
D) The group members appear relaxed and interested in the topic.

Question 2167
The nurse instructs a school-age client how to use a peak flow meter to monitor asthma. The client was frustrated at first but now is able to state the reason for using the meter on a daily basis. Which response by the nurse is most appropriate when dealing with the growth and development characteristics of the preadolescent?
A) "Maybe you could make a game out of the daily use of your meter."
B) "It's too bad that you don't want to use the meter; it's just something you'll have to do."
C) "Think of using the meter as one of your daily chores."
D) "You should feel very proud of yourself for understanding and using your meter."

Question 2168
A nurse working in the newborn nursery is assessing a term baby for congenital heart defects. Which clinical manifestations would indicate an atrial septal defect (ASD)? Select all that apply.
A) Mitral valve regurgitation with cleft on mitral valve
B) Midsystolic murmur at lower right sternal border
C) Pulmonary artery hypotension
D) S1 heart tone may be split due to forceful left ventricular contraction.
E) Congestive heart failure

Question 2169
A client is experiencing severe pain in the left lower quadrant of the abdomen that is rated as a 10 on a pain scale of 0-10. The client is also experiencing nausea, vomiting, and restlessness. Based on this data, the nurse concludes that the client is experiencing which phenomenon?
A) Chronic pain
B) Acute pain
C) Fibromyalgia pain
D) End-of-life pain

Question 2170

While teaching a wellness class on the warning signs of stroke, a participant asks the nurse, “What’s the most important thing for me to remember?” What is an appropriate response by the nurse?
A) “Call 911 if you notice a gradual onset of paralysis or confusion.”
B) “Know your family history.”
C) “Be alert for sudden weakness or numbness.”
D) “Keep a list of your medications.”

Question 2171

The nurse is providing care to a client who is diagnosed with mild benign prostatic hyperplasia (BPH). Which lifestyle change is appropriate for this client?
A) Increasing caffeine intake
B) Decreasing alcohol intake
C) Using over-the-counter antihistamines
D) Urinating at first urge

Question 2172

A nurse educator is planning a class for a group of nursing students regarding risk management. Which information should the educator include in this presentation? Select all that apply.
A) Risk management empowers clients.
B) Risk management assures that nurses are truthful.
C) Risk management examines past mistakes and identifies potential hazards.
D) Risk management seeks to prevent harm.
E) Risk management controls the cost of supplies.

Question 2173

The nurse is planning care for a client with erectile dysfunction. What should the nurse include in this client’s plan of care? Select all that apply.
A) Names of psychologists with experience in treating the disorder
B) Information on exact cause
C) Reason for disorder as being side effect of prescribed medication
D) Types of devices and surgeries available to help with the disorder
E) Information on medications for treatment

Question 2174

List the pathophysiology processes involved in appendicitis in sequential order.
A. The appendix becomes distended with fluid secreted by its mucosa.
B. Obstruction of the proximal lumen of the appendix is apparent.
C. Purulent exudate formed causes further distention of the appendix.
D. Pressure within the lumen of the appendix increases.
E. Tissue necrosis and gangrene result.

Question 2175

The nurse is evaluating the success of wellness care provided to a new family in the community. Which observations indicate that care has been successful? Select all that apply.
A) The family spends every Saturday afternoon participating in physical activities.
B) The children are observed eating donuts for breakfast.
C) The youngest child squints when reading school work.
D) All family members have up-to-date immunizations.
E) The oldest child does not wash his hands before eating.


**Question 2176**

The nurse is caring for a client who will be discharged with an indwelling catheter. The nurse has provided education to the client and family in regards to catheter care once the client is discharged. Which client or family action indicates a correct understanding of the information presented?
A) Restricting the amounts of fluids per day
B) Hanging the drainage bag on the towel rod
C) Taking a shower each day instead of taking a tub bath
D) Emptying the drainage bag twice a day


**Question 2177**

A client with metabolic acidosis has been admitted to the unit from the emergency department (ED). The client is experiencing confusion and weakness. Which nursing intervention is the priority for this client?
A) Administering sodium bicarbonate
B) Providing the client with appropriate skin care
C) Placing the client in a high-Fowler's position
D) Protecting the client from injury


**Question 2178**

The nurse is caring for an infant who is admitted for possible pyloric stenosis. When assessing the infant, which actions are appropriate? Select all that apply.
A) Observe the infant's abdomen.
B) Auscultate bowel sounds.
C) Pass a nasogastric tube.
D) Palpate the right upper quadrant of the abdomen.
E) Provide oral feeding.


**Question 2179**

An operating room (OR) nurse notices that the nurse-anesthesiologist for the next scheduled surgery seems to be unsteady. When the OR nurses comes closer to the anesthesiologist, a strong odor of alcohol is noted. Which actions by the OR nurse are appropriate? Select all that apply.
A) Follow the state board guidelines.
B) Decide that a professional coworker is unlikely to come to the OR impaired.
C) Assume that the surgeon is handling any problem.
D) Respect the privacy of the anesthesiologist.
E) Immediately report it to a supervisor.


**Question 2180**

The client with diabetes mellitus reports having difficulty trimming the toenails because they are thick and ingrown. What should the nurse recommend to this client?
A) Offer to file the tops of the nails to reduce thickness after cutting.
B) Make an appointment with a nail shop for a pedicure.
C) Cut the nails straight across with a clipper after the bath.
D) Make an appointment with a podiatrist.


**Question 2181**

The nurse is instructing a client who is prescribed ipratropium bromide (Atrovent) for asthma. Which should be included in this client's teaching? Select all that apply.
A) Rinse the mouth after taking this medication.
B) Use hard candy or drink extra fluids to help with a dry mouth.
C) Take on an empty stomach.
D) Take with meals or a full glass of water.
E) Take no more than the prescribed number of doses each day.

**Question 2182**

A nurse is caring for a client who is scheduled to undergo diagnostic testing to determine the cause of dermatitis. When educating the client about diagnostic testing, which statement by the nurse is appropriate?

A) “Skin prick and skin injection tests are used to test for delayed reactions.”
B) “The patch from the patch test is usually removed after 2 weeks.”
C) “In patch testing, an adhesive patch with common allergens is placed on your back.”
D) “You may shower or exercise while the patch from the patch test is in place.”


**Question 2183**

The nurse includes information regarding long-term care placement in the discharge materials for the family of a client newly diagnosed with Alzheimer disease. Which is the rationale for providing this information to the family at this time?

A) Long-term care placement is inevitable with this diagnosis.
B) Early introduction to long-term options will allow the client and family time to make a more informed decision.
C) It often takes 6 to 12 months for an individual with Alzheimer disease to establish a successful transfer to a facility, and this will allow adequate time.
D) It's better to address the issue of placement now instead of later.


**Question 2184**

A parent of a toddler-age child is explaining to the nurse that the family wishes to raise the child to reflect their spiritual beliefs. According to Westerhoff's stages of faith, which should the nurse advise the parent to help the child grow in the family's faith?

A) Baptize the child in the parents’ faith.
B) Read spiritually oriented books to the child.
C) Take the child to ceremonies of their faith.
D) Follow and live the faith of their choice.


**Question 2185**

The nurse is evaluating care provided to a client with contact dermatitis. Which observation indicates that treatment has been effective?

A) The client has areas of excoriation on the arms and anterior legs from scratching during sleep.
B) The client is observed walking in the hallway.
C) The client has reduced areas of contact dermatitis with evidence of skin healing.
D) The client is fatigued from inadequate sleep due to pruritus.


**Question 2186**

The nurse is completing a morning assessment on an older adult Asian client. Assessment findings reveal circular red welts over the client's upper back with several bruised areas. Which nursing action is the most appropriate?

A) Contact the client's family.
B) Call the healthcare provider immediately.
C) Contact adult protective services.
D) Assess the client's spiritual beliefs.


**Question 2187**

A client diagnosed with chronic obstructive pulmonary disease (COPD) has a pulse oximetry reading of 93%, increased red blood and white blood cell count, temperature of 101°F, pulse 100 bpm, respirations 35 bpm, and a chest x-ray that showed a flattened diaphragm with infiltrates. Based on this data, which prescription does the nurse question for this client?

A) Oxygen by nasal cannula at 3-4 liters/minute
B) Bronchodilators such as an adrenergic stimulating drugs or anticholinergic agents
C) Antibiotic therapy
D) Nonsteroidal anti-inflammatory agents
Question 2188

The nurse identifies the nursing diagnosis of chronic pain as being appropriate for a client with fibromyalgia. Which manifestation did the client most likely report that caused the nurse to select this diagnosis?
A) Pain from a severe skin rash  
B) Acute chest pain  
C) Tender points in the knees  
D) Pain from eyestrain


Question 2189

A pediatric nurse is caring for an 18-month-old client. While making rounds the nurse enters the room and finds the infant's father violently shaking the infant. The father attempts to make it appear as though the infant was choking. Upon further assessment the nurse notes bruised areas on the infant's arms and legs. What is a priority action for the nurse to take?
A) Discuss what she witnessed with the other nurses.  
B) Report what she witnessed and assessed to child protective services.  
C) Report what she witnessed and assessed to the local law enforcement agency.  
D) Discuss what she witnessed with the infant's mother.


Question 2190

The nurse is providing care to a client who is experiencing constipation. The healthcare provider prescribes Metamucil, a bulk-forming laxative. Which is a nursing consideration when administering this medication to the client?
A) Administering rectally  
B) Assessing for tardive dyskinesia  
C) Offering sufficient water  
D) Using to treat acute constipation


Question 2191

A client with a suspected transient ischemic attack (TIA) presents to the emergency department with aphasia. Based on this data, the nurse plans care based on ischemia to which portion of the brain?
A) Posterior cerebral artery  
B) Left hemisphere of the brain  
C) Middle cerebral artery  
D) Right hemisphere of the brain


Question 2192

When auscultating the lungs of a client experiences dyspnea, the nurse hears a low-pitched sound that is continuous throughout inspiration. What does this lung sound indicate to the nurse?
A) Narrow trachea passages  
B) Blocked large airway passages  
C) Inflamed pleural surfaces  
D) Narrow bronchi