

PRACTICE QUESTION (SET-23)

1. A 20-year-old man develops anemia after being treated for a urinary tract infection. A peripheral blood smear shows RBC lysis and precipitates of hemoglobin within the RBCs. Which of the following drug classes most likely caused his hemolytic anemia?
 - (A) Aminoglycosides
 - (B) Fluoroquinolones
 - (C) Macrolides
 - (D) Sulfonamides
2. A 49-year-old man presents to the emergency department complaining that "my skin has turned yellow." Physical examination reveals the man is significantly jaundiced. He has no abdominal pain and has a negative Murphy's sign. The physician is concerned that he can feel the patient's gallbladder and orders a CT scan. What is the most likely cause of this patient's jaundice?
 - (A) Acute hepatitis
 - (B) Choledocholithiasis
 - (C) Cholelithiasis
 - (D) Pancreatic cancer
3. Which of the following conditions is associated with elevated serum chloride levels?

A cystitis	B diabetes
C eclampsia	D hypertension
4. In the extracellular fluid, chloride is a major:
 - A compound
 - B ion
 - C anion
 - D cation
5. Nursing intervention for the patient with hyperphosphatemia include encouraging intake of:
 - A amphogel
 - B Fleets phospho-soda
 - C milk
 - D vitamin D
6. Etiologies associated with hypocalcemia may include all of the following except:
 - A) renal failure
 - B) inadequate intake calcium
 - C) metastatic bone lesions
 - D) vitamin D deficiency
7. Which of the following is not an appropriate nursing intervention for a patient with hypercalcemia?
 - A) administering calcitonin
 - B) administering calcium gluconate
 - C) administering loop diuretics
 - D) encouraging ambulation
8. A patient in which of the following disorders is at high risk to develop hypermagnesemia?
 - A) insulin shock
 - B) hyperadrenalism
 - C) nausea and vomiting
 - D) renal failure
9. Which of the following is the most important physical assessment parameter the nurse would consider when assessing fluid and electrolyte imbalance?
 - A) skin turgor
 - B) intake and output
 - C) osmotic pressure
 - D) cardiac rate and rhythm
10. Insensible fluid losses include:
 - A) urine
 - B) gastric drainage
 - C) bleeding
 - D) perspiration
11. Which of the following intravenous solutions would be appropriate for a patient with severe hyponatremia secondary to syndrome of inappropriate antidiuretic hormone (SIADH)?
 - A) hypotonic solution
 - B) hypertonic solution
 - C) isotonic solution
 - D) normotonic solution
12. Aldosterone secretion in response to fluid loss will result in which one of the following electrolyte imbalances?
 - A) hypokalemia
 - B) hyperkalemia
 - C) hyponatremia
 - D) hypernatremia
13. When assessing a patient for signs of fluid overload, the nurse would expect to observe:
 - A) bounding pulse
 - B) flat neck veins
 - C) poor skin turgor
 - D) vesicular
14. The physician has ordered IV replacement of potassium for a patient with severe hypokalemia. The nurse would administer this:
 - A) by rapid bolus
 - B) diluted in 100 cc over 1 hour
 - C) diluted in 10 cc over 10 minutes
 - D) IV push

15. Which of the following findings would the nurse expect to assess in a patient with hypokalemia?
 - A) hypertension
 - B) pH below 7.35
 - C) hypoglycemia
 - D) hyporeflexia
16. Vien is receiving oral potassium supplements for his condition. How should the supplements be administered?
 - A) undiluted
 - B) diluted
 - C) on an empty stomach
 - D) at bedtime
17. To determine if a patient's respiratory system is functioning, the nurse would assess which of the following parameters:
 - A. respiratory rate
 - B. pulse
 - C. arterial blood gas
 - D. pulse oximetry
18. Which of the following conditions is an equal decrease of extracellular fluid(ECF) solute and water volume?
 - A. hypotonic FVD
 - B. isotonic FVD
 - C. hypertonic FVD
 - D. isotonic FVE
19. When monitoring the daily weight of a patient with fluid volume deficit (FVD), the nurse is aware that fluid loss may be considered when weight loss begins to exceed:
 - A. 0.25 lb
 - B. 0.50 lb
 - C. 1 lb
 - D. 1 kg
20. Dietary recommendations for a patient with a hypotonic fluid excess should include:
 - A. decreased sodium intake
 - B. increased sodium intake
 - C. increased fluid intake
 - D. intake of potassium-rich foods
21. When assessing a patient for electrolyte balance, the nurse is aware that etiologies for hyponatremia include:
 - A) water gain
 - B) diuretic therapy
 - C) diaphoresis
 - D) all of the following
22. Nursing interventions for a patient with hyponatremia include:
 - A) administering hypotonic IV fluids
 - B) encouraging water intake
 - C) restricting fluid intake
 - D) restricting sodium intake
23. The newly admitted client has burns on both legs. The burned areas appear white and leather-like. No blisters or bleeding are present, and the client states that he or she has little pain. How should this injury be categorized?
 - A. Superficial
 - B. Partial-thickness superficial
 - C. Partial-thickness deep
 - D. Full thickness
24. The newly admitted client has a large burned area on the right arm. The burned area appears red, has blisters, and is very painful. How should this injury be categorized?
 - A. Superficial
 - B. Partial-thickness superficial
 - C. Partial-thickness deep
 - D. Full thickness
25. Which vitamin deficiency is most likely to be a long-term consequence of a full-thickness burn injury?
 - A. Vitamin A
 - B. Vitamin B
 - C. Vitamin C
 - D. Vitamin D
26. Which client factors should alert the nurse to potential increased complications with a burn injury?
 - A. The client is a 26-year-old male.
 - B. The client has had a burn injury in the past.
 - C. The burned areas include the hands and perineum.
 - D. The burn took place in an open field and ignited the client's clothing.
27. Which type of fluid should the nurse expect to prepare and administer as fluid resuscitation during the emergent phase of burn recovery?
 - A. Colloids
 - B. Crystalloids
 - C. Fresh-frozen plasma
 - D. Packed red blood cells
28. On admission to the emergency department the burned client's blood pressure is 90/60, with an apical pulse rate of 122. These findings are an expected result of what thermal injury-related response?
 - A. Fluid shift
 - B. Intense pain
 - C. Hemorrhage
 - D. Carbon monoxide poisoning
29. Twelve hours after the client was initially burned, bowel sounds are absent in all four abdominal quadrants. What is the nurse's best action?
 - A. Reposition the client onto the right side.
 - B. Document the finding as the only action.
 - C. Notify the emergency team.
 - D. Increase the IV flow rate.

30. Which clinical manifestation indicates that the burned client is moving into the fluid remobilization phase of recovery?
- Increased urine output, decreased urine specific gravity
 - Increased peripheral edema, decreased blood pressure
 - Decreased peripheral pulses, slow capillary refill
 - Decreased serum [sodium](#) level, increased hematocrit
31. What is the priority nursing diagnosis during the first 24 hours for a client with full-thickness chemical burns on the anterior neck, chest, and all surfaces of the left arm?
- Risk for [Ineffective Breathing Pattern](#)
 - Decreased Tissue Perfusion
 - Risk for Disuse Syndrome
 - [Disturbed Body Image](#)
32. All of the following laboratory test results on a burned client's blood are present during the emergent phase. Which result should the nurse report to the physician immediately?
- Serum [sodium](#) elevated to 131 mmol/L (mEq/L)
 - Serum [potassium](#) 7.5 mmol/L (mEq/L)
 - Arterial pH is 7.32
 - Hematocrit is 52%
33. The client has experienced an electrical injury, with the entrance site on the left hand and the exit site on the left foot. What are the priority assessment data to obtain from this client on admission?
- Airway patency
 - Heart rate and rhythm
 - Orientation to time, place, and person
 - Current range of motion in all extremities
34. Which information obtained by assessment ensures that the client's respiratory efforts are currently adequate?
- The client is able to talk.
 - The client is alert and oriented.
 - The client's oxygen saturation is 97%.
 - The client's chest movements are uninhibited
35. Nurse Faith should recognize that fluid shift in an client with burn injury results from increase in the:
- Total volume of circulating whole blood
 - Total volume of intravascular plasma
 - Permeability of capillary walls
 - Permeability of kidney tubules
36. A patient with a spinal cord injury (SCI) complains about a severe throbbing headache that suddenly started a short time ago. Assessment of the patient reveals increased blood pressure (168/94) and decreased heart rate (48/minute), diaphoresis, and flushing of the face and neck. What action should you take first?
- Administer the ordered acetaminophen (Tylenol).
 - Check the Foley tubing for kinks or obstruction.
 - Adjust the temperature in the patient's room.
 - Notify the physician about the change in status.
37. Which patient should you, as charge nurse, assign to a new graduate RN who is orienting to the neurologic unit?
- A 28-year-old newly admitted patient with spinal cord injury
 - A 67-year-old patient with [stroke](#) 3 days ago and left-sided weakness
 - An 85-year-old dementia patient to be transferred to long-term care today
 - A 54-year-old patient with Parkinson's who needs assistance with bathing
38. A patient with a spinal cord injury at level C3-4 is being cared for in the ED. What is the priority assessment?
- Determine the level at which the patient has intact sensation.
 - Assess the level at which the patient has retained mobility.
 - Check blood pressure and pulse for signs of spinal shock.
 - Monitor respiratory effort and oxygen saturation level.
39. You are pulled from the ED to the neurologic floor. Which action should you delegate to the nursing assistant when providing nursing care for a patient with SCI?
- Assess patient's respiratory status every 4 hours.
 - Take patient's vital signs and record every 4 hours.
 - Monitor nutritional status including calorie counts.
 - Have patient turn, cough, and deep breathe every 3 hours.
40. You are helping the patient with an SCI to establish a bladder-retraining program. What strategies may stimulate the patient to void? (Choose all that apply).
- [Stroke](#) the patient's inner thigh.
 - Pull on the patient's pubic hair.
 - Initiate intermittent straight catheterization.

- d. Pour warm water over the perineum.
e. Tap the bladder to stimulate detrusor muscle.
41. You are providing care for a patient with an acute hemorrhage [stroke](#). The patient's husband has been reading a lot about strokes and asks why his wife did not receive alteplase. What is your best response?
a. "Your wife was not admitted within the time frame that alteplase is usually given."
b. "This drug is used primarily for patients who experience an acute [heart attack](#)."
c. "Alteplase dissolves clots and may cause more bleeding into your wife's brain."
d. "Your wife had gallbladder surgery just 6 months ago and this prevents the use of alteplase."
42. You are supervising a senior nursing student who is caring for a patient with a right hemisphere [stroke](#). Which action by the student nurse requires that you intervene?
a. The student instructs the patient to sit up straight, resulting in the patient's puzzled expression.
b. The student moves the patient's tray to the right side of her over-bed tray.
c. The student assists the patient with passive range-of-motion (ROM) exercises.
d. The student combs the left side of the patient's hair when the patient combs only the right side.
43. While working in the ICU, you are assigned to care for a patient with a seizure disorder. Which of these nursing actions will you implement first if the patient has a seizure?
a. Place the patient on a non-rebreather mask will the oxygen at 15 L/minute.
b. Administer lorazepam (Ativan) 1 mg IV.
c. Turn the patient to the side and protect airway.
d. Assess level of consciousness during and immediately after the seizure.
44. A patient recently started on phenytoin (Dilantin) to control simple complex seizures is seen in the outpatient clinic. Which information obtained during his chart review and assessment will be of greatest concern?
a. The gums appear enlarged and inflamed.
b. The white blood cell count is 2300/mm³.
c. Patient occasionally forgets to take the phenytoin until after lunch.
d. Patient wants to renew his driver's license in the next month.
45. Nurse is caring for a client with head injury and monitoring the client with decerebrate posturing. Which of the following is a characteristic of this type of posturing?
a. Upper extremity flexion with lower extremity flexion
b. Upper extremity flexion with lower extremity extension
c. Extension of the extremities after a stimulus
d. Flexion of the extremities after stimulus
46. A patient who has undergone mitral valve replacement suddenly experiences continuous bleeding from the surgical incision during postoperative period. Which of the following pharmaceutical agents should Nurse prepare to administer to Patient?
a. Protamine Sulfate b. Quinidine Sulfate
c. Vitamin C d. Coumadin
47. A patient suddenly experiences a seizure, and Nurse notice that Patient exhibits uncontrollable jerking movements. Nurse documents that Patient experienced which type of seizure?
a. Tonic seizure
b. Absence seizure
c. Myoclonic seizure
d. Clonic seizure
48. Smoking cessation is critical strategy for the client with Burgher's disease, Nurse anticipates that the male client will go home with a prescription for which medication?
a. Paracetamol b. Ibuprofen
c. [Nitroglycerin](#) d. Nicotine (Nicotrol)
49. A Nurse has been assigned to a client with Raynaud's disease. Nurse realizes that the etiology of the disease is unknown but it is characterized by:
a. Episodic vasospastic disorder of capillaries
b. Episodic vasospastic disorder of small veins
c. Episodic vasospastic disorder of the aorta
d. Episodic vasospastic disorder of the small arteries
50. Nurse is aware that the shift of body fluids associated with Intravenous administration of albumin occurs in the process of:
a. Osmosis b. Diffusion
c. Active transport d. Filtration

ANSWERS

1	D	26	C
2	D	27	B
3	C	28	A
4	C	29	B
5	A	30	A
6	C	31	C
7	B	32	B
8	D	33	B
9	D	34	C
10	D	35	C
11	B	36	B
12	A	37	B
13	A	38	D
14	B	39	B
15	D	40	A
16	B	41	C
17	C	42	A
18	B	43	C
19	B	44	B
20	B	45	C
21	D	46	A
22	C	47	C
23	D	48	D
24	B	49	D
25	D	50	A