

2018 Hesi Med Surg V1 Nov. 29 – Mixed with Correct answers and Rationales I memorized from my Hesi Testing Center.

1. Guaic Occult Test. What lab is most important?
Platelet Count
2. Patient had BDP 3 months ago with dehydration. What would warrant the nurse immediate intervention?
Positive Gastro Occult
3. A patient with Parkinson's. "Freezes." Pretends there is a crack on the floor and Carefully lifts leg and steps over.
Confirm that this is the correct and effective technique.
4. Patient had Atrial Fibrillation and then AED was used. One minute later, Patient sudden goes in to ventricular Tachycardia. What should the nurse do?
Administer Adenosine over 1-2 seconds IV
5. Heart failure acute exacerbation. How to Reduce Cardiac Workload?
Bedside Commode
6. External Fixation Device- What should the nurse do first?
Assess for peripheral pulse at the foot
7. COPD patient is experience shortness of breath.
Pursed Lip Breathing
8. Client with CVA (stroke). Has only eaten half of their food. Family is concern about nutrition. What should the nurse tell the family?
Demonstrate the use of Visual Scanning.
9. A male client with asthma has bronchoconstriction and mucous production due to exercising. What should the nurse do?
Determine if the client is using an inhaler before exercising.
10. A client with liver abscess and drainage of abscess. Which lab value?
White blood Cell Count
11. Suprapubic prostatectomy. Three-way catheter. Which assessment?
Urine Leaking meatus
12. A client with ulcerative colitis. UAP report what finding?
Stool with fatty streaks
13. Flank pain and acute pyelonephritis. Priority nursing action.
Administer IV antibiotics.
14. Long-standing pulmonary infection. Assess for hypoxia. Select All That Apply.
Breathing patterns, Check mentation, color of skin and nailbeds
15. Traction applied, but client is frustrated because client keeps calling nurse for help with repositioning.
Use a trapeze bar.
16. Multiple Sclerosis and urinary retention.
Self-Catheterization
17. Client works as a data desk job with Raynaud's syndrome. What to do to prevent wrist injury?
Space Heater
18. C.K.D. Lab to report.
Potassium 6.5

19. Client with Gullian Barre is not blinking.
Administer Lubricant
20. Taking prednisone PO 5mg. What symptom?
Rapid Weight Gain.
21. Succinylcholine. High Temperature.
Ice Pack axillary
22. The nurse drops a sterile package of supplies on the floor in the operating room (OR) suite. The ... impervious wrapper. Which action should the nurse implement?
Open contents to sterile field package intact.
23. Client with Acute Glomerulonephritis.
Restrict Sodium.
24. Client ask about biopsy results from cancer cells well differentiated. What response?
Ask Healthcare provider to gather more information.
25. Right cataract and lens implant. Which intervention should the nurse first?
Provide an eye shield to be worn while sleeping.
26. The unlicensed assistive personnel (UAP) reports to the nurse that a client who was admitted with abdominal pain has just had a large black tarry stool. What intervention should the nurse implement first?
- Test the stool for occult blood.
27. Which action is most important for the nurse to implement to reduce the risk for deep vein thrombosis in a postoperative client?
-Advise the client to perform leg exercises regularly.
28. The nurse is preparing a client for a bronchoscopy. While obtaining consent, the client complains of thirst and admits to drinking a small amount of orange juice two hours ago. What action should the nurse take?
-Delay procedure for 6 hours.
29. A client uses triamcinolone (kenalog), a corticosteroid ointment, to manage pruritis caused by a chronic skin rash. The client calls the clinic nurse to report increased erythema with purulent exudate at the site. What action should the nurse implement?
-Schedule an appointment for the client to the healthcare provider.
30. The nurse learns in charge of shift report that the x-ray report for a newly admitted client indicates consolidation in the left lower lung. What action should the nurse take?
-Administer a PRN dose of a bronchodilator.
31. The nurse is monitoring the glucose q4h of an adult woman admitted with DKA. Two hours after receiving 10 units of regular insulin for glucose of 255, the client is perspiring and complaining of shakiness. What intervention should the nurse implement?
-Check Capillary glucose level.
32. The chest x-ray for a client who is admitted for pneumonia shows pleural effusion with decreased air flow in the entire left upper lobe. What breath sounds that verify the x-ray findings should the nurse document after auscultation of the left upper lobe?
-Diminished breath sounds
33. Which food is most important for the nurse to encourage a male patient with osteomalacia to include in his daily diet?
- Fortified milk and cereals.
34. An older adult woman is seen in the clinic 3 months following her diagnosis of type 2 diabetes mellitus (DM). She tells the nurse that she has had a difficult time keeping her blood sugar in control. The nurse reviews the client's current finger-stick and daily log of

blood glucose levels. Which intervention is most important for the nurse to implement?

-Review the client's glycosylated hemoglobin (A1c) level.

35. The nurse is taking a client's blood pressure and observes carpal spasm after the sphygmomanometer cuff is inflated. What action should the nurse implement next?
-Assess the client's recent serum calcium level.
36. A male client is recovering from an episode of urinary tract calculi. During discharge teaching, the client asks about the dietary restriction he should follow. In discussing fluid intake, the nurse should include which type of fluid limitation?
-Tea and hot chocolate.
37. During preoperative teaching for a male client scheduled for repair of an inguinal hernia, the client tells the nurse that he has had several surgeries and understands the need to perform coughing and deep breathing exercises after surgery. How should the nurse respond?
-Ask for demonstration of these exercises.
38. A pt suffered an electrical injury with the entrance site on the left hand and the exit site on the left foot is admitted to the burn unit. Which intervention is most important for the nurse to include in this pt's plan of care?
-Continuous cardiac monitoring.
39. After 3 days of persistent epigastric pain, a female pt presents to the clinic. She has been taking oral antacids w/o relief. Her vital signs are HR 122 beats/min, respirations 16 breaths/min, O₂ 96% and BP 116/70. The nurse obtains a 12-lead ECG. Which assessment finding is most critical?
-ST elevation in three leads
40. A male client with an external fixation device for a fractured left femur is complaining of left foot pain. Which intervention should the nurse implement first?
-Administer PRN pain medication.
41. Two days following abdominal surgery a client begins to complain of cramping abdominal pain, and the nurse's inspection of the abdomen indicates slight distention. Which action should the nurse implement first?
-Auscultate abdomen quadrants
42. A fair-skinned female client who is an avid runner is diagnosed with malignant melanoma, which is located on the lateral surface of the lower leg. After wide margin resection, the nurse provides discharge teaching. it is most important for the nurse to emphasize the need to observe for changes in which characteristic?
-Appearance of any moles.
43. Math question: Order of 8,200 units. Each 1mL of solution contains 10,000 units of alfa. How many mL? (If Rounding is necessary, then round to the nearest tenth). Simply, divide 8200 and 10,000, which equals = **0.82mL** after calculation.
THEN ROUND TO THE NEAREST TENTH, and final answer is 0.8mL
44. What instruction should the nurse include in the discharge teaching plan of a client who had a cataract extraction today?
Light housekeeping is permitted, but avoid heavy lifting.
45. When a nurse is caring for a client with acute hypothyroidism, which serum laboratory value requires immediate intervention?
Serum sodium 122 mEq/L.

46. A potential donor of corneal tissue for the eye bank has just died. The nurse enters the room prescribed antibiotic eye drops. What action should the nurse take next?

Secure eye shields over the closed after instilling the eyedrops.

47. 3 months following her diagnosis of type II diabetes...had a difficult time keeping her blood sugar is centered. The nurse reviews that..blood glucose levels. Which interventions is most important for the nurse to implement?

Review the client's glycosylated hemoglobin (A1c) level.

48. I forgot the question, but the answer was **Prepare Discharging patient.**

49. Retinal Tear. What to do to avoid risk of retina damage?

50. 2-year old boy is having health assessment. Which further assessment by nurse?

"He refuses to feed, but I make him eat meats"