

## **ATI FLUID AND ELECTROLYTE PROCTORED EXAM 2023 WITH QUESTIONS AND ANSWERS/A+ GRADE**

The nurse is caring for a patient who is experiencing possible third spacing. A delay in recognizing and treating third spacing can lead to what patient complication?

- Peripheral edema
- Nausea and vomiting
- Multi-organ system failure
- Confusion - ANSWER C

The nurse is reviewing the patient's laboratory tests. What laboratory value indicates that the patient is experiencing fluid volume excess?

- Chloride, 102 mEq/L
- Sodium, 142 mEq/L
- Hemoglobin, 9.9 g/dL
- Serum osmolality, 290 mOsm/kg - ANSWER C

The nurse is completing discharge teaching with a patient diagnosed with congestive heart failure. What findings should the patient notify his/her health care provider about regarding fluid volume excess? (SATA)

- Dizziness when standing
- Five-pound weight gain in a week
- Urine output of 320 mL in 8 hours
- Dry mouth
- Cough with increased sputum production - ANSWER B, E

The nurse is caring for a patient experiencing diarrhea. What data indicate that the patient is experiencing fluid volume deficit? (SATA)

- Increased heart rate

- Orthostatic hypotension
- Increased urine output
- Poor skin turgor
- Weight gain - ANSWER A, B, D

The nurse is caring for a patient admitted for renal failure. What assessment findings indicate that the patient is experiencing fluid volume excess? (SATA)

- Edema
- Decreased systolic blood pressure
- Poor skin turgor
- Altered mental status
- Orthopnea - ANSWER A, B, E

The nurse is observing assigned patients for fluid volume excess. This is essential to prevent patients from developing what potential complication?

- Gastroesophageal reflux disease
- Congestive heart failure
- Acute renal failure
- Pneumonia - ANSWER B

The nurse is planning care for a patient who has a nasogastric tube and is recovering from abdominal surgery. What interventions will the nurse identify for addressing the problem of ineffective tissue perfusion? (SATA)

- Observing mental status
- Turning the patient every 2 hours
- Instructing the patient to stand slowly
- Monitoring for evidence of skin breakdown
- Obtaining daily weight - ANSWER A, B, D

patients who have been diagnosed with hypernatremia are at risk for injury. What is an appropriate intervention for the nurse to include in the plan of care for this

patient?

- Ask the family to keep the patient's personal items at home.
- Keep visitors away.
- Keep the bed at waist level.
- Monitor neurologic status. - ANSWER D

A patient was admitted to the ICU earlier today. The patient had an extensive workup revealing a sodium level of 113 mEq/L. The nurse would anticipate the health care provider ordering what intravenous solutions for a patient who was symptomatic with this sodium level?

- 3% normal saline
- D5.45 NS
- D5W
- 0.9% NS - ANSWER D

A nurse is reviewing lab data of 4 patients. Which of the following serum lab values should the nurse expect for a patient experiencing 2+ pitting edema?

- Sodium 138
- Hematocrit 34%
- BUN 22
- Protein 9g - ANSWER B

A nurse is caring for a patient who has dehydration and is receiving IV fluids. When assessing for complications, the nurse should recognize which of the following manifestations as a sign of fluid overload?

- Increased urine specific gravity
- Hypoactive bowel sounds

- Bounding peripheral pulses
- Decreased respiratory rate - ANSWER C

A nurse is assessing a patient who has respiratory acidosis. Which of the following

findings should the nurse expect?

- Hypotension
- Peripheral edema
- Facial flushing
- Hyperreflexia - ANSWER A

A nurse is assessing a patient who is receiving hydrochlorothiazide and notes that the patient is confused and lethargic. Which of the following laboratory values should the nurse report to the provider?

- Sodium 128 mEq/L
- Potassium 4.8 mEq/L
- Calcium 9.1 mg/dL
- Magnesium 2.0 mEq/L - ANSWER A

A nurse is caring for a patient who reports difficulty breathing and tingling in both hands. His respirations are 36/min and he appears very restless. Which of the following values should the nurse anticipate to be outside the expected reference range if the patient is experiencing respiratory alkalosis?

- PaO<sub>2</sub>
- PaCO<sub>2</sub>
- Sodium
- Bicarbonate - ANSWER B

A nurse is planning dietary teaching for a patient who has hypermagnesemia. Which of the following food choices contains the most magnesium and is, therefore, a food the nurse should plan to instruct the patient to avoid?

- Hard-boiled eggs
- Cheddar cheese
- Raw rhubarb
- Raw spinach - ANSWER D

A nurse is admitting a patient who has status asthmaticus. The patient's ABG results are pH 7.32, PaO<sub>2</sub> 74 mm Hg, PaCO<sub>2</sub> 56 mm Hg, and HCO<sub>3</sub><sup>-</sup> 26 mEq/L. The nurse should interpret these laboratory values as which of the following imbalances?

- Respiratory acidosis
- Respiratory alkalosis
- Metabolic acidosis
- Metabolic alkalosis - ANSWER A

A nurse is caring for a patient who requires continuous cardiac monitoring. The nurse identifies a prolonged PR interval and a widened QRS complex. Which of the following laboratory values supports this finding?

- Sodium 152 mEq/L
- Chloride 102 mEq/L
- Magnesium 1.8 mEq/L
- Potassium 6.1 mg/L - ANSWER D

A nurse is assessing a patient who is using PCA following a thoracotomy. The patient is short of breath, appears restless, and has respirations of 28/min. The patient's ABG results are pH 7.52, PaO<sub>2</sub> 89 mm Hg, PaCO<sub>2</sub> 28 mm Hg, and HCO<sub>3</sub><sup>-</sup> 24 mEq/L. Which of the following actions should the nurse take?

- Instruct the patient to cough forcefully.
- Assist the patient with ambulation.
- Provide calming interventions.
- Discontinue the PCA. - ANSWER C