

CLOSE

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Question: 1 of 5	Time Elapsed: 00:01:12 Pause Remaining: 08:20:00 PAUSE
	FLAG
A nurse is caring for four clients who are 4 days postoperative following abdominal surgery. following clients for a potential wound evisceration?	The nurse should further assess which of the
A client who states that they are passing flatus	
A client who reports feeling their incision separate when they sneezed	
A client who has serous drainage on the wound dressing	
A client who has bruising around the incision	

CONTINUE



PREVIOUS

RN Tissue Integrity: Wound Evisceration 3.0 Case Study Test

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CONTINUE

Question: 2 of 5	Time Elapsed: 00:01:39 Pause Remaining: 08:20:00	PAUSE
		FLAG
A nurse is assessing a client who is postoperative following abdominal surgery and discovers the client Which of the following actions should the nurse take?	has bowel protruding from	the incision.
Place the client in high-Fowler's position.		
Reinsert the protruding bowel.		
Cover the wound with a nonadherent dressing.		
Straighten the client's legs.		



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PAUSE

Time Elapsed: 00:02:02

Pause Remaining: 08:20:00

Question: 3 of 5

A nurse is assessing a client who is postoperative following abdominal surgery. The nurse should identify that which of the following findings increases the client's risk for wound evisceration?

The client is morbidly obese.

The client has decreased bowel sounds.

The client has an NG tube to provide continuous suction.

The client has staples securing the wound.



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Question: 4 of 5	Pause Remaining: 08:20:00
	▼ FLAG
A nurse is teaching a client who is postoperative following abdominal surgery. Which o reduce the risk for wound evisceration?	f the following instructions should the nurse include to
Perform leg exercises at frequent intervals."	
"Use an incentive spirometer every hour while awake."	
"Turn side to side every 2 hours,"	
Support your abdomen with a pillow when coughing,"	
PREVIOUS	CONTINUE



CLOSE

Question: 5 of 5

Time Elapsed: 00:02:28 Pause Remaining: 08:20:00

PAUSE





A nurse is assessing a client who is postoperative following abdominal surgery and discovers bowel protruding from the client's incision. Which of the following actions should the nurse take first?

Ontact the rapid response team.

Check the client for shock.

O Document the incident.

Prepare the client for surgery.

PREVIOUS

CONTINUE