

ATI RN LEADERSHIP PROCTORED EXAM 2019 VERSION 3

1. A nurse is assessing a school-age child who has heart failure and is taking furosemide.

Which of the following findings should the nurse identify as an indication that the medication is effective?

- a. An increase in venous pressure
- b. a decrease in peripheral edema
- c. a decrease in cardiac output
- d. an increase in potassium levels

2. A nurse is assessing an infant who has acute otitis media. Which of the following findings should the nurse expect (select all that apply)

- a. Increased appetite
- b. enlarged subclavian lymph node
- c. Crying
- d. Restlessness.
- fever

3. A nurse is providing teaching to the parents of an infant who is to undergo pilocarpine iontophoresis Testing for Cystic Fibrosis. Which of the following statements should the nurse include in the teaching?

- a. We will measure the amount of protein in your baby's urine over 24 hour period
- b. The test will measure the amount of water in your baby's sweat
- c. a nurse will insert an IV prior to the test
- d. your baby will need to fast for 8 hours prior to the test

4. A nurse in an urgent care clinic is prioritizing care for children. Which of the following children should the nurse assess first?

- a. A toddler who has nephrotic syndrome and facial edema
- b. a preschool-age child who has a muffled voice and no spontaneous cough
- c. a preschool-age child who has diabetes mellitus and a blood glucose of

200 mg/dL

d. an adolescent who has Crohn's disease and recent weight loss of 5kg
mg(11 lb)

5 .A nurse is providing teaching to the parents of a toddler who is to undergo a sweat chloride test. Which of the following statements should the nurse include?

- a. The purpose of the test is to determine if your child has Crohn's disease
- b. the technician will use a device to produce an electrical current during the test
- c. during the test, your child will be in a room that is cold
- d. your child sweat will be collected over 24 hours

6. A nurse in the emergency department is caring for an adolescent who is requesting testing for STI. Which of the following action is appropriate for the nurse to take?

- a. Request verbal consent from the social worker
- b. contact the client's parents to obtain phone consent
- c. postpone the testing until the client's parents are present
- d. obtain written consent from the client

7. A nurse in the emergency department is assessing the toddler who has hyperpyrexia severe dyspnea and drooling which of the following actions should the nurse take first?

- a. obtain a blood culture from the toddler
- b. administering antibiotic to the toddler
- c. insert an IV catheter for the toddler
- d. prepare the toddler for nasotracheal intubation

8. A nurse is providing teaching to a 10 year old child with scheduled for an arterial cardiac catheterization. Which of the following information should the nurse include in the teaching?

- a. You will have your dressing removed 12 hours after the procedure
- b. you will need to keep your legs straight for 8 hours following the procedure
- c. you will be on a clear liquid diet for 24 hours following the procedure
- d. you will be on bed rest for 2 days after the procedure

10. A nurse is caring for a preschooler who is post-operative following a tonsillectomy. The child

is now ready to resume oral intake which of the following dietary choices should the nurse offer the child?

- a. sugar-free Cherry gelatin
- b. vanilla ice cream
- c. chocolate milk
- d. lime flavored ice pop

11. A nurse is caring for an infant who has Patent ductus arteriosus. The nurse should identify that the defect is a switch of the following locations of the heart. (you will find hot spots to select in the artwork below. Select only the hot spot that corresponds to your answer) Answer: B

12. A nurse is caring for a 10 month old child was brought to the emergency department by his parents following a head injury. Which of the following actions should the nurse take first?

- a. Inspect for fluid leaking from the ears (thinking about CSF leakage severe trauma = urgent, after respiratory status is confirmed)
- b. assess respiratory status
- c. check pupil reactions
- d. examine the scalp for lacerations

13. A charge nurse is planning care for an infant who has failure to thrive. Which of the following actions should the nurse include in the plan of care?

- a. Assign consistent nursing Staff Care for the infant
- b. Keep infant in a visually stimulating environment
- c. use half-strength formula when feeding the infant
- d. give the infant fruit juice between feedings

14. A nurse is providing teaching about home care to the parent of a child who has scabies. Which of the following instruction should the nurse include in the teaching?

- a. Wash your clients hair with shampoo containing Ketoconazole
- b. soak Combs and brushes in boiling water for 10 minutes
- c. apply petroleum jelly to the affected areas
- d. treat everyone who came into close contact with a child

15. A nurse is caring for a preschooler who refuses to take a start dose of

oral

diphenhydramine. Which of the following statements should the nurse make?

- a. The medication isn't bad it taste like candy
- b. let me know when you want to take the medication
- c. the medication will treat your hypersensitivity reaction (too much "Adult"terminology/
jargon for pre schooler to understand)
- d. sometimes, when a child has to take medication, they feel sad.

16. A nurse is teaching the parent of a school-age child about bicycle safety. Which of the following instructions should the nurse include in the teaching?

- a. Your child should walk the bicycle through intersections
- b. your child's feet should be three to six inches off the ground when Seated on the bicycle
- c. you should try to keep the bicycle at least three feet from the curb whileriding in the street
- d. your child should ride the bicycle against the flow of traffic

17. A nurse is caring for a school-age child following the application of a cast to a Fractured right tibia. Which of the following actions should the nurse take first?

- a. Teach the child about cast care
- b. Pad the edges of the cast
- c. administer pain medication
- d. Elevate the child's leg

18.

19. A nurse is preparing a school-age child for an invasive procedure. Which of the following actions should the nurse plan to take?

- a. plan for 30 minute teaching session about the procedure
- b. use vague language to describe the procedure
- c. explain the procedure to the child when they are in the playroom
- d. demonstrate deep breathing and Counting

exercises 20.

21. A nurse is preparing to collect a urine specimen from a female infant using a urine collection bag. Which of the following actions should the nurse take?

- Apply lidocaine gel to the perineum before attaching the bag
- Position the opening of the bag over the urethra and the anus
- Stretch the perineum taught when applying the bag
- Place a snug fitting diaper over the drainage bag

22. A nurse is planning care for a toddler who has developed oral ulcers in response to chemotherapy. Which of the following actions should the nurse include in the plan of care?

- a. Schedule routine Oral Care every 8 hours
- b. Cleanse the gums with saline soaked gauze
- c. more sending me closer with lemon glycerin swabs
- d. administer oral viscous lidocaine

23. A nurse is providing discharge teaching to the parents of an infant who is at risk for sudden infant death syndrome (SIDS). Which of the following statements by the parent indicates an understanding of the teaching?

- a. I will have my baby sleep next to me in the bed during the night
- b. I will place my baby's stuffed animal in the corner of her crib while she sleeps
- c. I will dress my baby in lightweight clothing to sleep
- d. I will lay my baby on her side to sleep for her naps

24. A nurse is monitoring an infant who is receiving opioids for pain. Which of the following findings should indicate to the nurse that the medication is having a therapeutic effect?

- a. Increased blood pressure
- b. Limb withdrawal
- c. relaxed facial expression
- d. bradycardia

25. A nurse is caring for a three-month-old infant who has cleft of the soft palate. Which of the following actions should the nurse take?

- a. discontinue feeding if the client's eyes become watery
- b. postpone burping the infant until after completing each feeding
- c. Elevate the infant's head to a 10 degree angle during feedings
- d. Feed the infant 177.4 ml (6 oz) of Formula 3 times a day

26. A nurse is caring for a child who has hyponatremia. Which of the following findings should the nurse expect?

- a. Tetany