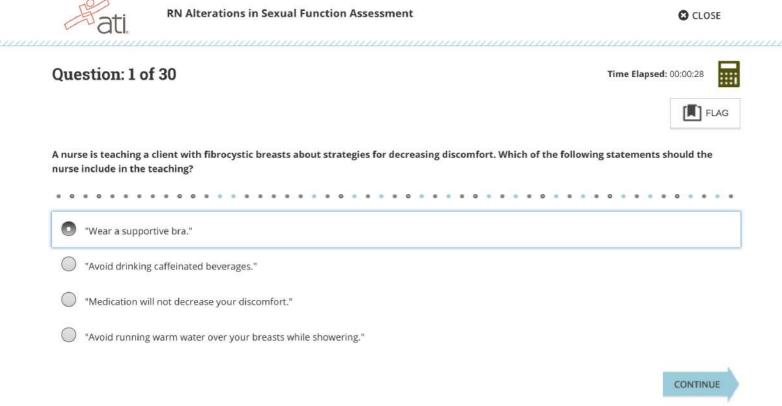
NEW GENERATION ATI ENGAGE ADULT MEDICAL SURGICAL RN 3.0. RN ALTERATIONS IN SEXUAL FUNCTION ASSESSMENT RESULTS





CLOSE

Question: 2 of 30





A nurse is caring for a client and notices that the name and gender on the client's identification band do not match the name and gender listed in the medical record. Which of the following actions should the nurse take?

Request a new identification bracelet with the name and gender on the medical record.

Ask the client to clarify their preferred name and gender.

Continue with care using the name and gender on the identification bracelet.

Select either name and gender, and use them consistently for all care.

PREVIOUS

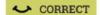


Question: 3 of 30	Time Elapsed: 00:01:12
	FLAG
A nurse is assessing a client who has dysfunctional uterine bleeding and reports an increase in vagin nurse perform first?	nal drainage. Which assessment should the
Pain	
Anxiety	
Color of vaginal drainage	
Blood pressure	
PREVIOUS	CONTINUE



CLOSE

Question: 4 of 30



Teach the client to wear a compression vest at all times until instructed by the surgeon.

Time Elapsed: 00:01:51





A nurse is planning care for a client who has undergone gender-affirming chest reconstruction. Which of the following actions should be included in the plan of care? (Select all that apply.)

- Assist the client in completing arm raise exercises twice each day.
- Administer analgesics as needed to manage incisional pain.
- ✓ Provide information about community resources for LBGTQ+ individuals.
- Teach the client how to empty the surgical drains.





Teach the client to wear a compression vest at all times until instructed by the surgeon is correct. A client who has undergone gender-affirming chest reconstruction will need to wear a compression vest to prevent bleeding and edema at the surgical site.

Assist the client in completing arm raise exercises twice each day is incorrect. The nurse should instruct the client that they cannot raise the arms over the head until cleared by the surgeon.

Administer analgesics as needed to manage incisional pain is correct. The nurse should provide standard post-operative care, including pain management, to the client.

Provide information about community resources for LBGTQ+ individuals is correct. The nurse should use a team-based approach to care, including referral to appropriate community resources for support after discharge.

Teach the client how to empty the surgical drains is correct. The nurse should teach the client how to empty the surgical drains. The drains are usually removed about one to two weeks after surgery.

PREVIOUS



PREVIOUS

RN Alterations in Sexual Function Assessment

CLOSE

CONTINUE

Question: 5 of 30

Time Elapsed: 00:02:29

FLAG

A nurse is caring for a client who may have experienced human trafficking; the client denies it. A visitor has been sitting close to the client throughout the encounter. Which of the following is the appropriate action by the nurse?

Consult Social Service to interview the client and visitor together.

Slide an information sheet about human trafficking into the client's belongings.

Inform the client that law enforcement will be notified.

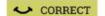


Question: 6 of 30	Time Elapsed: 00:02:50
	FLAG
A nurse is teaching a client about uterine fibroids. Which of the following statements should the nurse include in the	teaching?
"Uterine fibroids are more common in clients after menopause."	
"Uterine fibroids are a type of benign tumor."	
"Clients who have uterine fibroids have less menstrual flow."	
"Clients with uterine fibroids can also have trouble emptying their bladder."	
PREVIOUS	CONTINUE



CLOSE

Question: 7 of 30



Time Elapsed: 00:03:35





A nurse is reviewing a client's medical record. Which of the following information in the medical record increases the client's risk for erectile dysfunction?

Body mass index (BMI) of 32.0

Exercise-induced asthma

Blood pressure 168/92 mm Hg

Smokes 1 pack per day of cigarettes

☑ Hydrochlorothiazide 50 mg po daily





Body mass index of 32.0 is correct. Clients who have a body mass index of 30 or more (obesity) are at an increased risk for erectile dysfunction. **Exercise-induced asthma is incorrect.** Asthma is not a risk factor for erectile dysfunction.

Blood pressure 168/92 mm Hg is correct. Hypertension is a risk factor for erectile dysfunction. This blood pressure is in the reference range for Stage 2 Hypertension.

Smokes 1 pack per day of cigarettes is correct. Smoking is a risk factor for erectile dysfunction.

Hydrochlorothiazide 50 mg po daily is correct. Thiazide diuretics, including hydrochlorothiazide, can cause erectile dysfunction.

PREVIOUS



Question: 8 of 30	Time Elapsed: 00:03:56
	FLAG
A nurse is performing an elder maltreatment assessment on a client who reports limited mobility and lives with their following client statements would indicate to the nurse that elder neglect has occurred?	adult child. Which of the
"My child constantly tells me I am a terrible parent."	
"My child leaves me at home without food most days."	
"My child pushed me against the wall yesterday."	
"My child won't let me access my bank accounts."	
PREVIOUS	CONTINUE



PREVIOUS

RN Alterations in Sexual Function Assessment

CLOSE

Question: 9 of 30	Time Elapsed: 00:04:17
A nurse is caring for a client who has prostatitis. The client asks the nurse, "What should I do if I cannot pass my ur the appropriate response by the nurse?	FLAG
"This is expected. Try passing your urine again in several hours."	
"Taking your pain medication will allow you to pass your urine." "You should seek emergency treatment."	
"You should stop drinking fluids until you can pass your urine."	



Question: 10 of 30	Time Elapsed: 00:04:47
	FLAG
A nurse is teaching a client about a laparoscopy. Which of the following statements by the client indicates that the t	teaching was effective?
"I will be awake during the procedure."	
"I will have several small incisions on my abdomen."	
"The provider will examine the inside of my uterus."	
"A biopsy will be completed during a separate procedure."	
PREVIOUS	CONTINUE