

### **Non-Proctored B**

1. A home health nurse is visiting with an older adult client. Which of the following observations indicate the need for home modification?
  - a. The home has power strips that have breakers.
  - b. The client uses an electric toaster oven for cooking.
  - c. There are two rocking chairs in the living room.
  - d. The bathtub has a seat and a hand-held shower head.

There are two rocking chairs in the living room. Reasoning: rocking chairs and swivel chairs will require a modification. The nurse should block the chairs to keep them stable so that the client can easily get in and out.

2. A case manager is planning an educational program for a client who has diabetes mellitus. Which of the following activities should the nurse include when using the psychomotor domain of learning?

- a. Review a color diagram of the food pyramid with the client.
- b. Show the client a video about how to monitor blood glucose levels.
- c. Observe the client's technique for drawing up insulin.
- d. Encourage the client to discuss their feelings of self-worth.

Observe the client's technique for drawing up insulin

3. A case manager is developing a discharge plan for a client who has spinal cord injury and is in a rehab facility. Which of the following actions should the nurse take first?

- a. Hold a care conference with the client to discuss treatment options.
- b. Contact service providers to determine the availability of services offered.

- c. Determine the client's ability to perform self-care.
- d. Evaluate the client's satisfaction with the case manager's services.

Determine the client's ability to perform self-care. Reasoning: The first action the nurse should take when using the nursing process is to assess the client's needs. Determining a client's needs is the first step of the case management process which allows the case manager to plan client-centered care.

4. A school nurse is teaching health promotion to a group of staff members who sit at a desk and use a computer for 8hr at a time. Which of the following information is the priority for the nurse to include

- a. "Take a walk after work."
- b. "Point and flex your toes periodically."
- c. "Have your visual acuity assessed regularly."
- d. "Adjust your chair so that your elbows are at desk height."

Point and flex your toes periodically. Reasoning: the greatest risk to staff members who are immobile for long periods of time is a venous thromboembolism. Therefore, the nurse should encourage the staff members to frequently change the position of their feet and legs.

5. A nurse is assessing a new client. Which of the following information should the nurse include in the cultural portion of the assessment?

- a. Food preferences
- b. Employment status
- c. History of illnesses
- d. Sexual orientation

food preferences. Reasoning: food preferences are a part of cultural

6. A nurse is collecting demographic data as part of a community assessment. Which of the following information should the nurse include?
  - a. Racial distribution
  - b. Family genograms
  - c. Number of open water sources
  - d. Presence of condemned buildings

racial distribution. Reasoning: racial distribution is part of demographic data. Other types of demographic data include marital information, population density, and death and birth rates.

7. A nurse is caring for a client who has terminal lung cancer and is receiving hospice care. Which of the following statements should the nurse ID as an indication that the client is in the denial stage of the grief process?
  - a. "I'm looking forward to my daughter's wedding next year."
  - b. "I don't deserve to die. This just isn't fair."
  - c. "If I could just make it through this, I'd never smoke again."
  - d. "I'm going to plan my memorial service next week."

"I'm looking forward to my daughter's wedding next year". Reasoning: during the denial stage of the grief process, the client rejects the reality of the impending loss.

8.

An occupational health nurse is planning to use an interpreter during an educational session with a group of workers who speak a different language than the nurse. Which of the following actions should the nurse take?

.Instruct the interpreter to guide the nurse in providing information in a culturally-sensitive manner.

-Ask the interpreter to add information she feels might be necessary.

-Choose an interpreter who speaks the workers' language and dialect.

-Evaluate the interpreter's approach to clients prior to the educational session.

-Encourage the interpreter to paraphrase the workers' questions and responses.

1) Instruct the interpreter to guide the nurse in providing info in a culturally-sensitive manner

2) Choose an interpreter who speaks the workers' language and dialect

3) Evaluate the interpreter's approach to clients prior to the edu session

9. A nurse in a clinic is planning teaching for a client who was newly diagnosed with Hepatitis C. Which of the following instructions should the nurse include in the teaching?
  - a. Consume a low-carbohydrate diet until symptoms resolve.
  - b. Schedule an appointment for an immunoglobulin injection.
  - c. Abstain from sexual intercourse until antibody tests are negative.
  - d. Wear a mask in public places while receiving treatment.

Abstain from sexual intercourse until antibody tests are negative. Reasoning: Hep C is transmitted through sexual intercourse. Therefore, the nurse should instruct abstain from sexual intercourse until antibody tests are negative.

10. AA home health nurse is reviewing several client requests regarding complementary strategies. The nurse should ID that which of the following alternative therapies is contraindicated for the client?
- Hippotherapy for a school-age child who has cerebral palsy
  - Acupressure therapy for a client who has back pain
  - Kava for a client who has cirrhosis
  - Valerian for a client who has anxiety and insomnia

Kava for a client who has cirrhosis. Reasoning: although kava has been used to promote sleep, it can cause severe liver damage, which can lead to the need for a liver transplant. using kava could worsen the condition of a client who has cirrhosis.

Therefore, the nurse should plan to discuss safer alternatives with the client.

11. AA community health nurse is teaching a client who was newly diagnosed with active pulmonary tuberculosis about disease transmission. Which of the following info should the nurse include?
- Household members should be placed in respiratory isolation.
  - Wear a mask in the home.
  - Household members should take isoniazid for at least 6 months.
  - Have a repeat Mantoux test in 3 months.

Household members should take isoniazid for at least 6mo. Reasoning: household members are at risk for developing the disease. Taking isoniazid prophylactically for at least 6 months is recommended.

12.

A nurse in a rural community is planning edu for a young adult client who is a migrant farm worker. Which of the following actions should the nurse include?

- Provide environmental health information.
- Refer the client for a tuberculosis screening.
- Provide skin cancer information.
- Recommend a dental health screening.
- Provide forms to apply for Medicare.
- Provide envi health information
- .- Refer the client for a TB screening
- Provide skin cancer info
- Recommend a dental health screening

13. AA nurse is teaching a client who has a new diagnosis of hepatitis A about how to prevent the spread of the virus. Which of the following instruction should the nurse include?

- "Double-bag tissues used for coughing or blowing the nose."
- "Clean your bathroom fixtures with a chlorine bleach solution."
- "Use shared hand towels to dry your hands after washing."

d. "Use barrier contraceptives during sexual contact for 2 weeks after beginning treatment."

Clean your bathroom fixtures with a chlorine bleach solution. Reasoning: the client should clean bathroom fixtures with a 10:1 chlorine bleach solution. The hepatitis A virus spreads via feces and survives on human hands since it is resistant to soap and detergents.

14. A community health nurse is planning to establish a community garden to introduce new nutritious food options in the area. Which of the following actions should the nurse take first to initiate the plan?

- a. Identify community members who demonstrate an interest in the project.
- b. Hold a community information session to inform the residents of the plan.
- c. Select residents to take on leadership roles in the project.
- d. Monitor the progress of the project to keep the project on course

Identify community members who demonstrate an interest in the project. Reasoning: the first action the nurse should take when using the nursing process is to assess the community. By identifying those community members who demonstrate an interest in the project, the nurse can establish a local support group who will assist in engaging other community residents with establishing the garden.

15. A palliative care nurse is teaching a client who has cancer about the services that are available for the client. Which of the following statements should the nurse identify as an indication that the client understands the teaching?

- a. "If I begin palliative care, I will have to stop my chemotherapy."
- b. "I can begin palliative care when I have less than 6 months to live."
- c. "This type of care can help me with pain control."
- d. "My family will not be involved with this type of care program."

This type of care can help me with pain control. Reasoning: Clients who have cancer might require complicated treatments that can cause pain, disfigurement, and emotional and psychological distress. Palliative care provides support and management of the disease process regardless of the prognosis, including pain management.

16. A community health nurse is teaching a group of clients about environmental health hazards. Which of the following examples should the nurse include as a possible source of carbon monoxide exposure?

- a. Washing machines
- b. Gas ranges
- c. Air conditioners
- d. Electric space heaters

gas ranges. Reasoning: carbon monoxide is an odorless, colorless, tasteless gas that is emitted into the air. Gas ranges, motor vehicles, and fire places are potential sources for carbon monoxide exposure

17. A community health nurse is planning a health education program for adults. The nurse should plan to take which of the following actions during the program?

- a. Use medical terminology throughout the presentation.

- b. Provide take-home materials written at a 6th-grade level.
- c. Extend the presentation to include as much information as possible.
- d. Avoid the use of technology to display images and videos.

Provide take-home materials written at 6th grade level. Reasoning: The AMA and the NIH recommend that take home documents are written at a 6-8 grade level or lower to promote client understanding of the provided material.

18. An occupational health nurse is assessing a client who reports taking ibuprofen daily. The nurse should counsel the client about the risk for which of the following adverse effects?
- a. Urinary retention
  - b. Polycythemia
  - c. Hypokalemia
  - d. Gastric ulcerations

Gastric ulcerations. Reasoning: daily use of NSAIDs such as ibuprofen, increase the risk for gastric ulceration, perforation, and hemorrhage.

19. A public health nurse is developing a presentation for local day care providers about infectious childhood diseases. Which statements should the nurse include?
- a. "Respiratory syncytial virus is spread through contact with respiratory secretions from an infected person."
  - b. "Rotavirus infections in children peak during the summer months."
  - c. "Children who have fifth disease will exhibit bloody diarrhea."
  - d. "Antiviral medications shorten the duration of a shigella infection."

Respiratory syncytial virus is spreading through contact with respiratory secretions from an infected person. Reasoning: the nurse should include the statement in the presentation because respiratory syncytial virus (RSV) is spread by direct contact with respiratory secretions while within 3 feet of a person who is infected. Manifestations of RSV include dyspnea, tachypnea, coughing and wheezing.

20. A home health nurse is planning care for the day. Which client should the nurse visit first?
- a. An older adult client who was treated in the emergency department last night for a stage 3 pressure injury
  - b. A school-age child who was treated in the emergency department last night for status asthmaticus
  - c. An older adult client who has a newly prescribed antihypertensive medication and needs a BP check
  - d. A school-age child whose percutaneous endoscopic gastrostomy (PEG) tube needs changing

School age child tx in ED last night for status asthmaticus. Reasoning: when using ABC approach to client care, the nurse should determine that the client who recently experienced status asthmaticus is the priority. Status can change rapidly, and at times, intensive care monitoring is required.

21. AA nurse in a pediatric clinic is providing care to several clients. The nurse should recognize that which condition is included on the Nationally Notifiable Infectious Condition list
- Rotavirus
  - Erythema infectiosum
  - Scarlet fever
  - Varicella

Varicella. Reasoning: the nurse should recognize that varicella is included on the Nationally Notifiable Infections Conditions list. States voluntarily conduct surveillance and report instances of certain diseases to the CDC so the data can be compiled and released each year.

22. AA nurse is performing a home visit for a client who has TB. As the nurse is leaving the client's house a neighbor asks "is it true that my neighbor has TB?", which response should the nurse make
- "You should ask the public health department."
  - "Do you have questions about tuberculosis?"
  - "Have you ever been tested for tuberculosis?"
  - "You should take precautions against this infection."

Do you have questions about TB? Reasoning: the response addresses the neighbor's concerns while protecting the client's confidentiality.

23. AA community health nurse is planning an educational program for farmers about occupation health risk. Which risk should the nurse include
- Hypertension
  - Diabetes mellitus
  - Cardiomyopathy
  - Respiratory disorders

Respiratory disorders. Reasoning: farmers are at an increased risk for respiratory disorders due to exposure to agricultural chemicals, such as herbicides and pesticides. Other health risks for farmers include accidents with vehicles and machinery, dermatitis, dental problems, and stress and anxiety disorders.

24. AA public health nurse is developing a visual health program by using a community-oriented approach. Which of the following interventions should the nurse include
- Teach a client who has vision loss about safety in the home environment.
  - Provide genetic counseling to the family of a newborn who has congenital cataracts.
  - Consult with the local school nurse to schedule yearly vision screenings for students.
  - Develop a plan of care for a client who was newly diagnosed with glaucoma.

Consult with the local school nurse to schedule yearly vision screenings for students. Reasoning: consulting with the local school nurse to schedule yearly vision screenings for students focuses on the health care of population rather than illness care for individuals. Therefore, this intervention is using a community-oriented approach.

25. AA community health nurse is participating in a group session for clients who have alcohol and substance use disorders. Which of the following information should the nurse provide regarding support programs for these individuals
- Alcoholics Anonymous (AA) is a support group that requires disclosure of attendance to employers.
  - Narcotics Anonymous (NA) is a one-on-one program that assists clients.
  - Alcoholics Anonymous (AA) assists a client who has an addiction to alcohol with developing a daily recovery program.
  - Narcotics Anonymous (NA) will cure a client from their substance use disorder if they stays involved with the program.

AA assists a client who has an addiction to alcohol with developing a daily recovery program. Reasoning: AA is a support group that will assist a client who has an addiction to alcohol and other substances with developing a daily recovery program using a 12 step approach. AA's primary purpose is to help the client obtain and maintain sobriety.

26. AA nurse is conducting a home visit with a client who reports a history of partner violence. The nurse should ID that which of the following findings places the client at greatest risk for partner violence
- The client is at 13 weeks of gestation.
  - The client states they are leaving their partner.
  - The client recently started a new job.
  - The client visits friends without the partner's knowledge.

Client states they are leaving their partner. Reasoning: a client's decision to leave their partner places them at greatest risk for partner violence because the perpetrator can view the client as a possession and fear loss of control. Whether the client actually leaves the relationship or just threatens to leave, the client is at greatest risk for violence during this time.

27. AA nurse is developing a genogram for a client to determine edu needs. Which of the following health risk info should the nurse expect to obtain with this tool
- Biological
  - Behavioral
  - Social
  - Economic

biological. Reasoning: a family genogram tracks the incidence of disease over multiple generations of a family and will identify biological risk factors.

28. AA home health nurse is caring for a client who has breast cancer. Which of the following assessment findings should the nurse ID as an indication that the client is coping effectively
- Exhibits anhedonia
  - Makes eye contact
  - Sleeps 14 hr each day
  - Laughs inappropriately

makes eye contact



29. AA nurse in a clinic is caring for a client who reports taking ginkgo biloba ... The nurse should instruct the client that ginkgo biloba can alter the effects of which of the following medications
- Warfarin
  - Metoprolol
  - Digoxin
  - Diltiazem

warfarin. Reasoning: ginkgo biloba can hinder coagulation. Therefore, the nurse should instruct the client that it can alter the effects of warfarin.

30. AA nurse is caring for a client who has stage IV pancreatic cancer and has received info regarding available treatment options. Which is the responsibility of the nurse if the client chooses to forgo treatment and enter hospice care
- Make the hospice referral in accordance with the client's decision.
  - Verify that the client's health insurance pays for hospice services.
  - Recommend a second opinion from another provider.
  - Assess whether or not the family agrees with the client's decision.
- make the hospice referral in accordance with the client's decision

31. AA community health nurse ID an increase in the occurrence of osteoporosis-related fractures in female clients who are experiencing menopause. Which primary prevention strategy should the nurse implement
- Advise the clients to avoid live-virus vaccines.
  - Encourage the clients to participate in weight-bearing activities.
  - Educate the clients about the importance of avoiding sun exposure.
  - Instruct at-risk clients to increase their intake of foods high in vitamin E.
- encourage the clients to participate in weight-bearing activities

32. AA home health nurse is caring for a client who is immunocompromised due to chemotherapy. Which of the following statements should the nurse make regarding food safety
- "Eat any leftovers within one week of preparation."
  - "Keep the inside of your refrigerator at 47 degrees Fahrenheit or below."
  - "Beef is the only meat that is acceptable to eat with a pink center."
  - "Frozen food should be cooked immediately after it is thawed."

Frozen food should be cooked immediately after it is thawed. Reasoning: the nurse should inform the client that frozen food should be thawed in a bowl in the refrigerator and should be cooked as soon as it is thawed.

33. AA community health nurse is conducting a vision screening at a health fair for an older adult client who has age-related macular degeneration. Which of the following statements should the nurse ID as an indication that the client is adapting to the changes
- "I have a prescription bottle magnifier to help me read my pill bottle labels."
  - "I canceled all of my magazine subscriptions since I can't read them."

- c. "I purchased green towels to use in my bathroom."
- d. "I have learned that I cannot to go outside when the sun is

I have a prescription bottle magnifier to help me read. Reasoning- the client can obtain a prescription bottle magnifier, or other low vision optical devices, to assist with reading the labels on prescriptions, which helps the client to remain independent.

34. AA school nurse is reviewing the records of four students who are returning to school after being dx with MRSA. Which of the following actions should the nurse take
- a. Coordinate an immunization clinic at the school.
  - b. Recommend prophylactic treatment for classmates.
  - c. Report the cases of MRSA to child protective services.
  - d. Provide education about MRSA throughout the school system.

Provide edu about MRSA. Reasoning: the nurse should provide education about handhygiene and self-care to help prevent the spread of MRSA throughout the school and community.

35. AA school nurse is conducting hearing screening procedures in an elementary school. Which of the following instructions should the nurse provide when performing the Rinne test
- a. "After I place the tuning fork on your scalp, tell me if you hear the sound better in one ear or the same in both ears."
  - b. "Use your finger to close one ear while I whisper some numbers into your other ear."
  - c. "After I place this tuning fork behind your ear, tell me when you no longer hear the sound."
  - d. "You'll wear headphones and press the button when you hear a sound." after I

place this tuning fork behind your ear ...

36. aa community health nurse is creating a program to reduce violence in the community. which of the following interventions should the nurse ID as secondary prevention
- a. Creating a public service announcement about the warning signs of partner abuse
  - b. Recognizing and reporting suspected abuse to the appropriate protective services
  - c. Collaborating with support agencies to ensure the ongoing treatment for abuse
  - d. Educating individuals and groups about preventing domestic and community abuse

recognize and report. Reasoning: Secondary prevention is an intervention that focuses on early detection of a health problem to facilitate early diagnosis and treatment.

Recognizing and reporting suspected abuse facilitates diagnosis and intervention, helping to prevent further abuse.

37. AA home health nurse is conducting a follow-up visit for a client who was recently discharged from an acute rehab program for alcohol use disorder. Which of the