

## ATI FUNDAMENTALS ATI 2019 PROCTORED EXAMS COMPLETE GUIDE A+ PASS (REVISED VERSION)

- **A nurse is planning care for a group of clients. Which of the following tasks should the nurse delegate to assistive personnel?:** A. changing the dressing for a client who has stage 3 pressure injury  
B. determining a client's response to a diuretic  
C. comparing radial pulses for a client who is postoperative  
**D. providing post mortem care to a client (answer is D)**

- **a nurse is conducting a health assessment for a client who takes herbal supplements. Which of the following statements by the client indicates an understanding of the use of the supplements?:** A. I take ginkgo biloba for a headache  
B. I take echinacea to control my cholesterol  
**C. I take ginger when I get car sick**  
D. I use garlic for my menopausal symptoms  
(Answer is C)

- **A nurse is caring for a client who has influenza and isolation precautions in place. Which of the following actions should the nurse take to prevent the spread of infection?:**

- **A. wear a mask when working within 3 ft of the client**
- administer metronidazole
- don protective eyewear before entering the room
- place the client in a negative airflow room (Answer is A)

- **a nurse obtains a prescription for wrist restraints for a client who is trying to pull out his NG tube. Which of the following actions should the nurse take?:** A. attach the restraints securely to the side rails of the client's bed.
- apply the restraints to allow as little movement as possible
- **allow room for two fingers to fit between the clients skin and the restraints**
- remove the restraints every 4 hr.(Answer is C)
- **a nurse is admitting a client who has tuberculosis. Which of the following types of transmission precautions should the nurse plan to initiate?:** A. droplet
- **airborne**
- protective environment
- contact (Answer is B)
- **a nurse in a well child clinic receives a telephone call from a parent who states that their child accidentally swallowed paint thinner. The child is awake and alert. Which of the following responses should the nurse take?:**
- **A. Have your child drink one large glass of water**
- Hang up and call a poison control center hotline
- Bring your child into the clinic later today
- Induce vomiting in your child with syrup in ipacac (Answer is A)
- **a nurse is documenting a child's medical record. Which of the following entries should the nurse record?:**
- A. oral temperature slightly elevated at 0800
- **B. administered pain medication**
- C. incision without redness or drainage

D. drank adequate amounts of fluid with meals  
(Answer is B)

• **a nurse is providing oral care for a client who is unconscious. Which of the following actions should the nurse take?:**

- **A. Place the client in a side lying position**
- brush the clients teeth daily
- apply mineral oil to the client's lips
- rinse the client's mouth with an alcohol-based mouthwash(Answer is A)

• **A nurse is collaborating with a risk management team about potential legal issues involving client care. The nurse should identify which of the following situations is an example of negligence?:**

- **A. a nurse administers a medication without first identifying the client**
- assistive personnel discuss client care in the facility cafeteria with visitors present
- a nurse begins a blood transfusion without obtaining consent
- assistive personnel prevent a client from leaving the facility(Answer is C)

• **a nurse is collecting a sputum specimen for culture from a client who has a respiratory infection. Which of the following actions should the nurse take?:**

A. wear sterile gloves when collecting the specimen

- **offer the client oral hygiene after the collection**
- collect the specimen in the evening
- collect 1 ml of sputum.
- (Answer is B)

• **a nurse is assessing an older client. Which of the following findings should the nurse expect?:**

- **A. Decreased sense of balance**
- increased night time sleeping
- heightened sense of pain
- nighttime urinary incontinence
- (Answer is A)

• **A nurse is completing discharge teaching about ostomy care with a client who has a new stoma. Which of the following instructions should the nurse include in the teaching? (select all that apply):**

- **A. cut the opening of the pouch 1/8 of an inch larger than the stoma**
- **B. place a piece of gauze over the stoma while changing the pouch**
- **C. use povidone iodine to clean around the stoma**
- **D. empty the ostomy pouch when it becomes one third full of contents**

E. expect the stoma to turn a purple blue color as it heals (Answer A, B, C, and D)

• **a nurse is preparing to obtain informed consent from a client who speaks a different language than the nurse. Which of the following actions should the nurse take?:**

- A. request the assistive personnel interpret the information for the client
- B. use proper medical terms when giving information to the client
- **C. offer written information in the client's language**
- D. avoid using gestures when speaking to the client (Answer is C)

• **a nurse is teaching a client about home care equipment. Which of the following information should the nurse include in the teaching? (Select all that apply):**

- **A. avoid using wool blankets when receiving oxygen**
- B. keep the oxygen delivery system 0.6 m (2 feet) from any heat source
- C. check the oxygen delivery rate at least once a day**
- D. align the middle of the ball in the flow meter with the line of the prescribed flow rate**

(Answer A, C, and D)

• **a nurse is planning care for a client who reports insomnia. Which of the following actions should the nurse perform short before bedtime?:**

- **A. provide a late supper**
- offer a wet washcloth for the client to wash her face
- perform range of motion exercises
- prepare hot cocoa or tea for the client

(Answer is A)

• **a nurse on a medical-surgical unit is receiving a change of shift report for four clients. Which of the following clients should the nurse see first?:**

- A. a client who has acute abdominal pain of 4 on a scale from 0 to 10
- a client who has pneumonia and an oxygen saturation of 96%
- **a client who has a new onset of dyspnea 24 hours after a total hip arthroplasty**
- a client who has a urinary tract infection and low-grade fever (Answer is C)

- a nurse is reviewing a client's intake and output and notes the following: 0.9% sodium chloride 600mL IV infusion, cefazolin 250 mg in dextrose 5% in water 100mL intermittent IV bolus, 200mL emesis, 40mL voided urine, and 20mL urine from straight catheterization. The nurse should record the client's net fluid intake as how many mL? (round the answer to the nearest whole number. Use a leading zero if it applies. Do not use a trailing zero.): 700mL, the rest are output

- a nurse is discussing incident reports with a group of newly licensed nurses. The nurse should include that which of the following requires the completion of incident report?:

- A. a client's prescribed laboratory testing was not obtained
- a client withdrew consent for a procedure
- an oncoming nurse arrived to work late
- a nurse transfused a unit of packed RBCs in 2 hr. (Answer is A)

- a nurse is caring for a client who has a new prescription for negative-pressure therapy for a chronic wound. The nurse is unfamiliar with the procedure. Which of the following resources should the nurse consult to learn more about the intervention?: A. the client's plan of care

- the nurse practice act
- the material safety data sheet
- the policy and procedure manual
- (Answer is D)

- a nurse is performing postural drainage with percussion and vibration for a client who has cystic fibrosis. Which of the following actions should the nurse take?: A. cover the area of percussion with a towel

B. instruct the client to exhale quickly during vibrations

C. schedule postural drainage after meals

D. perform percussion over the lower back

(Answer is D)

• a nurse is preparing to administer diphenhydramine 20 mg orally to a 6-year-old child who has difficulty swallowing pills. Available is diphenhydramine 12.5mg/5ml oral syrup. Which of the following images indicates the correct number of mL the nurse should administer? (round answer to the nearest whole number):  
should be 8mL syringe

• a nurse is admitting a client who is malnourished. The client states, "my wedding ring is loose and I'm worried I will lose it if it falls off." Which of the following is an appropriate response by the nurse?: A. I will place it in your drawer so it won't get lost

• I can pin it to your hospital gown so you won't lose it.

• I will hold onto it until a family member can take it home

• I can put it in a locked storage unit for you

• (Answer is D)

• A charge nurse is teaching a group of newly licensed nurses about the use of restraints. In which of the following clinical situations should the nurse apply restraints?: A. if the client is pacing in the hallway

• as a part of a fall prevention program

• at the request of the client's family

• when the client poses a threat to self

• (Answer is D)

• to ensure client safety, a nurse manager is planning to observe a newly licensed nurse perform a straight

**catheterization on a client. In which of the following roles is the nurse manager functioning?:**

- A. case manager
- client educator
- client care provider
- client advocate

**a charge nurse in a long term care facility is preparing an educational program about delirium for newly hired nurses. Which of the following state-ments should the nurse plan to include?:**

- A. delirium does not affect the client's perception of her environment
- delirium does not affect a client's sleep cycle
- delirium has an abrupt onset
- delirium has a slow progression
- (Answer is C)

**a nurse is speaking with a client who has recently received a diagnosis of a chronic illness. The client states, the doctor must be wrong. I can't be that sick. The nurse should inform the client that their reaction is an example of which of the following expected responses to grief?:**

- A. acceptance
- denial
- anger
- depression
- (Answer is B)

**a nurse on a medical surgical unit is providing care for four clients. The nurse should identify which of the**



**following situations as an ethical dilemma?:** A. a surgeon who removed the wrong kidney during a surgical procedure refuses to take responsibility for her actions

- a client who has Crohn's disease reports that his prescription drug plan will not pay for his medications
- a client who has a new colostomy refuses to take instructions from the ostomy therapist because she "doesn't like him"
- the family of a client who has a terminal illness asks that the provider not tell the client the diagnosis.

(Answer is D)

**a nurse is teaching a client about performing breast self examinations. Which of the following statements by the client indicates an understanding of the teaching?:** A. I

should perform my self exam the week that my period starts

- I should make different patterns on each breast when I do my self exam
- I should use the palm of my hand to apply pressure to each breast
- I should make circular motions with my fingertips under my arms
- (Answer is D)

**a nurse is preparing to transfer a client who is partially weight bearing from the bed to the chair. Which of the following actions should the nurse take?:** A. keep his knees straight when moving the client

- position the chair next to the bed as a 90 degree angle
- stand with his feet together when lifting the client
- have the client bear weight on her strong leg (Answer is D)

• a nurse is caring for a client following a laparoscopic cholecystectomy. The client has a prescription for ondansetron 4mg IV bolus every 6hr PRN for nausea and vomiting. Identify the sequence of steps the nurse should follow to administer the medication.:

- 1. perform hand hygiene
- select the injection port of the IV tubing closest to the client
- cleanse the injection port with an antiseptic swab
- aspirate for blood return
- inject the medication

• a nurse is teaching a client who has diabetes mellitus about mixing regular and NPH insulin. Which of the following statements by the client indicates an understanding of the teaching?:

- A. I should wait 3 minutes after mixing the insulin to inject it
- I should draw up the NPH insulin before regular insulin
- I should inject air into the vial of regular insulin first
- I should roll the vial of NPH insulin between my hands before drawing it up
- (Answer is D)

• a nurse is assessing the body temperature of an adult client using a temporal artery thermometer. Which of the following actions should the nurse take? (select all that apply):

- A. slide the probe across the clients forehead
- pull the clients pinna up and back
- hold the clients hair aside while performing the procedure

- document the clients temperature with AX next to the value
- move the probe in a circular motion
- (Answer A and C)

**• a nurse is preparing to insert a peripheral IV catheter into the clients arm. Which of the following actions should the nurse take to help dilate the vein?:**

- A. stroke the skin near the vein in an upward position
- dangle the client's arm over the edge of the bed
- apply a cool compress to the vein for 10 mins
- instruct the client to flex their arm with the hand open

(Answer is B)

**• a nurse is preparing to suction a clients tracheostomy tube. Which of the following should the nurse plan to take?:**

- A. apply intermittent suction during catheter insertion
- suction the client's airway for 20 sections with each pass
- hyperoxygenation the client manually for 30 to 60 sections before suctioning
- decrease suction pressure to 150 mm Hg if the oxygen saturation level drop during suctioning

(Answer is D)

**• a nurse is assessing a client who received morphine for severe pain 30 mins ago. Which of the following findings is the nurse's priority?:** A. last bowel movement was 3 days ago

- reports pain of 8 on a scale of 0 to 10
- distended bladder
- respiratory rate 7/min
- (Answer is D)

- **a nurse is caring for a client who has been reacted multiple time for STIs. Which of the following responses should the nurse take?:** A. you must have too many sexual partners
  - why do you keep letting this happen?
  - lets explore why this might be reoccurring
  - don't you have access to condoms?(Answer is C)
- **a nurse enters the room of a client who has a seizure disorder. The client is sitting in the chair and begins to experience a seizure. Which of the following actions should the nurse take?:** A. move items in the room away from the client
  - turn the client onto their side
  - help the client lie on the floor
  - loosen the client's clothing
  - (Answer is C)
- **a nurse is testing a client for conduction deafness by performing Weber's test. Which of the following actions should the nurse take when performing this test?:** A. move a vibrating tuning form in front of the client's ear canals one after the other
  - place the base of a vibrating tuning fork on the client's mastoid process
  - place the base of a vibrating tuning fork on the top of the client's head
  - count how many seconds a client can hear a tuning fork after it has been struck
  - (Answer is C)
- **a nurse is obtaining he medication history of a client who asks about taking ginkgo biloba. The nurse should**

**identify which of the following medications can interact adversely with this supplement?: A. warfarin**

- albuterol
- levothyroxine

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**• a nurse is obtaining informed consent from a client who is scheduled for surgery. The client states, I don't want to go through with the procedure. Which of the following actions should the nurse take?: A. discuss alternative treatments with the client**

- explain to the client the risks involved with not having the procedure
- express approval of the client's decision to not have the procedure
- document the client's decision in the medical record
- (Answer is D)

**• a nurse is providing teaching to a client about reducing the adverse effects of immobility. Which of the following statements by the client indicates an understanding of the teaching?: A. I will have my partner help me change positions every 4 hours**

- I will remove my anti embolic stockings while I'm in bed
- I will hold my breath while rising from a sitting position

- I will perform ankle and knee exercises every hour
- (Answer is D)
- **a nurse is caring for a client who is postoperative and has a new prescription to advance her diet to full liquids. Which of the following foods should the nurse offer the client as a part of a full liquid diet?: A. oatmeal**
- applesauce
- scrambled eggs
- plain yogurt
- (Answer is D)
- **a nurse is preparing a client who has terminal cancer for discharge. Which of the following questions should the nurse ask when assessing the client's psychosocial history?: A. what medications are you currently taking?**
- are you experiencing any pain?
- have any of your relatives been diagnosed with cancer?
- what techniques do you use to cope with stress?(Answer is D)
- **a nurse is performing a skin assessment on an older adult client. Which of the following findings should the nurse expect?: A. thickened outer layer of skin**
- increased skin elasticity
- reduced sweat production
- increased production of oils
- (Answer is C)
- **A nurse is caring for a client who begins to cry after receiving a diagnosis of cancer. Which of the following responses should the nurse make?: A. I would get a second opinion if I were you**
- It might seem bad now, but things will get better

- it must be difficult for you to receive this kind of news
- I think you would benefit from speaking with our chaplain
- (Answer is C)
- **A nurse is preparing to obtain a health history from a client. Which of the following actions should the nurse take?:**
- A. use the clients first name when

initially meeting the client

- tell the client the purpose for collecting the information
- explain to the client the necessity of full disclosure of information
- avoid documenting direct quotes from the client as part of subjective data.
- (Answer is B)
- **a nurse is caring for a client who has brain cancer and is transferring to hospice care. The client's son tells the nurse, I don't know what to tell my dad if he asks how he is going to die. Which of the following is an appropriate response by the nurse?:** A. Lets talk more about your dad's condition
- The social worker will help you answer those questions
- Try to help your dad enjoy this time as much as he can
- I think that you should discuss this with the hospice nurse
- (Answer is A)
- **a nurse is preparing to administer several medications to a client. Which of the following data should the nurse plan to use to confirm the client's identity?:**

- A. the clients room number
- the clients admitting diagnosis
- the name of the clients next of kin
- the clients telephone number
- (Answer is D)
- **a nurse is caring for a client who is prescribed a special diet. The client is concerned that he does not have the resources to purchase the food he needs to adhere to the diet at home. The nurse should notify which of the following members of the health care team.:** A. social worker
  - occupational therapist
  - registered dietician
  - primary care provider
  - (Answer is A)
- **a nurse is teaching a newly licensed nurse about the care of a client who has a methicillin resistance staphylococcus aureus (MRSA) infection. Which of the following statements by newly licensed nurse indicates an understanding of the teaching?:** A. I will place the client in a private room
  - I will remove my gown before my gloves after providing client care
  - I will wear an N95 respiratory mask when caring for the client
  - I will tell the client's visitors to wear a mask when they are within 3 ft of the client
  - (Answer is A)
- **a nurse is planning care for a client who reports having a latex allergy. Which of the following interventions should the nurse include in the plan?:** A.



cover the blood pressure cuff with a stockinette

- wear powdered gloves when providing care to the client
- apply adhesive tape when securing an IV insertion site
- use plastic syringes for medication administration
- (Answer is A)

**• a nurse is caring for a client who is scheduled for surgery. While the nurse is witnessing the client's signature, the client states, I trust my doctor but I don't understand what is meant by resecting my intestines. Which of the following actions should the nurse take?:**

A. describe the surgery to the client

- notify the provider
- complete an incident report
- provide brochures about the procedure (Answer is B)

**• A nurse is documenting client care. Which of the following abbreviations should the nurse use?:**

- A. SQ for subcutaneous
- SS for sliding scale
- BRP for bathroom privilege's
- OJ for orange juice

**• a nurse is preparing to bathe a client who has dementia. Which of the following actions should the nurse take?:**

- A. give detailed instructions for the client to follow
- complete the bath even if the client is in distress
- use distractions when bathing the client

- allow the client to select the temperature of the bath water
- (Answer is C)
- **a hospice nurse is caring for a client who has end stage cancer. Which of the following interventions should the nurse include to promote the client's dignity?:**
  - A. provide guided imagery exercises to the client
  - refrain from discussing the client's prognosis
  - suggest that the client keep a journal
  - encourage the client to share their life story (Answer is B)
- **a nurse is caring for a client who has a closed wound drainage system. Which of the following actions should the nurse take?:**
  - A. wear sterile gloves when emptying the container
  - reset the container with the drainage port closed
  - connect the drain to high pressure suction
  - press straight down on the container to create a vacuum
  - (Answer is D)
- **a nurse receives a telephone prescription from a provider for a client who is experiencing pain. Which of the following responses should the nurse make?:**
  - A. will you please spell the name of that medication for me?
  - let me clarify that you want the medication given qid, correct?
  - I will sign my name now and leave a space for you to sign your name

- let me provide you with the client's medical record number for identification
- (Answer is A)
- **During change of shift report, a nurse discovers she overlooked a pre- prescription for a type and cross match of a client who is to have surgery the next day. Which of the following actions should the nurse take first?:** A. inform the provider of the delay in obtaining the type and cross match
  - obtain the client's type and cross match
  - prepare an incident report for risk management
  - document the incident in the client's medical record
- (Answer is A)
- **A nurse is caring for a client who has pneumonia. The nurse should recognize which of the following should be discarded in a biohazard bag?:**
  - A. an emesis basin filled with blood from severe coughing
  - a bedpan containing diarrhea from a client who was receiving antibiotics
  - a disposable tissue containing expectorated sputum
  - a calibrated toilet insert filled with urine
- (Answer is A)
- **a nurse is caring for a client who is receiving enteral feeding via NG tube. Which of the following should the nurse take prior to administering the formula?:**
  - A. check for gastric residual volume
  - encourage the client to breathe deeply and cough
  - flush the tube with sterile 0.9% sodium chloride irrigation
  - encourage the client to take sips of water
- (Answer is A)

**• a nurse is caring for a client immediately following the insertion of an NGtube. Which of the following findings should indicate to the nurse that the tube is placed incorrectly?:**

- A. the client has a dry mouth
- the client is coughing
- the client has active bowel sounds
- the client is hiccupping
- (Answer is B)

**• a nurse is inserting an NG tube for a client who requires gastric decom- pression. Which of he following actions should the nurse take to verify proper placement of the tube?:**

- A. assess the client for a gag reflex
- measure the pH of the gastric
- place the end of the NG tube in the water to observe for bubbling
- auscultate 2.5 cm above the umbilicus while injecting 15 ml of water
- (Answer is B)

**• a nurse is caring for a client who reports a pain level of 5 on a scale form 0-10. The client informs the nurse that pan meds are not an option formanaging pain. Which of the following is an appropriate response by the nurse?:**

- A. would you like a back massage?
- why do you think pain med is not going to help you?
- you may take any herbal remedies you bring from home
- I'm sure it will work if you just give it a chance(Answer is A)