

HESI EXIT V4 160 Questions and Answers

1. The nurse is caring for a pre-adolescent client in skeletal Dunlop traction. Which nursing intervention is appropriate for this child?

- A) Make certain the child is maintained in correct body alignment.
- B) Be sure the traction weights touch the end of the bed.
- C) Adjust the head and foot of the bed for the child's comfort
- D) Release the traction for 15-20 minutes every 6 hours PRN.

The correct answer is A: Make certain the child is maintained in correct body alignment.

2. The nurse is assessing a healthy child at the 2 year check up. Which of the following should the nurse report immediately to the health care provider?

- A) Height and weight percentiles vary widely
- B) Growth pattern appears to have slowed
- C) Recumbent and standing height are different
- D) Short term weight changes are uneven

The correct answer is A: Height and weight percentiles vary widely

3. The parents of a 2 year-old child report that he has been holding his breath whenever he has temper tantrums. What is the best action by the nurse?

- A) Teach the parents how to perform cardiopulmonary resuscitation
- B) Recommend that the parents give in when he holds his breath to prevent anoxia
- C) Advise the parents to ignore breath holding because breathing will begin as a reflex
- D) Instruct the parents on how to reason with the child about possible harmful effects

The correct answer is C: Advise the parents to ignore breath holding because breathing will begin as a reflex

4. The nurse is assessing a client in the emergency room. Which statement suggests that the problem is acute angina?

A) "My pain is deep in my chest behind my sternum."

B) "When I sit up the pain gets worse."

C) "As I take a deep breath the pain gets worse."

D) "The pain is right here in my stomach area."

The correct answer is A: "My pain is deep in my chest behind my sternum."

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5. The nurse is assessing the mental status of a client admitted with possible organic brain disorder. Which of these questions will best assess the function of the client's recent

memory?

- A) "Name the year." "What season is this?" (pause for answer after each question)
- B) "Subtract 7 from 100 and then subtract 7 from that." (pause for answer) "Now continue to subtract 7 from the new number."
- C) "I am going to say the names of three things and I want you to repeat them after me: blue, ball, pen."
- D) "What is this on my wrist?" (point to your watch) Then ask, "What is the purpose of it?"

The correct answer is C: "I am going to say the names of three things and I want you to repeat them after me: blue, ball, pen."

6. In planning care for a 6 month-old infant, what must the nurse provide to assist in the development of trust?

- A) Food
- B) Warmth
- C) Security
- D) Comfort

The correct answer is C: Security

7. A nurse has just received a medication order which is not legible. Which statement best reflects assertive communication?

- A) "I cannot give this medication as it is written. I have no idea of what you mean."
- B) "Would you please clarify what you have written so I am sure I am reading it correctly?"
- C) "I am having difficulty reading your handwriting. It would save me time if you would be more careful."
- D) "Please print in the future so I do not have to spend extra time attempting to read your writing."

The correct answer is B) "Would you please clarify what you have written so I am sure I am reading it correctly?"

8. What is the most important consideration when teaching parents how to reduce risks in the home?

A) Age and knowledge level of the parents

B) Proximity to emergency services

C) Number of children in the home

D) Age of children in the home

The correct answer is D: Age of children in the home

9. A 35 year-old client with sickle cell crisis is talking on the telephone but stops as the nurse enters the room to request something for pain. The nurse should

- A) Administer a placebo
- B) Encourage increased fluid intake
- C) Administer the prescribed analgesia
- D) Recommend relaxation exercises for pain control

The correct answer is C: Administer the prescribed analgesia

10. While caring for a toddler with croup, which initial sign of croup requires the nurse's immediate attention?

- A) Respiratory rate of 42
- B) Lethargy for the past hour
- C) Apical pulse of 54
- D) Coughing up copious secretions

The correct answer is A: Respiratory rate of 30

11. A client is admitted with low T3 and T4 levels and an elevated TSH level. On initial assessment, the nurse would anticipate which of the following assessment findings?

- A) Lethargy
- B) Heat intolerance
- C) Diarrhea
- D) Skin eruptions

The correct answer is A: Lethargy

12. The emergency room nurse admits a child who experienced a seizure at school. The father comments that this is the first occurrence, and denies any family history of epilepsy. What is the best response by the nurse?

- A) "Do not worry. Epilepsy can be treated with medications."

- B) "The seizure may or may not mean your child has epilepsy."
- C) "Since this was the first convulsion, it may not happen again."
- D) "Long term treatment will prevent future seizures."

The correct answer is B: "The seizure may or may not mean your child has epilepsy."

13. Alcohol and drug abuse impairs judgment and increases risk taking behavior. What nursing diagnosis best applies?

- A) Risk for injury
- B) Risk for knowledge deficit

- C) Altered thought process
- D) Disturbance in self-esteem

The correct answer is A: Risk for injury

14. The nurse is caring for a 10 month-old infant who is has oxygen via mask. It is important for the nurse to maintain patency of which of these areas?

- A) Mouth
- B) Nasal passages
- C) Back of throat
- D) Bronchials

The correct answer is B: Nasal passages

15. The nurse is providing instructions for a client with pneumonia. What is the most important information to convey to the client?

- A) "Take at least 2 weeks off from work."
- B) "You will need another chest x-ray in 6 weeks."
- C) "Take your temperature every day."
- D) "Complete all of the antibiotic even if your findings decrease."

The correct answer is D: "Complete all of the antibiotic even if your findings decrease."

16. When counseling a 6 year old who is experiencing enuresis, what must the nurse understand about the pathophysiological basis of this disorder?

- A) Has no clear etiology
- B) May be associated with sleep phobia
- C) Has a definite genetic link
- D) Is a sign of willful misbehavior

The correct answer is A: Has no clear etiology

17. The nurse is discussing negativism with the parents of a 30 month-old child. How should the nurse tell the parents to best respond to this behavior?

- A) Reprimand the child and give a 15 minute "time out"
- B) Maintain a permissive attitude for this behavior
- C) Use patience and a sense of humor to deal with this behavior
- D) Assert authority over the child through limit setting

The correct answer is C: Use patience and a sense of humor to deal with this behavior

18. The nurse is talking by telephone with a parent of a 4 year-old child who has chickenpox. Which of the following demonstrates appropriate teaching by the nurse?

- A) Chewable aspirin is the preferred analgesic

- B) Topical cortisone ointment relieves itching
- C) Papules, vesicles, and crusts will be present at one time
- D) The illness is only contagious prior to lesion eruption

The correct answer is C: Papules, vesicles, and crusts will be present at one time

19. The nurse is assigned to a client who has heart failure . During the morning rounds the nurse sees the client develop sudden anxiety, diaphoresis and dyspnea. The nurse auscultates, crackles bilaterally.

Which nursing intervention should be performed first?

- A) Take the client's vital signs
- B) Place the client in a sitting position with legs dangling
- C) Contact the health care provider
- D) Administer the PRN anti anxiety agent

The correct answer is B: Place the client in a sitting position with legs dangling

20. The nurse is caring for a toddler with atopic dermatitis. The nurse should instruct the parents to

- A) Dress the child warmly to avoid chilling
- B) Keep the child away from other children for the duration of the rash
- C) Clean the affected areas with tepid water and detergent
- D) Wrap the child's hand in mittens or socks to prevent scratching

The correct answer is D: Wrap the child's hand in mittens or socks to prevent scratching

21. A recovering alcoholic asked the nurse, "Will it be ok for me to just drink at special family gatherings?" Which initial response by the nurse would be best?

- A) "A recovering person has to be very careful not to lose control, therefore, confine your drinking just at family gatherings."
- B) "At your next AA meeting discuss the possibility of limited drinking with your sponsor."
- C) "A recovering person needs to get in touch with their feelings. Do you want a drink?"
- D) "A recovering person cannot return to drinking without starting the addiction process

over."

The correct answer is D: "The recovering person cannot return to drinking without starting the addiction process over."

22. In taking the history of a pregnant woman, which of the following would the nurse recognize as the primary contraindication for breast feeding?

A) Age 40 years

B) Lactose intolerance

- C) Family history of breast cancer
- D) Uses cocaine on weekends

The correct answer is D: Uses cocaine on weekends

23. A client is receiving nitroprusside IV for the treatment of acute heart failure with pulmonary edema. What diagnostic lab value should the nurse monitor in relation to this medication?

- A) Potassium
- B) Arterial blood gasses
- C) Blood urea nitrogen
- D) Thiocyanate

The correct answer is D: Thiocyanate

24. A victim of domestic violence tells the batterer she needs a little time away. How would the nurse expect that the batterer might respond?

- A) With acceptance and views the victim's comment as an indication that their marriage is in trouble
- B) With fear of rejection causing increased rage toward the victim
- C) With a new commitment to seek counseling to assist with their marital problems
- D) With relief, and welcomes the separation as a means to have some personal time

The correct answer is B: With fear of rejection causing increased rage toward the victim

25. A postpartum mother is unwilling to allow the father to participate in the newborn's care, although he is interested in doing so. She states, "I am afraid the baby will be confused about who the mother is. Baby raising is for mothers, not fathers." The nurse's initial intervention should be what focus?

- A) Discuss with the mother sharing parenting responsibilities
- B) Set time aside to get the mother to express her feelings and concerns
- C) Arrange for the parents to attend infant care classes
- D) Talk with the father and help him accept the wife's decision

The correct answer is B: Set time aside to get the mother to express her feelings and concerns

26. A client with emphysema visits the clinic. While teaching about proper nutrition, the nurse should emphasize that the client

- A) Eat foods high in sodium increases sputum liquefaction
- B) Use oxygen during meals improves gas exchange
- C) Perform exercise after respiratory therapy enhances appetite
- D) Cleanse the mouth of dried secretions reduces risk of infection

The correct answer is B: Use oxygen during meals improves gas exchange

27. Which of these parents' comment for a newborn would most likely reveal an initial finding of a suspected pyloric stenosis?

- A) I noticed a little lump a little above the belly button.
- B) The baby seems hungry all the time.
- C) Mild vomiting that progressed to vomiting shooting across the room.
- D) Irritation and spitting up immediately after feedings.

The correct answer is C: Mild emesis progressing to projectile vomiting

28. The nurse is assessing a child for clinical manifestations of iron deficiency anemia. Which factor would the nurse recognize as cause for the findings?

- A) Decreased cardiac output
- B) Tissue hypoxia
- C) Cerebral edema
- D) Reduced oxygen saturation

The correct answer is B: Tissue hypoxia

29. The nurse would expect the cystic fibrosis client to receive supplemental pancreatic enzymes along with a diet

- A) High in carbohydrates and proteins
- B) Low in carbohydrates and proteins
- C) High in carbohydrates, low in proteins
- D) Low in carbohydrates, high in proteins

The correct answer is A: High in carbohydrates and proteins

30. In evaluating the growth of a 12 month-old child, which of these findings would the nurse expect to be present in the infant?

- A) Increased 10% in height

- B) 2 deciduous teeth
- C) Tripled the birth weight
- D) Head > chest circumference

The correct answer is C: Tripled the birth weight

31. A Hispanic client in the postpartum period refuses the hospital food because it is "cold." The best initial action by the nurse is to

- A) Have the unlicensed assistive personnel (UAP) reheat the food if the client wishes

- B) Ask the client what foods are acceptable or bad
- C) Encourage her to eat for healing and strength
- D) Schedule the dietitian to meet with the client as soon as possible

The correct answer is B: Ask the client what foods are acceptable

32. The father of an 8 month-old infant asks the nurse if his infant's vocalizations are normal for his age. Which of the following would the nurse expect at this age?

- A) Cooing
- B) Imitation of sounds
- C) Throaty sounds
- D) Laughter

The correct answer is B: Imitation of Sounds

33. The nurse should recognize that physical dependence is accompanied by what findings when alcohol consumption is first reduced or ended?

- A) Seizures
- B) Withdrawal
- C) Craving
- D) Marked tolerance

The correct answer is B: Withdrawal

34. Immediately following an acute battering incident in a violent relationship, the batterer may respond to the partner's injuries by

- A) Seeking medical help for the victim's injuries
- B) Minimizing the episode and underestimating the victim's injuries
- C) Contacting a close friend and asking for help
- D) Being very remorseful and assisting the victim with medical care

The correct answer is B: Minimizing the episode and underestimating the victim's injuries

35. The nurse is planning to give a 3 year-old child oral digoxin. Which of the following is the best approach by the nurse?

A) "Do you want to take this pretty red medicine?"

B) "You will feel better if you take your medicine."

C) "This is your medicine, and you must take it all right now."

D) "Would you like to take your medicine from a spoon or a cup?"

The correct answer is D: "Would you like to take your medicine from a spoon or a cup?"

36. In planning care for a child diagnosed with minimal change nephrotic syndrome, the nurse should understand the relationship between edema formation and

- A) Increased retention of albumin in the vascular system
- B) Decreased colloidal osmotic pressure in the capillaries
- C) Fluid shift from interstitial spaces into the vascular space
- D) Reduced tubular reabsorption of sodium and water

The correct answer is B: Decreased colloidal osmotic pressure in the capillaries

37. An eighteen month-old has been brought to the emergency room with irritability, lethargy over 2 days, dry skin and increased pulse. Based upon the evaluation of these initial findings, the nurse would assess the child for additional findings of

- A) Septicemia
- B) Dehydration
- C) Hypokalemia
- D) Hypercalcemia

The correct answer is B: Dehydration

38. A client who has been drinking for five years states that he drinks when he gets upset about "things" such as being unemployed or feeling like life is not leading anywhere. The nurse understands that the client is using alcohol as a way to deal with

- A) Recreational and social needs
- B) Feelings of anger
- C) Life's stressors
- D) Issues of guilt and disappointment

The correct answer is C: Life's stressors

39. The nurse is monitoring the contractions of a woman in labor. A contraction is recorded as beginning at 10:00 A.M. and ending at 10:01 A.M. Another begins at 10:15 A.M. What is the frequency of the contractions?

- A) 14 minutes
- B) 10 minutes
- C) 15 minutes
- D) Nine minutes

The correct answer is C: 15 minutes

40. The nurse is performing an assessment on a child with severe airway obstruction. Which finding would the nurse anticipate finding?

- A) Retractions in the intercostal tissues of the thorax

- B) Chest pain aggravated by respiratory movement
- C) Cyanosis and mottling of the skin
- D) Rapid, shallow respirations

The correct answer is A: Retractions in the soft tissues of the thorax

41. During the evaluation phase for a client, the nurse should focus on

- A) All finding of physical and psychosocial stressors of the client and in the family
- B) The client's status, progress toward goal achievement, and ongoing re-evaluation
- C) Setting short and long-term goals to insure continuity of care from hospital to home
- D) Select interventions that are measurable and achievable within selected timeframes

The correct answer is B: The client's status, progress toward goal achievement, and ongoing re evaluation

42. The school nurse suspects that a third grade child might have Attention Deficit Hyperactivity Disorder. Prior to referring the child for further evaluation, the nurse should

- A) Observe the child's behavior on at least 2 occasions
- B) Consult with the teacher about how to control impulsivity
- C) Compile a history of behavior patterns and developmental accomplishments
- D) Compare the child's behavior with classic signs and symptoms

The correct answer is C: Compile a history of behavior patterns and developmental accomplishments

43. Which of the actions suggested to the RN by the PN during a planning conference for a 10 month-old infant admitted 2 hours ago with bacterial meningitis would be acceptable to add to the plan of care?

- A) Measure head circumference
- B) Place in airborne isolation
- C) Provide passive range of motion

D) Provide an over-the-crib protective top

The correct answer is A: Measure head circumference

44. A client is admitted with a diagnosis of hepatitis B. In reviewing the initial laboratory results, the nurse would expect to find elevation in which of the following values?

A) Blood urea nitrogen

B) Acid phosphatase

C) Bilirubin

D) Sedimentation rate

The correct answer is C: Bilirubin

45. The nurse is discussing nutritional requirements with the parents of an 18 month-old child. Which of these statements about milk consumption is correct?

A) May drink as much milk as desired

B) Can have milk mixed with other foods

C) Will benefit from fat-free cow's milk

D) Should be limited to 3-4 cups of milk daily

The correct answer is D: Should be limited to three to four cups of milk daily

46. The nurse is talking with a client. The client abruptly says to the nurse, "The moon is full. Astronauts walk on the moon. Walking is a good health habit." The client's behavior most likely indicates

A) Neologisms

B) Dissociation

* C) Flight of ideas

D) Word salad

The correct answer is C: Flight of ideas

47. A mother asks about expected motor skills for a 3 year-old child. Which of the following would the nurse emphasize as normal at this age?

A) Jumping rope

B) Tying shoelaces

C) Riding a tricycle

D) Playing hopscotch

The correct answer is C: Riding a tricycle

48. A home health nurse is caring for a client with a pressure sore that is red, with serous

drainage, is 2 inches in diameter with loss of subcutaneous tissue. The appropriate dressing for this wound is

- A) A transparent film dressing
- B) Wet dressing with debridement granules
- C) Wet to dry with hydrogen peroxide
- D) Moist saline dressing

The correct answer is D: Moist saline dressing

49. The nurse enters a 2 year-old child's hospital room in order to administer an oral medication. When the child is asked if he is ready to take his medicine, he immediately says, "No!". What would be the most appropriate next action?

- A) Leave the room and return five minutes later and give the medicine
- B) Explain to the child that the medicine must be taken now
- C) Give the medication to the father and ask him to give it
- D) Mix the medication with ice cream or applesauce

The correct answer is A: Leave the room and return five minutes later and give the medicine

50. A nurse is doing pre conceptual counseling with a woman who is planning a pregnancy. Which of the following statements suggests that the client understands the connection between alcohol consumption and fetal alcohol syndrome?

- A) "I understand that a glass of wine with dinner is healthy."
- B) "Beer is not really hard alcohol, so I guess I can drink some."
- C) "If I drink, my baby may be harmed before I know I am pregnant."
- D) "Drinking with meals reduces the effects of alcohol."

The correct answer is C: "If I drink, my baby may be harmed before I know I am pregnant."

51. The client who is receiving enteral nutrition through a gastrostomy tube has had 4 diarrhea stools in the past 24 hours. The nurse should

- A) Review the medications the client is receiving
- B) Increase the formula infusion rate
- C) Increase the amount of water used to flush the tube
- D) Attach a rectal bag to protect the skin

The correct answer is A: Review the medications the client is receiving

52. A nurse is assigned to a client who is a new admission for the treatment of a frontal lobe brain tumor. Which history offered by the family members would be anticipated by the nurse as associated with the diagnosis and communicated?

A) "My partner's breathing rate is usually below 12."

B) "I find the mood swings and the change from a calm person to being angry all the time hard to deal with."

C) "It seems our sex life is non existant over the past 6 months."

D) "In the morning and evening I hear complaints that reading is next to impossible from blurred print."

The correct answer is B: "I find the mood swings and the change from a calm person to

being angry all the time hard to deal with."

53. The nurse prepares for a Denver Screening test with a 3 year-old child in the clinic. The mother asks the nurse to explain the purpose of the test. What is the nurse's best response about the purpose of the Denver?

- A) It measures a child's intelligence.
- B) It assesses a child's development.
- C) It evaluates psychological responses.
- D) It helps to determine problems.

The correct answer is B: It assesses a child's development.

54. The nurse is preparing a 5 year-old for a scheduled tonsillectomy and adenoidectomy. The parents are anxious and concerned about the child's reaction to impending surgery. Which nursing intervention would be best to prepare the child?

- A) Introduce the child to all staff the day before surgery
- B) Explain the surgery 1 week prior to the procedure
- C) Arrange a tour of the operating and recovery rooms
- D) Encourage the child to bring a favorite toy to the hospital

The correct answer is B: Explain the surgery 1 week prior to the procedure

55. The nurse, assisting in applying a cast to a client with a broken arm, knows that

- A) The cast material should be dipped several times into the warm water
- B) The cast should be covered until it dries
- C) The wet cast should be handled with the palms of hands
- D) The casted extremity should be placed on a cloth-covered surface

The correct answer is C: The wet cast should be handled with the palms of hands

56. Based on principles of teaching and learning, what is the best initial approach to pre-op teaching for a client scheduled for coronary artery bypass?

- A) Touring the coronary intensive unit

- B) Mailing a video tape to the home
- C) Assessing the client's learning style
- D) Administering a written pre-test

The correct answer is C: Assessing the client's learning style

57. A 4 year-old child is recovering from chicken pox (varicella). The parents would like to have the child return to day care as soon as possible. In order to ensure that the illness is no longer

communicable, what should the nurse assess for in this child?

- A) All lesions crusted
- B) Elevated temperature
- C) Rhinorrhea and coryza
- D) Presence of vesicles

The correct answer is A: All lesions crusted

58. The nurse is providing instructions to a new mother on the proper techniques for breast feeding her infant. Which statement by the mother indicates the need for additional instruction?

- A) "I should position my baby completely facing me with my baby's mouth in front of my nipple."
- B) "The baby should latch onto the nipple and areola areas."
- C) "There may be times that I will need to manually express milk."
- D) I can switch to a bottle if I need to take a break from breast feeding.

The correct answer is D: I can switch to a bottle if I need to take a break from breast feeding.

59. The nurse assesses a client who has been re-admitted to the psychiatric in-patient unit for schizophrenia. His symptoms have been managed for several months with fluphenazine (Prolixin). Which should be a focus of the first assessment?

- A) Stressors in the home
- B) Medication compliance
- C) Exposure to hot temperatures
- D) Alcohol use

The correct answer is B: Medication compliance

60. The nurse is caring for a client with an unstable spinal cord injury at the T7 level. Which intervention should take priority in planning care?

- A) Increase fluid intake to prevent dehydration
- B) Place client on a pressure reducing support surface

C) Use skin care products designed for use with incontinence

D) Increase caloric intake to aid healing

The correct answer is B: Place client on a pressure reducing support surface

61. A nurse is conducting a community wide seminar on childhood safety issues. Which of these children is at the highest risk for poisoning?

A) 9 month-old who stays with a sitter 5 days a week

B) 20 month-old who has just learned to climb stairs

- C) 10 year-old who occasionally stays at home unattended
- D) 15 year-old who likes to repair bicycles

The correct answer is B: Twenty month-old who has just learned to climb stairs

62. During an examination of a 2 year-old child with a tentative diagnosis of Wilm's tumor, the nurse would be most concerned about which statement by the mother?

- A) My child has lost 3 pounds in the last month.
- B) Urinary output seemed to be less over the past 2 days.
- C) All the pants have become tight around the waist.
- D) The child prefers some salty foods more than others.

The correct answer is C: Clothing has become tight around the waist

63. What is the most important aspect to include when developing a home care plan for a client with severe arthritis?

- A) Maintaining and preserving function
- B) Anticipating side effects of therapy
- C) Supporting coping with limitations
- D) Ensuring compliance with medications

The correct answer is A: Maintaining and preserving function

64. A mother asks the nurse if she should be concerned about the tendency of her child to stutter. What assessment data will be most useful in counseling the parent?

- A) Age of the child
- B) Sibling position in family
- C) Stressful family events
- D) Parental discipline strategies

The correct answer is A: Age of the child

65. A pre-term newborn is to be fed breast milk through nasogastric tube. Why is breast milk preferred over formula for premature infants?

- A) Contains less lactose
- B) Is higher in calories/ounce
- C) Provides antibodies
- D) Has less fatty acid

The correct answer is C: Provides antibodies

66. Which of the following nursing assessments in an infant is most valuable in identifying serious visual defects?

- A) Red reflex test
- B) Visual acuity
- C) Pupil response to light
- D) Cover test

The correct answer is A: Red reflex test

67. A client is admitted with a pressure ulcer in the sacral area. The partial thickness wound is 4cm by 7cm, the wound base is red and moist with no exudate and the surrounding skin is intact. Which of the following coverings is most appropriate for this wound?

- A) Transparent dressing
- B) Dry sterile dressing with antibiotic ointment
- C) Wet to dry dressing
- D) Occlusive moist dressing

The correct answer is D: Occlusive moist dressing

68. A 30 month-old child is admitted to the hospital unit. Which of the following toys would be appropriate for the nurse to select from the toy room for this child?

- A) Cartoon stickers
- B) Large wooden puzzle
- C) Blunt scissors and paper
- D) Beach ball

The correct answer is B: Large wooden puzzle

69. A nurse is to present information about Chinese folk medicine to a group of student nurses. Based on this cultural belief, the nurse would explain that illness is attributed to the

- A) Yang, the positive force that represents light, warmth, and fullness
- B) Yin, the negative force that represents darkness, cold, and emptiness
- C) Use of improper hot foods, herbs and plants
- D) A failure to keep life in balance with nature and others

The correct answer is B: Yin, the negative force that represents darkness, cold, and emptiness

70. A 2 year-old child has just been diagnosed with cystic fibrosis. The child's father asks the nurse "What is our major concern now, and what will we have to deal with in the future?"

Which of the following is the best response?

A) "There is a probability of life-long complications."

- B) "Cystic fibrosis results in nutritional concerns that can be dealt with."
- C) "Thin, tenacious secretions from the lungs are a constant struggle in cystic fibrosis."
- D) "You will work with a team of experts and also have access to a support group that the family can attend."

The correct answer is C: "Thin, tenacious secretions from the lungs are a constant struggle in cystic fibrosis."

71. Which type of accidental poisoning would the nurse expect to occur in children under age 6?

- A) Oral ingestion
- B) Topical contact
- C) Inhalation
- D) Eye splashes

The correct answer is A: Oral ingestion

72. A client was admitted to the psychiatric unit with a diagnosis of bipolar disorder. He constantly bothers other clients, tries to help the housekeeping staff, demonstrates pressured speech and demands constant attention from the staff. Which activity would be best for the client?

- A) Reading
- B) Checkers
- C) Cards
- D) Ping-pong

The correct answer is D: Ping-pong

73. The nurse is caring for a client who has developed cardiac tamponade. Which finding would the nurse anticipate?

- A) Widening pulse pressure
- B) Pleural friction rub
- C) Distended neck veins
- D) Bradycardia

The correct answer is C: Distended neck veins

74. Which nursing action is a priority as the plan of care is developed for a 7 year-old child hospitalized for acute glomerulonephritis?

- A) Assess for generalized edema
- B) Monitor for increased urinary output
- C) Encourage rest during hyperactive periods
- D) Note patterns of increased blood pressure

The correct answer is D: Note patterns of increased blood pressure

75. The nurse is caring for a child receiving chest physiotherapy (CPT). Which of the following actions by the nurse would be appropriate?

- A) Schedule the therapy thirty minutes after meals
- B) Teach the child not to cough during the treatment
- C) Confine the percussion to the rib cage area
- D) Place the child in a prone position for the therapy

The correct answer is C: Confine the percussion to the rib cage area

76. A polydrug user has been in recovery for 8 months. The client has begun skipping breakfast and not eating regular dinners. The client has also started frequenting bars to "see old buddies." The nurse understands that the client's behavior is a warning sign to indicate that the client may be

- A) headed for relapse
- B) feeling hopeless
- C) approaching recovery
- D) in need of increased socialization

The correct answer is A: headed for relapse

77. A client was admitted to the psychiatric unit with major depression after a suicide attempt. In addition to feeling sad and hopeless, the nurse would assess for

- A) Anxiety, unconscious anger, and hostility
- B) Guilt, indecisiveness, poor self-concept
- C) Psychomotor retardation or agitation
- D) Meticulous attention to grooming and hygiene

The correct answer is C: Psychomotor retardation or agitation

78. A client is experiencing hallucinations that are markedly increased at night. The client is very frightened by the hallucinations. The client's partner asked to stay a few hours beyond

the visiting time, in the client's private room. What would be the best response by the nurse demonstrating emotional support for the client?

A) "No, it would be best if you brought the client some reading material that she could read at night."

B) "No, your presence may cause the client to become more anxious."

C) "Yes, staying with the client and orienting her to her surroundings may decrease her anxiety."

D) "Yes, would you like to spend the night when the client's behavior indicates that she is frightened?"

The correct answer is C: "Yes, staying with the client and orienting her to her surroundings may decrease her anxiety."

79. At a well baby clinic the nurse is assigned to assess an 8 month-old child. Which of these developmental achievements would the nurse anticipate that the child would be able to perform?

- A) Say 2 words
- B) Pull up to stand
- C) Sit without support
- D) Drink from a cup

The correct answer is C: Sit without support

80. The nurse is talking to parents about nutrition in school aged children. Which of the following is the most common nutritional disorder in this age group?

- A) Bulimia
- B) Anorexia
- * C) Obesity
- D) Malnutrition

The correct answer is C: Obesity

81. At the geriatric day care program a client is crying and repeating "I want to go home. Call my daddy to come for me." The nurse should

- A) Invite the client to join the exercise group
- B) Tell the client you will call someone to come for her
- C) Give the client simple information about what she will be doing
- D) Firmly direct the client to her assigned group activity

The correct answer is C: Give the client simple information about what she will be doing

82. A victim of domestic violence states to the nurse, "If only I could change and be how my companion wants me to be, I know things would be different." Which would be the best

response by the nurse?

A) "The violence is temporarily caused by unusual circumstances, don't stop hoping for a change."

B) "Perhaps, if you understood the need to abuse, you could stop the violence."

C) "No one deserves to be beaten. Are you doing anything to provoke your spouse into beating you?"

D) "Batterers lose self-control because of their own internal reasons, not because of what their partner did or did not do."

The correct answer is D: "Batterers lose self control because of their own internal

reasons, not because of what their partner did or did not do."

83. A 38 year-old female client is admitted to the hospital with an acute exacerbation of asthma. This is her third admission for asthma in 7 months. She describes how she doesn't really like having to use her medications all the time. Which explanation by the nurse best describes the long-term consequence of uncontrolled airway inflammation?

- A) Degeneration of the alveoli
- B) Chronic broncho constriction of the large airways
- C) Lung remodeling and permanent changes in lung function
- D) Frequent pneumonia

The correct answer is C: Lung remodeling and permanent changes in lung function

84. A mother wants to switch her 9 month-old infant from an iron fortified formula to whole milk because of the expense. Upon further assessment, the nurse finds that the baby eats table foods well, but drinks less milk than before. What is the best advice by the nurse?

- A) Change the baby to whole milk
- B) Add chocolate syrup to the bottle
- C) Continue with the present formula
- D) Offer fruit juice frequently

The correct answer is C: Continue with the present formula

85. Privacy and confidentiality of all client information is legally protected. In which of these situations would the nurse make an exception to this practice?

- A) When a family member offers information about their loved one
- B) When the client threatens self-harm and harm to others
- C) When the health care provider decides the family has a right to know the client's diagnosis
- D) When a visitor insists that the visitor has been given permission by the client

The correct answer is B: When the client threatens self-harm and harm to others

86. The nurse is caring for a client who is in the late stage of multiple myeloma. Which of the following should be included in the plan of care?

- A) Monitor for hyperkalemia
- B) Place in protective isolation
- C) Precautions with position changes
- D) Administer diuretics as ordered

The correct answer is C: Precautions with position changes

87. The nurse is making a home visit to a client with chronic obstructive pulmonary disease (COPD). The client tells the nurse that he used to be able to walk from the house to the mailbox without difficulty. Now, he has to pause to catch his breath halfway through the trip. Which diagnosis would be most appropriate for this client based on this assessment?

- A) Activity intolerance caused by fatigue related to chronic tissue hypoxia
- B) Impaired mobility related to chronic obstructive pulmonary disease
- C) Self care deficit caused by fatigue related to dyspnea
- D) Ineffective airway clearance related to increased bronchial secretions

The correct answer is A: Activity intolerance caused by fatigue related to chronic tissue hypoxia

88. The nurse admits a client newly diagnosed with hypertension. What is the best method for assessing the blood pressure?

- A) Standing and sitting
- B) In both arms
- C) After exercising
- D) Supine position

The correct answer is B: In both arms

89. The nurse is caring for residents in a long term care setting for the elderly. Which of the following activities will be most effective in meeting the growth and development needs for persons in this age group?

- A) Aerobic exercise classes
- B) Transportation for shopping trips
- C) Reminiscence groups
- D) Regularly scheduled social activities

The correct answer is C: Reminiscence groups

90. Post-procedure nursing interventions for electroconvulsive therapy include

- A) Applying hard restraints if seizure occurs
- B) Expecting client to sleep for 4 to 6 hours
- C) Remaining with client until oriented
- D) Expecting long-term memory loss

The correct answer is C: Remaining with client until oriented

91. The nurse assesses delayed gross motor development in a 3 year-old child. The inability of the child to do which action confirms this finding?

- A) Stand on 1 foot
- B) Catch a ball
- C) Skip on alternate feet
- D) Ride a bicycle

The correct answer is A: Stand on 1 foot

92. The mother of a 15 month-old child asks the nurse to explain her child's lab results and how they show her child has iron deficiency anemia. The nurse's best response is

- A) "Although the results are here, your doctor will explain them later."
- B) "Your child has less red blood cells that carry oxygen."
- C) "The blood cells that carry nutrients to the cells are too large."
- D) "There are not enough blood cells in your child's circulation."

The correct answer is B: "Your child has less red blood cells that carry oxygen."

93. In a child with suspected coarctation of the aorta, the nurse would expect to find

- A) Strong pedal pulses
- B) Diminishing carotid pulses
- C) Normal femoral pulses
- D) Bounding pulses in the arms

The correct answer is D: Bounding pulses in the arms

94. At the day treatment center a client diagnosed with Schizophrenia - Paranoid Type sits alone alertly watching the activities of clients and staff. The client is hostile when approached and asserts that the doctor gives her medication to control her mind. The client's behavior most likely indicates

- A) Feelings of increasing anxiety related to paranoia

- B) Social isolation related to altered thought processes
- C) Sensory perceptual alteration related to withdrawal from environment
- D) Impaired verbal communication related to impaired judgment

The correct answer is B: Social isolation related to altered thought processes

95. A 65-year-old Hispanic-Latino client with prostate cancer rates his pain as a 6 on a 0- to-10 scale. The client refuses all pain medication other than Motrin, which does not relieve his pain. The next action for the nurse to take is to

- A) Ask the client about the refusal of certain pain medications

- B) Talk with the client's family about the situation
- C) Report the situation to the health care provider
- D) Document the situation in the notes

The correct answer is A: Ask the client about the refusal of certain pain medications

96. When teaching adolescents about sexually transmitted diseases, what should the nurse emphasize that is the most common infection?

- A) Gonorrhea
- B) Chlamydia
- C) Herpes
- D) HIV

The correct answer is B: Chlamydia

97. First-time parents bring their 5 day-old infant to the pediatrician's office because they are extremely concerned about its breathing pattern. The nurse assesses the baby and finds that the breath sounds are clear with equal chest expansion. The respiratory rate is 38-42 breaths per minute with occasional periods of apnea lasting 10 seconds in length. What is the correct analysis of these findings?

- A) The pediatrician must examine the baby
- B) Emergency equipment should be available
- C) This breathing pattern is normal
- D) A future referral may be indicated

The correct answer is C: This breathing pattern is normal

98. A client is admitted with the diagnosis of meningitis. Which finding would the nurse expect in assessing this client?

- A) Hyperextension of the neck with passive shoulder flexion
- B) Flexion of the hip and knees with passive flexion of the neck
- C) Flexion of the legs with rebound tenderness
- D) Hyper flexion of the neck with rebound flexion of the legs

The correct answer is B: Flexion of the hip and knees with passive flexion of the neck

99. Clients taking which of the following drugs are at risk for depression?

- A) Steroids
- B) Diuretics
- C) Folic acid
- D) Aspirin

The correct answer is A: Steroids

100. When a client is having a general tonic clonic seizure, the nurse should

- A) Hold the client's arms at their side
- B) Place the client on their side
- C) Insert a padded tongue blade in client's mouth
- D) Elevate the head of the bed

The correct answer is B: Place the client on their side

101 After talking with her partner, a client voluntarily admitted herself to the substance abuse unit. After the second day on the unit the client states to the nurse, "My husband told me to get treatment or he would divorce me. I don't believe I really need treatment but I don't want my husband to leave me." Which response by the nurse would assist the client?

- A) "In early recovery, it's quite common to have mixed feelings, but unmotivated people can't get well."
- B) "In early recovery, it's quite common to have mixed feelings, but I didn't know you had been pressured to come."
- C) "In early recovery it's quite common to have mixed feelings, perhaps it would be best to seek treatment on an out client bases."
- D) "In early recovery, it's quite common to have mixed feelings. Let's discuss the benefits of sobriety for you."

The correct answer is D: "In early recovery, it's quite common to have mixed feelings. Let's discuss the benefits of sobriety for you."

102. A neonate born 12 hours ago to a methadone maintained woman is exhibiting a hyperactive MORO reflex and slight tremors. The newborn passes loose, watery stool. Which of these is a nursing priority?

- A) Hold the infant at frequent intervals.
- B) Assess for neonatal withdrawal syndrome
- C) Offer fluids to prevent dehydration
- D) Administer paregoric to stop diarrhea

The correct answer is B: Assess for neonatal withdrawal syndrome

103. The nurse is caring for a post myocardial infarction client in an intensive care unit. It is noted that urinary output has dropped from 60 -70 ml per hour to 30 ml per hour. This change is most likely due to

A) Dehydration

B) Diminished blood volume

- C) Decreased cardiac output
- D) Renal failure

The correct answer is C: Decreased cardiac output

104. The primary nursing diagnosis for a client with congestive heart failure with pulmonary edema is

- A) Pain
- B) Impaired gas exchange
- C) Cardiac output altered: decreased
- D) Fluid volume excess

The correct answer is C: Cardiac output altered decreased

105. The nurse is performing a developmental assessment on an 8 month-old. Which finding should be reported to the health care provider?

- A) Lifts head from the prone position
- B) Rolls from abdomen to back
- C) Responds to parents' voices
- D) Falls forward when sitting

The correct answer is D: Falls forward when sitting. Sitting without support is expected at this age.

106. A client has received her first dose of fluphenazine (Prolixin) 2 hours ago. She suddenly experiences torticollis and involuntary spastic muscle movement. In addition to administering the ordered anticholinergic drug, what other measure should the nurse implement?

- A) Have respiratory support equipment available
- B) Immediately place her in the seclusion room
- C) Assess the client for anxiety and agitation
- D) Administer PRN dose of IM antipsychotic medication

The correct answer is A: Have respiratory support equipment available

107. The nurse walks into a client's room and finds the client lying still and silent on the floor. The nurse should first

- A) Assess the client's airway
- B) Call for help
- C) Establish that the client is unresponsive
- D) See if anyone saw the client fall

The correct answer is C: Establish that the client is unresponsive