

NUR 265 - Exam 4 Questions with Answers.

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✓ The nurse working in the ED is triaging a client who has presented with chest pain, shortness of breath, a productive cough, and reports night sweats. That client's health history includes the presence of acquired immunodeficiency syndrome (AIDS) and the recent laboratory results that reveal a low CD4+ count. Airborne precautions have been initiated. Which of the following actions should the nurse take next?

ANSWER: **Check the client's temperature**

RATIONALE: A fever is a symptom of AIDS exacerbation.

✓ The newly hired nurse is developing a plan of care for a client who has acquired AIDS and was just diagnosed with pneumocystis jiroveci pneumonia and pain. Which of the following interventions should the nurse preceptor question?

ANSWER: **Placing the client on a pressure-relieving mattress**

RATIONALE: That is not an appropriate intervention.

(Different)

The nurse is caring for a client with AIDS who has just been diagnosed with cryptococcal meningitis. Which of the following actions should the nurse take?

ANSWER: **Initiate seizure precautions with padded side rails**

RATIONALE: Pg. 965. Patients may have seizures. *meningitis = seizures*

✓ The nurse had provided medication instructions to a client who has human immunodeficiency virus (HIV) and has been prescribed combination antiretroviral therapy (cART). Which of the following client statements indicates a correct understanding of the teaching?

ANSWER: **"I can avoid developing drug resistance if I take 90% of my drugs on time."**

RATIONALE: Pg. 976. It is important to teach patients to take at least 90% of their meds on time to prevent drug resistance.

The nurse working in a community health center has instructed a group of clients who have acquired immune deficiency syndrome (AIDS) about ways to prevent infection. Which of the following statements, if made by a client, would indicate the need for additional teaching? *Infe, non Precautions n ts*

ANSWER: **"I will wear a surgical mask when I change my cat's litter box."** *wawronj.*

RATIONALE: Pg. 974. Do not change cat's litter box. Wear gloves and immediately wash hands.

Bathe daily! Dishwasher to. temp=4hrs. Mouth=8hrs.

✓ The nurse is precepting a newly hired nurse who is caring for a client who has AIDS and has developed Kaposi's sarcoma. It requires additional teaching by the preceptor if the newly hired nurse

ANSWER: **Applies a surgical mask before entering the client's room.**

RATIONALE: Pg. 983. This is not an appropriate intervention.

The nurse is caring for a client who had a heart transplant 24 hours ago. Which of the following findings indicates the client is developing a complication?

ANSWER: **Hypotension**

SOB, Fatigue, Fluid gain, bloating, bradycardia, HypoTN, Atrial, Activity intl, ↓ ejection fraction.

RATIONALE: Pg. 1842. Hypotension is a symptom of heart transplant rejection.

✓ The nurse is caring for a client who had a lung transplant 10 days ago. It would be a priority for the nurse to notify the PHCP if the client has

ANSWER: Developed sputum that is yellow tinged

RATIONALE: This is a sign of infection. KEY WORD: "DEVELOPED"

✓ The nurse is caring for a client who had a liver transplant 48 hours ago, which findings from the box below is a priority for the nurse to report to the PCHP? ANSWER: 2,4,5,6

RATIONALE: An increase in AST, increase in PT, INR, and bilirubin levels.

PT: 11-13.5

INR: 0.8-1.1

✓ The nurse is caring for a client who had a kidney transplant two weeks ago. Which of the following findings should the nurse correlate to possible organ rejection? ANSWER: Blood pressure of 172/96

RATIONALE: Pg.3615. Vital signs with special attention to BP.

✓ The nurse working in a primary health care providers office has just administer a routine immunization to a client. The client is asked to wait in the waiting room for the next 15 mins. 5 mins later the time client developed swelling of the eyes and reports feeling anxious, SOB, and dizzy. Which of the following actions should the nurse take first?

ANSWER: Perform a respiratory assessment

RATIONALE: Pg.1009. Immediately assess the respiratory status

wasn't on exam.

The nurse is caring for a client who just received a pneumococcal polysaccharide vaccine. The client reports feeling anxious, SOB, dizzy, and has an audible wheezing. Which actions from the box below should the nurse take?

ANSWER: 1,2,3,4

RATIONALE: Initiate oxygen via a nonrebreather mask, obtain IV access with a large bore IV, Administer IM epinephrine 0.3 mL, Have a crash cart available in the client's room

✓ The newly hired nurse as attended a continuing education conference regarding anaphylaxis work allergen exposure. Which of the following statements by the newly hired nurse indicates a correct understanding of assessment findings in the client?

ANSWER: The client will present with widespread hives and hypoxia.

RATIONALE: Table 20-2. Hypoxia and widespread hives

✓ The nurse is assessing a client who has systemic lupus erythematosus (SLE). Which of the following findings would the nurse identify as a complication of the disease?

ANSWER: Pericardial friction rub

RATIONALE: Major skin manifestation of SLE is a dry, scale, raised rash on the face. Non scarring and may increase in a lupus flare and disappear when the disease is in remission.

The nurse is teaching a 25 year old female client who has SLE. Which of the following statements claims correct understanding of the teaching?

ANSWER: I should take my prescribed steroids in the morning to get the best benefit. *pathing dry, phosphate, sunscreen, alcohol, lotion, mild soaps.*

RATIONALE: Pg.917. Remind patients to take their medication early in the morning before breakfast because that is the time when the body's natural corticosteroid level is the lowest.

DIFFERENT EXAM

The nurse preceptor observing a newly hired nurse care for a client who has systemic sclerosis (scleroderma) and esophagitis. Which of the following actions by the newly hired nurse requires immediate intervention by the nurse preceptor?

ANSWER: Providing ice packs to the client's hands to help with pain

RATIONALE: Pg. 921. On exposure to cold or emotional stress, the small arteries in the digits of both hands and feet rapidly constrict, which causes decrease in blood flow.

The nurse is obtaining a health history on a 40 year old client who has presented to the PHCP's office for a routine physical. The client tells the nurse that there is a family history of colon cancer. Which of the following actions should the nurse take next?

ANSWER: Inform the PCHP of the client's family hx.

RATIONALE: Pg.2881. When an adult turns 40, they should discuss with MD the need for a colon cancer screening.

*Greatest risk of developing identified cancer?
21 yo male testicular cancer.*

✓ The nurse is assessing clients for the risk of developing breast cancer. The nurse should recognize that the clients that are at greatest risk for breast cancer is a client who is a

ANSWER: 64 YO Jewish female who had her first child at age 38 and has a BRCA1 gene

RATIONALE: Table 70-1. Increased age, female, BRCA1 inherited mutation, women who bear their first child near or after 30.

The nurse is assessing a client who is suspected of having lung cancer. Which of the following findings is consistent with this diagnosis?

ANSWER: Reoccurring bronchitis *Rust sputum 30-5. Rust-colored sputum.*

RATIONALE: Table 30-5. Recurring episodes of pleural effusion, pneumonia, or bronchitis

✓ The nurse is assessing clients who are at risk of developing cervical cancer. The nurse should recognize that at greatest risk is a client who is a

ANSWER: 24 yo AA who was diagnosed with HPV a year ago

RATIONALE: Table 71-2. Cervical cancer risk factor is an infection of HPV.

The nurse is caring for a client who is receiving a chemotherapeutic agent that has the potential to cause alopecia. Which of the following actions should the nurse take to support their self esteem?

ANSWER: Inform the client that hair usually grows back once chemotherapy is complete. *WLEH*

~~RATIONALE: Pg. 1092. Regrowth usually begins 1 month after the completion of chemotherapy.~~

✓ The nurse is observing the unlicensed assistive personnel care for a client who is receiving sealed brachytherapy for cervical cancer. Which of the following actions by the UAP requires intervention by the nurse?

ANSWER: Picking up a dislodged implant with gloved hands for placement in a lead container.

RATIONALE: Chart 22-1. If it is dislodged, use a long handled forceps to retrieve it.

✓ The nurse working on the oncology unit has been made aware of the following client situations. The nurse should initially assess the client who has?

ANSWER: Reports of back pain with painful urinations and is receiving IV chemotherapy.

RATIONALE: Report any painful urinating. Pg. 1081.

✓ The nurse is reviewing the following lab results of clients who are receiving chemotherapy. Which results is the most important to report to the PHCP? ANSWER: Platelet count of 50,000.

RATIONALE: Chart 22-6, Chart 22-5.

✓ The nurse working on the oncology unit has received the change of shift report on the following clients. Who should the nurse see first?

ANSWER: 56 yo client who is receiving chest radiation and has developed a pericardial friction rub.

RATIONALE: Pg. 1066. Chart 22-2. Effects of radiation therapy: Pericarditis (friction rub is an indication of pericarditis)

✓ The nurse became aware of the following client situations. The nurse should first see the client who is receiving?

ANSWER: Brachytherapy for the treatment of cervical cancer and is reporting the development of nausea, vomiting, and diarrhea.

RATIONALE:

The nurse caring for a client who has tumor lysis syndrome that went undetected and therefore had a delay in receiving treatment. Which of the following assessment findings should the nurse correlate to the TLS?

ANSWER: Cardiac dysfunction

RATIONALE: Pg. 1113. Serum potassium levels can increase to the point of hyperkalemia (cardiac dysfunction). HYDRATION prevents and managed TLS by diluting the serum potassium level and increasing the kidney flow rates.

The nurse is caring for a client who has cancer and has developed a spinal cord compression. Which of the following should the nurse anticipate will be prescribed to alleviate the client symptoms?

ANSWER: High dose corticosteroids