

## Version 6

### ATI- MED SURG PROCTORED PRACTICE QUESTIONS & ANSWERS(60 Q&A)

1. A patient informs the nurse that they are taking an OTC garlic supplement. What possible effect does garlic have on the body?

**Answer:** Effects blood clotting increases risk of bleeding

2. A patient has a complete spinal cord injury at the third cervical vertebra. At what level would you expect the patient to respond to light sensation?

**Answer:** DIAGRAM OF BODY with boxes that you must select to indicate the level. Top box only. FACE

3. After placement of a permanent pacemaker what which would you report as a complication of placement?

**Answer:** Hiccups (Pg. 325)

4. How to take off a condom

**Answer:** Take of off while penis is still erect

5. Ph of 7.30 paCO<sub>2</sub> 49 others WNL– what are they in?

**Answer:** Respiratory acidosis

6. Left sided weakness while using a cane – what is indicative of needing further teaching?

**Answer:** Puts cane on weak side (cane should be on stronger side)

7. What causes intrarenal failure?

**Answer:** Trauma, contrast dye, infection, vasculitis, acute glomerulonephritis, NSAIDS, blood transfusion reaction Pg 675

8. Signs of Peripheral vascular complication?

**Answer:** Ulcer formations, Pulmonary embolism Pg. 404

9. A patient returns to the clinic 72 hours after receiving a subcutaneous dose of purified protein derivative (PPD) to test for tuberculosis exposure. The nurse inspects the injection site on the patient's forearm and finds an induration measuring 12 mm. The nurse informs the client that

**Answer:** "Your skin test was positive for TB exposure, we need to perform an acid-fast bacillus test and a chest X-ray Pg. 250

10. What to do after a hemolytic reaction to a blood transfusion?

**Answer:** Stop the infusion, change the tubing and give NS

11. How do you insert a PICC?

**PICC-** Flat on back (Review Pg. 303)

**Subclavian IV catheter-** Trendelenburg position (head below feet)

12. You are removing a peripheral inserted central catheter, which of the following would you do following removal? **Answer:** Measure the length of the external portion of the catheter

13. Removing a peripheral IV catheter- **Answer:** make sure the tip is intact

14. Patient has INR of 1.5 prior to surgery. What are you going to do?

**Answer:** Prep the patient for surgery

15. Following the surgical placement of a new ileostomy, which of the following would you teach them?

**Answer:** chew food well

Rationale: Patients with a new ostomy involving the small intestine (i.e. an ileostomy) are told post-op to avoid foods that increase flatus (green leafy vegetables, beer, carbonated beverages, dairy, and corn); avoid high-fiber foods for first 2 months; CHEW FOOD WELL; increase fluid intake; and evaluate evidence of blockage.

16. A patient is on isolation due to C difficile infection; which of the following represents correct infection protection protocol?

**Answer:** Collect fecal sample with gloves

17. A patient \_\_\_\_ (has either a list of symptoms or a new prescription for anti-coagulant) \_\_\_\_\_ during medical history they report they have been TAKING IBUPROFEN FOR 3 YEARS. What lab would you expect to be drawn?

**Answer:** Fecal Testing/Stool Guaiac/ Fecal Occult Blood Test (FOBT)

18. A patient has been on total parenteral nutrition for 10 full days, which of the following would be an indication that the nutrition therapy is effective?

**Answer:** Potassium 4.0 (Pg.524)

19. Which of the following clients is MOST at risk for developing atelectasis?

**Answer:** Post anesthesia for bowel resection

- **Rationale:** This patient was the only patient who had abdominal surgery; patients with abdominal surgery are at the HIGHEST risk for atelectasis because the pain from incision/surgical procedure causes them to reflexively breathe in a shallow, cautious way. Positioning (guarding) also causes decreased in lung expansion.

20. The nurse is preparing a patient for paracentesis procedure, which of the following instructions would be given to the patient to decrease the risk of perforation?

**Answer:** Instruct patient to empty their bladder prior to the procedure, this is done in order to decrease the size of a bladder and it reduces the chance of accidental bladder perforation. Pg 527