

ATI Advanced MED SURG Proctored 2023 WITH Glasgow  
COMA Scale REAL EXAM

nursing (Chamberlain University)

1. A nurse in a burn treatment center is caring for a client who is admitted with severe burns to both lower extremities and is pending an escharotomy. The client's spouse asks the nurse what the procedure entails. Which of the following nursing statements is appropriate?

- a. **"large incisions will be made in the eschar to improve circulation"**
- b. "I can call the doctor back here if you want me to"
- c. "a piece of skin will be removed and grafted over the burned area"
- d. "dead tissue will be surgically removed"

2. A nurse is monitoring the fluid replacement of a client who has sustained burns. Which of the following fluids is used in the first 24 hours following a burn injury?

- a. 5% dextrose in water
- b. 5% dextrose in normal saline
- c. normal saline
- d. **lactated ringers**

3. A nurse is caring for a client who has full-thickness burns all over 75% of his body. Which of the following methods is appropriate to accurately monitor the cardiovascular system?

- a. auscultate cuff blood pressure
- b. palpate pulse pressure
- c. **obtain a central venous pressure**
- d. monitor the pulmonary artery pressure

4. A nurse is assessing the depth and extent of a client who has severe burns to the face, neck, and upper extremities. Which of the following factors is the first priority when assessing the severity of the burn?

- a. Age of the client
- b. Associated medical history
- c. Location of the burn
- d. **Cause of the burn**

5. A client arrives at the emergency dept following an explosion at the chemical plant. He has deep partial and full-thickness chemical burns over more than 25 % of his body surface area. What is the nurse's priority intervention?

- a. Initiate fluid resuscitation
- b. Medication for pain
- c. Administer antibiotics

**d. Maintain a patent airway**

6. A nurse is caring for a client who came to the emergency department reporting chest pain. The provider suspects a myocardial infarction. While waiting for the laboratory to report the client's troponin levels, the client asks what this blood test will show. The nurse should explain that troponin is

- a. An enzyme that indicates damage to brain, heart, and skeletal muscle tissues
- b. A protein whose levels reflect the risk for coronary artery disease
- c. A heart muscle protein that appears in the bloodstream when there is damage to the heart**
- d. A protein that helps transport oxygen throughout the body

7. A nurse is assessing a client who has disseminated intravascular coagulation (DIC). Which of the following should the nurse expect in the findings?

- a. Excessive thrombosis and bleeding
- b. Progressive increase in platelet production
- c. Immediate sodium and fluid retention
- d. Increased clotting factors**

8. A nurse is about to administer warfarin (Coumadin) to a client who has atrial fibrillation. When the client asks what his medication will do, which of the following is an appropriate nursing response?

- a. It helps convert atrial fibrillation to sinus rhythm
- b. It dissolves clots in the bloodstream
- c. It slows the response of the ventricles to the fast atrial impulses
- d. It prevents strokes in clients who have atrial fibrillation**

9. A nurse in a cardiac care unit is caring for a client with acute heart failure. Which of the following findings should the nurse expect?

- a. Decreased brain natriuretic peptide (BNP)
- b. Elevated central venous pressure (CVP)**
- c. Decreased pulmonary pressure
- d. Increases urinary output

10. A client comes into the ED reporting nausea and vomiting that worsens when lying down and without relief from antacids. The provider suspects acute pancreatitis. Which of the following lab test results should the nurse expect to see if the client has acute pancreatitis?

- a. Decreased WBC

**b. Increased serum amylase**

c. Decreased serum lipase

d. Increased serum calcium

11. A nurse in the ICU is caring for a client who has acute respiratory distress syndrome (ARDS) and is receiving mechanical ventilation via an endotracheal tube. The provider plans to extubate her within the next 24 hours. Which of the following is an important criterion for extubating the client?

a. Ability to cough effectively

**b. Adequate tidal volume without manually assisted breaths**

c. No indication of infection

d. No need for supplemental oxygen

12. A nurse is caring for a client following a CT scan with dye who suffered from an anaphylactic reaction. Which of the following conditions requires a priority nursing response?

a. urticaria

**b. stridor**

c. tachypnea

d. angioedema

13. A nurse is caring for a female client who came in to the ED reporting SOB and pain in the lung area. Her heart rate is 110/min, resp. rate 40/min, and blood pressure 140/80 mmHg. Her arterial blood gases are: pH 7.5, PaCO<sub>2</sub> 29 mmHg, PaO<sub>2</sub> 60 mmHg, HCO<sub>3</sub><sup>-</sup> 20 mEq/L, and SaO<sub>2</sub> 86%. Which of the following is the priority intervention?

a. Prepare for mechanical ventilation

**b. Administer oxygen via face mask**

c. Prepare to administer a sedative

d. Monitor for pulmonary embolism

14. A nurse is monitoring a client who has just had a thoracentesis to remove pleural fluid. Which of the following clinical manifestations indicate a complication that requires notifying the provider immediately?

a. Serosanguineous drainage from the puncture site

b. Discomfort at the puncture site

**c. Increased heart rate**

d. Decreased temperature

15. A group of college students was attending a weekend football rally when one of the students stumbled and fell into the bonfire. Although several friends quickly

intervened, the client sustained partial-thickness burns to both lower legs, chest, and both forearms. Which of the following is priority nursing action when the client is brought to the ED?

- a. cover the burned area with sterile gauze
- b. inspect mouth for signs of inhalation**
- c. administer intravenous pain medication
- d. draw blood for a CBC

16. A triage nurse in an emergency dept is caring for a client who has gunshot wound to the right side of chest. The nurse notices thick dressing on the chest and sucking noise coming from the wound. The client has a blood pressure of 100/60 mm Hg, a weak pulse rate of 118/min, and a respiratory rate of 40/min. Which of the following actions should the nurse take initially?

- a. Raise the foot of the bed to a 90 degree angle
- b. Remove the dressing to inspect the wound
- c. Prepare to insert a central line
- d. Administer oxygen via nasal cannula**

17. A nurse is suctioning the endotracheal tube of a client who is on a ventilator. The client's heart rate increases from 86/min to 110/min and becomes irregular. The nurse should know that the client requires which of the following?

- a. A cardiology consult
- b. Less frequent suctioning
- c. An antidysrhythmic medication
- d. Pre-oxygenation prior to suctioning**

18. The nurse is caring for a client who is receiving a blood transfusion. The transfusion started 30 minutes ago at a rate of 100 mL/hr. The client begins to complain of low back pain and headache and is increasingly restless. What is the first nursing action?

- a. Stop the transfusion, disconnect the blood tubing, and begin a primary infusion of normal saline solution**
- b. Slow the infusion and evaluate the vital signs and the client's history of transfusion reactions
- c. Slow the infusion of blood and begin infusion of normal saline solution from the Y connector.
- d. Recheck the unit of blood for correct identification numbers and crossmatch information

19. A client with a diagnosis of disseminated intravascular coagulation (DIC) has the following assessment findings: blood pressure of 76/56, temperature 102.6