VATI RN Comprehensive Predictor Exam Challenge Questions with Correct Solutions 2023-2024.

Are required for clients who have an infectious disease that requires airborne precautions, or clients who require a protective environment. are preferred for clients who are on droplet and contact precautions. These clients can cohort if no _____ are available and if all of the following are true. •The clients have the same active infection with the same micro-organisms. •The clients remain at least 3 feet away from each other. •The clients have no other existing infection. ______ is also preferred for the following clients. •Client who are agitated •Client who have dementia and a history of wandering •Clients who require a quiet environment (those at risk for increased intracranial pressure [stroke, traumatic brain injury]) • Clients who are at risk for sensory overload (those who are having pain, are acutely ill, have invasive tubes [nasogastric, IVs, endotracheal], or have reduced cognitive function [head injury]) •Clients who require privacy (those who are near death) - Verified Answer: Private rooms

Predictability of outcome •Will the completion of the task have a predictable outcome? •Is it a routine treatment? •Is it a new treatment? Potential for harm •Is there a chance that something negative can happen to the client (risk for bleeding, risk for aspiration)? •Is the client unstable? Complexity of care •Are complex tasks required as a part of the client's care? •Is the delegatee legally able to perform the task and do they have the skills necessary? Need for problem solving and innovation •Is nursing judgment required while performing the task? •Does it require nursing assessment skills? Level of interaction with the client •Is there a need to provide psychosocial support or education during the performance of the task? • **Verified Answer: Prior to delegating client care, consider the following.**

TO PN Monitoring findings (as input to the RN's ongoing assessment) Reinforcing client teaching from a standard care plan Performing tracheostomy care Suctioning Checking NG tube patency Administering enteral feeding Inserting a urinary catheter Administering medication (excluding IV medication in some states). TO AP Activities of daily living (ADLs) Bathing Grooming Dressing Toileting Ambulating Feeding (without swallowing precautions). Positioning Routine tasks. Bed making. Specimen collection Intake and output Vital signs (for stable clients). - Verified Answer: Examples of tasks nurses can delegate to practical nurses and assistive personnel

Data that needs to be collected •Method and timeline for reporting, including when to report concerns/findings •Specific task(s) to be performed; client-specific instructions •Expected results, timelines, and expectations for follow-up communication

RIGHT DIRECTION AND COMMUNICATION: Delegate an AP to assist the client in room 312 with a shower before 0900 and to notify the nurse when complete.

WRONG DIRECTION AND COMMUNICATION: Delegate an AP to assist the client in room 312 with morning hygiene. - Verified Answer: Right direction/communication (five rights of delegations)

1. Identify and respond: Determine the need for knowledge or skill proficiency 2. Analyze: Look for deficiencies, and develop learning objectives to meet the need 3. Research: Resources available to address learning objectives based on evidence-based practice 4. Plan: Program to address objectives using available resources 5. Implement: Program(s) at a time conducive to staff availability; consider online learning modules 6. Evaluate: Use materials and observations to measure behavior changes secondary to learning objectives - Verified Answer: Steps in providing educational programs

Four defects that result in mixed blood flow: Pulmonary stenosis, ventricular septal defect, overriding aorta, right ventricular hypertrophy. Cyanosis at birth: progressive cyanosis over the first year of life. Systolic murmur. Episodes of acute cyanosis and hypoxia (blue or "Tet" spells knee chest position or squating). SURGICAL PROCEDURES Shunt placement until able to undergo primary repair. Complete repair within the first year of life. - **Verified Answer:** Tetralogy of Fallot.

Ventricular septal defect (VSD) (20.1) Atrial septal defect (ASD), Patent ductus arteriosus (PDA), - Verified Answer: Defects that increase pulmonary blood flow

A hole in the septum between the right and left ventricle that results in increased pulmonary blood flow (left-to-right shunt) •Loud, harsh murmur auscultated at the left sternal border •Heart failure Many VSDs close spontaneously early in life. - Verified Answer:
Defects that increase pulmonary blood flow Ventricular septal defect
(VSD)

A hole in the septum between the right and left atria that results in increased pulmonary blood flow (left-to-right shunt) •Loud, harsh murmur with a fixed split second heart sound •Heart failure •Asymptomatic (possibly) - Verified Answer: Defects that increase pulmonary blood flow Atrial septal defect (ASD)

A condition in which the normal fetal circulation conduit between the pulmonary artery and the aorta fails to close and results in increased pulmonary blood flow (left-to-right shunt) •Systolic murmur (machine hum) •Wide pulse pressure •Bounding pulses •Asymptomatic (possibly) •Heart failure •Rales - Verified Answer: Defects that increase pulmonary blood flow Patent ductus arteriosus (PDA)

include those where blood flow exiting the heart meets an area of narrowing (stenosis), which causes obstruction of blood flow. •The pressure that occurs before the defect is increased (ventricle) and the