

Question 1

Correct

Mark 1.00 out of 1.00

Question text

A client has a new tracheostomy. Which of the following interventions should the nurse include when performing tracheostomy care?

Select one:

- a. Suction the tracheostomy before beginning care.
- b. Remove soiled dressing with sterile gloves.
- c. Change tracheostomy ties when soiled.

CORRECT. Tracheostomy ties should be changed once a day or when soiled. Secure new ties in place before removing old soiled ones to prevent accidental decannulation. One or two fingers should be able to be placed between the tie tape and the neck.

- d. Clean disposable inner cannula with hydrogen peroxide.

Feedback

The correct answer is: Change tracheostomy ties when soiled.

Question 2

Correct

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Flag question

Question text

A client has fallen in the bathroom. Which of the following is the priority nursing action?

Select one:

- a. Obtain the client's vital signs

b. Assess the client's level of consciousness

CORRECT. Safety first. Before proceeding with the assessment or taking vital signs assess the level of consciousness. Complaints of pain, any joint or bone deformity may provide evidence of fractures or dislocations. Inspection of the skin will determine lacerations, contusions, or hematomas that may need to be treated. After a report to the provider, additional x-rays or exams may be ordered.

c. Notify the healthcare provider

d. Assist the client back to bed

Feedback

The correct answer is: Assess the client's level of consciousness

Question 3

Correct

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Question text

A nurse is providing discharge education for a female client diagnosed with Chlamydia. Which statement made by the client would indicate the need for further instruction?

Select one:

a. "Symptoms of reinfection may include yellow vaginal discharge."

b. "I will return to the clinic in one month for re-screening."

CORRECT. No test for cure is required, but all women should be rescreened for re-infections 3 to 12 months after treatment because of high risk for pelvic inflammatory disease (PID). There is less evidence of the need for re-screening of treated men, but it should be considered.

c. "I will refrain from sexual intercourse until completion of antibiotics."

d. "Possible complications to monitor for include pelvic inflammatory disease."

Feedback

The correct answer is: "I will return to the clinic in one month for re-screening."

Question 4

Correct

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Question text

A nurse is caring for a client with a diagnosis of sepsis with a temperature of 40.8 C (105.5 F). The provider has ordered a cooling blanket. Which intervention is appropriate to delegate to an Unlicensed Assistive Personnel (UAP)?

Select one:

a. Report shivering by the client

CORRECT. The unlicensed assistive personnel should be taught to observe for and report shivering during any form of external cooling. Shivering may indicate that the client is being cooled too quickly.

b. Bathe the client to keep the skin damp

c. Obtain a fan for the client's use

d. Assess the client's skin for any reddened

Feedback

The correct answer is: Report shivering by the client

Question 5

Correct

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Flag question

Question text

A nurse is triaging clients following a mass casualty event. The nurse should place a client who has sustained fatal injuries in which of the following triage categories?

Select one:

- a. Emergent Category (Class I)
- b. Urgent Category (Class II)
- c. Nonurgent Category (Class III)
- d. Expectant Category (Class IV)

CORRECT. Class IV (Expectant Category) is reserved for clients who are not expected to live and will be allowed to die naturally. Comfort measures may be provided, but restorative care will not. These clients are the lowest priority when a mass casualty has occurred.

Feedback

The correct answer is: Expectant Category (Class IV)

Question 6

Correct

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Question text

A nurse is positioning a client for a urinary catheterization. Which of the following nursing actions would be best in preventing musculoskeletal injuries during the procedure?

Select one:

- a. Positioning the client using a draw sheet.
- b. Raising the bed to a comfortable height.

CORRECT. Working with the bed at a comfortable height is more ergonomically appropriate to prevent back strain and possible injury, to prevent bending and/or twisting from the waist.

c. Narrowing the base of support.

d. Using the non-dominant hand to insert the catheter.

Feedback

The correct answer is: Raising the bed to a comfortable height.

Question 7

Correct

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[Flag question](#)

Question text

A nurse is caring for an older adult client with delirium. Which intervention will most effectively reduce the client's risk for falls?

Select one:

a. Place bedside table in close proximity.

b. Hourly rounding by the nurse.

CORRECT. In the health care environment, hourly rounding by nurses significantly reduces the occurrence of client falls, as well as reducing call light usage and increasing client satisfaction.

c. Use of a night-light.

d. Demonstrate how to use the call light.

Feedback

The correct answer is: Hourly rounding by the nurse.

Question 8

Correct

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