

## ATI RN Fundamentals Proctored Exam

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1. **Can an RN delegate to the LPN to provide tracheostomy care to a client with pneumonia?** Yes.
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2. **A nurse on a med-surg unit has received change-of-shift report & will care for 4 clients. Which of the following client's needs may the nurse assign to an assistive personnel (AP)?**
- A. Feeding a client who was admitted 24 hrs ago w/aspiration pneumonia**
- B. Reinforcing teaching w/a client who is learning to walk using a quad cane**
- C. Reapplying a condom catheter for a client who has urinary incontinence**
- D. Applying a sterile dressing to a pressure ulcer**
- C. Reapplying a condom catheter for a client who has urinary incontinence
- Rationale: The application of a condom catheter is a noninvasive, routine procedure that the nurse may delegate to the AP
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3. **A nurse is delegating the ambulation of a client who had knee arthroplasty 5 days ago to an AP. Which of the following information should the nurse share with the AP? Select All.**
- A. The roommate is up independently.**
- B. The client ambulates w/his slippers on over his antiembolic stockings**
- C. The client uses a front-wheeled walker when ambulating**
- D. The client had pain medication 30 min ago**
- E. The client is allergic to codeine**
- F. The client ate 50% of his breakfast this morning**
- B, C, D
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4. **An RN is making assignments for client care to a LPN at the beginning of the shift. Which of the following assignments should the LPN question?**
- A. Assisting a client who is 24hr postop to use an incentive spirometer**
- D. Replacing the cartridge and tubing on a PCA pump**
- Rationale: The RN

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- B. Collecting a clean-catch urine specimen from a client who was admitted on the previous shift**  
**C. Providing nasopharyngeal suctioning for a client who has pneumonia**  
**D. Replacing the cartridge and tubing on a PCA pump**
- is responsible for the PCA pump
- 
5. **A nurse is preparing an in-service program about delegation. Which of the following elements should she identify when presenting the 5 rights of delegation? Select all.**
- A. Right client**  
**B. Right supervision/evaluation**  
**C. Right direction/communication**  
**D. Right time**  
**E. Right circumstances**
- B, C, E  
A and D are rights of medication administration
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6. **A nurse manager of a med-surg unit is assigning care responsibilities for the oncoming shift. A client is awaiting transfer back to the unit from the PACU following thoracic surgery. To which staff member should the nurse assign to this client?**
- A. Charge nurse**  
**B. RN**  
**C. LPN**  
**D. AP**
- B. RN  
A client returning from surgery requires assessment and establishment of a plan of care. RNs are responsible for this, especially if the client is potentially unstable.
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7. **A nurse observes an AP reprimanding a client for not using the urinal properly. The AP tells him she will put a diaper on him if he does not use the urinal more carefully next time. Which of the following torts is the AP committing?**
- A. Assault**  
**B. Battery**
- A. Assault  
By threatening the client, the AP is committing assault.

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- C. False imprisonment
- D. Invasion of privacy

8. An adult client who is competent tells the nurse that he is thinking about leaving the hospital against medical advice. The nurse believes that this is not in the client's best interest, so she administers a PRN sedative med that the client has not requested along w/his usual meds. Which of the following tort has the nurse committed?
- A. Assault
  - B. False imprisonment
  - C. Negligence
  - D. Breach of confidentiality
- B. False imprisonment  
The nurse gave the med as a chemical restraint to keep the client from leaving the facility against medical advice. The client did not consent.
9. A client who will undergo neurosurgery the following week tells the nurse in the surgeon's office that he will prepare his advance directives before he goes to the hospital. Which of the following statements by the client indicates to the nurse that he understands advance directives?
- A. "I'd rather have my brother make decisions for me, but I know it has to be my wife."
  - B. "I know they won't go ahead w/the surgery unless I prepare these forms."
  - C. "I plan to write that I don't want them to keep me on a breathing machine."
  - D. "I will get my regular doctor to approve my plan before I hand it in at the hospital."
- C.  
The client has the right to decide and specify which medical procedures he wants when a life-threatening situation arrives
10. A client is about to undergo an elective surgical procedure. Which of the following actions are appropriate for the nurse who is providing preop care regarding informed consent? Select all.
- A. Make sure the surgeon obtained the client's consent
- A, B  
The rest of the choices are the surgeon's responsibility, not the nurse

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- B. Witness the client's signature on the consent form**
- C. Explain the risks and benefits of the procedure**
- D. Describe the consequences of choosing not to have the surgery**
- E. Tell the client about alternatives to having the surgery**

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11. **A nurse has noticed several occasions in the past week when another nurse on the unit seemed drowsy & unable to focus on the issue at hand. Today, she found the nurse asleep in a chair in the break room when she was not on break. Which of the following actions should the nurse take?**
- A. Remind the nurse that safe client care is a priority on the unit**
  - B. Ask others on the team whether they have observed the same behavior**
  - C. Report observations to the nurse manager on the unit**
  - D. Conclude that her coworker's fatigue is not her problem to solve**
- C.** Any nurse who notices behavior that could possibly jeopardize client care or indicate a substance abuse problem has a duty to report the situation immediately to the nurse manager
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12. **A nurse is preparing info for a change-of-shift report. Which of the following info should the nurse include in the report?**
- A. The client's input & output for the shift**
  - B. The client's BP from the previous day**
  - C. A bone scan that is scheduled for today**
  - D. The med routine from the med administration record**
- C.** A bone scan that is scheduled for today
- This is important because the nurse might have to modify the client's care to accommodate them leaving the unit
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13. **A nurse enters a client's room & finds him sitting in his chair. He states, "I fell in the shower, but I got myself back up & into my chair." How should the nurse document this in the client's chart?**
- B.** By writing what the client states,

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the info is subjective data

- A. The client fell in the shower.
- B. The client states he fell in the shower & was able to get himself back into his chair
- C. The nurse should not document this info because she did not witness the fall
- D. The client fell in the shower & is now resting comfortably

14. A nursing instructor is reviewing documentation w/a group of nursing students. Which of the following legal guidelines should they follow when documenting a client's record? Select all. B, C

- A. Cover errors w/correction fluid, & write in the correct info
- B. Put the date & time on all entries
- C. Document objective data, leaving out opinions
- D. Use as many abbreviations as possible
- E. Wait until the end of the shift to document

15. The skin barrier covering a client's intestinal fistula keeps falling off when she stands up to ambulate. The nurse has reapplied it twice during the shift, but it remains intact only when the client is supine in bed. The nurse telephoned the physical therapist about the difficulties containing the drainage from the fistula, so the therapist didn't ambulate the client today. The client sat in a chair during lunch w/an absorbent pad over the fistula. The client ate all the food on her tray. The wound care nurse confirmed that she will see the client later today. The client states she feels frustrated at not having physical therapy, but the nurse thinks the client welcomed having a day to rest. Which of the following information should the nurse include in the change-of-shift report? Select all. A, B, D

- A. The physical therapist didn't ambulate the client today

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- B. The skin barrier's seal stays on in bed but loosens when the client stands.**
  - C. The client seemed to welcome having a "day off" from physical therapy**
  - D. The wound care nurse will see the client later today**
  - E. The client ate all the food on her lunch tray**
- 

**16. A nurse is receiving a provider's prescription by telephone for morphine for a client who is reporting moderate to severe pain. Which of the following nursing actions are appropriate? Select all.** A, B, C

- A. Repeat the details of the prescription back to the provider**
  - B. Have another nurse listen to the telephone prescription**
  - C. Obtain the prescriber's signature on the prescription within 24hrs**
  - D. Decline the verbal prescription because it is not an emergency situation**
  - E. Tell the charge nurse that the provider has prescribed morphine by telephone**
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**17. A nurse is caring for an older adult client who lives alone & is to be discharged in 3 days. He states that it is difficult to prepare adequate nutritious meals at home for just 1 person. To which of the following members of the health care team should the nurse refer him?** D. social worker

A social worker can make arrangements for a meal delivery service to provide nutritious meals daily, or recommend a congregate meal site near the client's home

**18. A goal for a client who has difficulty w/self-feeding due to rheumatoid arthritis is to use adaptive de-** D. An occupational

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**vices. The nurse caring for the client should initiate a referral w/which of the following members of the interprofessional care team?**

- A. Social worker**
- B. Certified nursing assistant**
- C. Registered dietitian**
- D. Occupational therapist**

therapist can assist clients who have physical challenges to use adaptive devices & strategies to help w/self-care activities

**19. A client who is postop following a knee arthroplasty is concerned about the adverse effects of the medication he is receiving for pain management. Which of the following members of the interprofessional care team may assist the client in understanding the medication's effects? Select all.**

- A. Provider**
- B. CNA**
- C. Pharmacist**
- D. RN**
- E. Respiratory therapist**

A, C, D

**20. A client who has had a cerebrovascular accident has persistent problems w/dysphagia. The nurse caring for the client should initiate a referral w/which of the following members of the interprofessional care team?**

- A. Social worker**
- B. CNA**
- C. Occupational therapist**
- D. Speech-language pathologist**

D  
A speech-language pathologist can initiate specific therapy for clients who have difficulty feeding due to swallowing difficulties

**21. A nursing instructor is acquainting a group of nursing students w/the roles of the various members of the health care team they will encounter on a medical-surgical unit. When she gives examples of the types of tasks CNAs may perform, which of the following client activities should she include? Select all.**

A, B, C, E

Determining pain level requires assessment, which

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is the job of the licensed personnel.

- A. Bathing
- B. Ambulating
- C. Toileting
- D. Determining pain level
- E. Measuring vital signs

22. A nurse in a provider's office is preparing to assess a young adult male client's musculoskeletal system as part of a comprehensive physical examination. Which of the following findings should the nurse expect? Select all.

- A. A concave thoracic spine posteriorly
- B. An exaggerated lumbar curvature
- C. A concave lumbar spine posteriorly
- D. An exaggerated thoracic curvature
- E. Muscles slightly larger on his dominant side

23. A nurse is evaluating a client's neurosensory system. To evaluate stereognosis, she would ask the client to close his eyes & identify which of the following items?

D. Stereognosis is tactile recognition

- A. A word she whispers 30cm from his ear
- B. A number she traces on the palm of his hand
- C. The vibration of a tuning fork she places on his foot
- D. A familiar object she places in his hand

24. A nurse is assessing a client who reports pain when the nurse evaluates the internal rotation of her right shoulder. Which of the following activities is this problem likely to affect?

C. Fastening a bra from behind requires internal rotation of the shoulder, so this activity will illicit pain

- A. Mopping her floors
- B. Brushing the back of her hair
- C. Fastening her bra behind her back
- D. Reaching into a cabinet above her sink

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A nurse is performing a neurosensory examination for a client. Which of the following tests should the nurse perform to test the client's balance? **Select all.**

A, B

C and E test visual acuity, D tests cranial nerve XI is intact by asking the client to shrug shoulders without complication.

**A. Romberg test**  
**B. Heel-to-toe walk**  
**C. Snellen test**  
**D. Spinal accessory function**  
**E. Rosenbaum test**

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26. A nurse is collecting data from an older adult client as part of a neurosensory examination. Which of the following findings should the nurse expect as changes associated w/aging? **Select all.**

B, C, D

- A. Slower light touch sensation**  
**B. Some vision & hearing decline**  
**C. Slower fine finger movement**  
**D. Some short-term memory decline**  
**E. Slower superficial pain sensation**
- 

27. A nurse is providing discharge instructions to a client who has a prescription for the use of oxygen in his home. Which of the following should the nurse teach the client about using oxygen safely in his home? **Select all.**

B, C, E

Family members that smoke should do so outside, and wool creates static electricity so it should be avoided.

- A. Family members who smoke must be at least 10 ft from the client when the oxygen is in use**  
**B. Nail polish should not be used near a client who is receiving oxygen**  
**C. A "No smoking" sign should be placed on the front door**  
**D. Cotton bedding & clothing should be replaced w/items made from wool**  
**E. A fire extinguisher should be readily available in the home**
- 

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A nurse educator is conducting a parenting class for new parents. Which of the following statements made by a participant indicates a need for further clarification & instruction?

- A. "I will begin swimming lessons as soon as my baby can close her mouth under water."
- B. "Once my baby can sit up, he should be safe in the bathtub."
- C. "I will test the temp of the water before placing my baby in the bath."
- D. "Once my infant starts to push up, I will remove the mobile from over the bed."

B  
Although the baby can hold his head above the water by sitting up, this does not make the baby safe in the tub. Parents should never leave a child unattended in a tub.

29. A home health nurse is discussing the dangers of carbon monoxide poisoning w/a client. Which of the following information should the nurse include in her counseling?

- A. Carbon monoxide has a distinct odor
- B. Water heaters should be inspected every 5 years
- C. The lungs are damaged from carbon monoxide inhalation
- D. Carbon monoxide binds w/hemoglobin in the body

D.  
Carbon monoxide is a very dangerous gas because it binds w/hemoglobin & ultimately reduces the oxygen supplied to the tissues in the body. Carbon monoxide is tasteless, has no scent, and cannot be seen. The water heaters, gas-burning furnances, and appliances should be inspected annually  
The lungs are not damaged in the process of inhalation

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