

ATI RN COMPREHENSIVE PREDICTOR RETAKE RATED A+ LATEST!!

- A nurse is assessing a patient who has received an antibiotic. The nurse should identify which of the following findings as an indication of a possible allergic reaction to the medication?
 - Bradycardia
 - Headache
 - Joint pain
 - Hypotension

- A nurse on a mental health unit is caring for a patient who has schizophrenia and is experiencing auditory hallucinations telling them to hurt others. The patient is refusing to take anti-psychotic medication. Which of the following responses should the nurse make?
 - "You should plan to take this medication for a few weeks."
 - "You will regret it if you do not take this medication."
 - "This medication will help you respond to the voices."
 - "This medication will help you stop the voices you are hearing."

- A nurse is providing care for a patient who has depression and is to have electroconvulsive therapy. Which of the following conditions should the nurse identify as increasing the client's risk for complications?
 - Hyperthyroidism
 - Renal calculi
 - Diabetes mellitus
 - Cardiac dysrhythmias

- A nurse is reviewing the laboratory results of a patient who has rheumatoid arthritis. Which of the following findings should the nurse report to the provider?
 - WBC count 8,000/mm
 - Platelets 150,000/mm
 - Aspartate aminotransferase 10 units/L
 - D. Erythrocyte sedimentation 75 mm/hr

- A nurse is suctioning the airway of a patient who is receiving mechanical ventilation via an endotracheal tube. Which of the following findings should the nurse identify as an indication that suctioning has been effective?
 - **Presence of a productive cough**
 - Decreased peak inspiratory pressure
 - Thinning of mucous secretions
 - Flattening of the artificial airway cuff
- A nurse is caring for a patient who is in a seclusion room following violent behavior. The patient continues to display aggressive behavior. Which of the following actions should the nurse take?
 - Stand within 30cm (1 ft) of the patient when speaking with them.
 - Express sympathy for the client's situation.
 - Confront the patient about his behavior.
 - **D. Speak assertively to the client.**
- A nurse is caring for a patient who is immediately postoperative following an adrenalectomy to treat Cushing's disease. Which of the following actions is the nurse's priority?
 - Reposition the patient for comfort every 2 hours
 - Observe for any indications of infection
 - Document amount and color of the incisional drainage.
 - **D. Monitor the client's fluid and electrolyte status.**
- A nurse is caring for a patient who is scheduled for a surgical procedure and states, "I don't want to have this surgery anymore." Which of the following responses should the nurse make?
 - "We can manage your care following the procedure without complications."
 - **B. "You have the right to refuse the procedure."**
 - "Your doctor thinks the surgery is necessary."
 - "Let me review the procedure so you can understand what is going to happen."
- A nurse is evaluating a patient who has borderline personality disorder. Which of the following behaviors indicates an improvement in the client's condition?
 - Impulsive behaviors
 - **Decreased clinging behavior**
 - Liability of mood
 - Dependent behavior

- A nurse is teaching a group of school-age children about healthy snack options. Which of the following snacks should the nurse include?
 - Air-popped popcorn
 - Milkshake made with whole milk.
 - Baked potato chips
 - Cheesecake

- A nurse is providing teaching to a patient who has a new prescription for enoxaparin. Which of the following medications for pain relief should the nurse include in the teaching that can be taken concurrently with enoxaparin?
 - Naproxen sodium

 - Ibuprofen
 - Acetaminophen
 - Aspirin

- A nurse is caring for a patient who has fibromyalgia and requests pain medication. Which of the following medications should the nurse plan to administer?
 - Colchicine
 - Lorazepam
 - C. Pregabalin
 - D. Codeine

- A nurse is caring for a patient who has congestive heart failure and is receiving furosemide and digoxin. Which of the following laboratory values indicates that the patient is at risk for developing digoxin toxicity?
 - Glucose 150 mg/dL
 - Magnesium 1.3 mEq/L
 - C. Potassium 3.1 mEq/L
 - D. Sodium 134 mEq/L

- A nurse is caring for a patient who had an embolic stroke and has a prescription for alteplase. Which of the following in the client's history should the nurse identify as a contraindication for receiving alteplase?
 - Hip arthroplasty 1 week ago correct
 - Obstructive lung disease
 - Retinal detachment

- Acute kidney failure 6 months ago
- A nurse is providing discharge teaching for a patient who has a new implantable cardioverter defibrillator (ICD). Which of the following patient statements demonstrates understanding of the teaching?
 - "I will soak in the tub rather than showering."
 - "I can hold my cellphone on the same side of my body as the ICD."
 - C. "I will wear loose clothing over my ICD."
 - D. "I will avoid using my microwave oven at home because of my ICD."
- A nurse is assessing a patient who is postoperative following abdominal surgery and has an indwelling urinary catheter that is draining dark yellow urine at 25ml/hr. Which of the following interventions should the nurse anticipate?
 - Clamp the catheter tubing for 30 min
 - Initiate continuous bladder irrigation
 - Obtain a urine specimen for culture and sensitivity
 - Administer a fluid bolus
- A nurse is caring for a patient who has experienced a stillbirth. Which of the following actions should the nurse take during the initial grieving process?
 - Avoid talking to the patient about the newborn
 - Discourage the patient from allowing friends to see the newborn
 - C. Offer to take pictures of the newborn for the client
 - D. Assure the patient that she can have additional children
- A nurse is caring for a patient who has a major burn injury. Which of the following actions is the nurse's priority to prevent wound infection?
 - Use sterile dressings for wound care
 - Apply topical antibiotics to the client's wounds.
 - Place the patient in protective isolation.
 - Maintain consistent hand washing by staff.

- A nurse is speaking with the caregiver of a patient who has Alzheimer's disease. The caregiver states, "Providing constant care is very stressful and is affecting all areas of my life." Which of the following actions should the nurse take?
 - Discuss methods of how to communicate with the patient about problem solving behaviors.
 - Suggest that the caregiver seek a prescription for an antipsychotic medication for the client.
 - C. Assist the caregiver to arrange a daycare program for the client.
 - D. Recommend allowing the patient to have time alone in their room throughout the day.

- A nurse is caring for a patient who is 1 hr postpartum and unable to urinate. Which of the following actions should the nurse take?
 - Administer a benzodiazepine
 - Perform a fundal massage
 - Place an ice pack on the client's perineum
 - D. Place the client's hand in warm water

- A nurse on a medical-surgical unit is performing medication reconciliation for a newly admitted client. Which of the following actions should the nurse take?
 - Compare a list of common medications to treat a condition to the actual prescriptions
 - Compare the prescription to the allergy history of the client
 - Compare the medication label to the provider's prescription on three occasions before administration
 - Compare the client's list of home medications to the admission prescriptions written for the client.

- A nurse is preparing to administer betamethasone to a patient who is 25 weeks of gestation and has preterm labor. Which of the following findings should the nurse identify as an adverse effect of this medication?
 - Hyperglycemia
 - Uterine contractions
 - Proteinuria
 - Hypotension

- A nurse is preparing to obtain a blood sample from a patient who has a central venous catheter. Which of the following actions should the nurse take? (SATA)
 - Apply a tourniquet above the catheter insertion site.
 - Access the catheter using a large bore needle.

- Aspirate for blood return to access catheter patency.
 - Flush the catheter with 0.9% sodium chloride.
 - Apply force when resistance is met while flushing the catheter.
- A nurse is preparing to perform a dressing change on a preschooler. Which of the following actions should the nurse take to prepare the child for the procedure?
 - Explain in simple terms how the procedure will affect the child.
 - Ask the parents to wait outside the room during the procedure.
 - Limit teaching sessions about the procedure to 20 min.
 - Instruct the child in deep-breathing methods prior to the procedure.
- A nurse is performing wound care for a patient who has an abdominal incision. Which of the following techniques should the nurse implement?
 - Irrigate the wound using a 10-mL syringe.
 - Cleanse the wound starting at the bottom and moving upward.
 - Cleanse the insertion site of the drain using a circular motion towards the center.
 - D. Irrigate the wound with a low-pressure flow of solution.
- A nurse on an antepartum unit is prioritizing care for multiple clients. Which of the following clients should the nurse see first?
 - A patient who is at 36 weeks of gestation and has a biophysical profile score of 8.
 - B. A patient who has preeclampsia and reports a persistent headache.
 - A patient who has pregestational diabetes mellitus and an HbA1c of 6.2%.
 - A patient who is at 28 weeks of gestation and reports leukorrhea.
- A nurse is caring for a patient who is recovering from an amputation of her right arm above the elbow. Which of the following information should the nurse report the occupational therapist?
 - The client's parent is in a skilled nursing facility.
 - B. The patient has two small children at home.
 - The patient is allergic to penicillin.
 - The patient lives in a two-story home.

- A nurse is caring for a patient who has major depressive disorder. The patient tells the nurse, "No one cares about me. I'm completely alone." Which of the following responses should the nurse make?
 - "You should join a community support group."
 - "What makes you think that?"
 - "Don't worry. You should be feeling better in a couple weeks."
 - "Can you give me an example of how others are making you feel this way?"

- A nurse is caring for a patient who has sustained a severe head trauma and has significant bleeding from the nose. Which of the following actions should the nurse take first?
 - Prepare for a CT scan.
 - Insert a peripheral IV line. C.
 - Establish a patent airway.
 - Apply direct pressure to the nose.

- A nurse is reviewing the rhythm strip of a patient who is experiencing sinus arrhythmia. Which of the following findings should the nurse expect?
 - Inconsistent P wave formation.
 - Ventricular and atrial rates 120/min
 - P-R intervals of 0.30 seconds
 - P to QRS ratio 1:1 page 720 Med surg book

- A nurse is admitting a patient who has dementia to a long-term care facility. The patient tells the nurse that she lived in this facility years ago and took care of all the residents by herself. The nurse should document this as which of the following findings?
 - Confabulation
 - Agnosia
 - Projection
 - Perseveration

- A nurse is reviewing home recommendations with a patient who is postoperative following knee surgery. Which of the following recommendations should the nurse make?
 - Place a handrail in the entryway of the house.
 - Place a towel on the floor outside of the shower.
 - Ensure that all area rugs are rubber-backed.
 - Wear slippers with cloth soles.

- A nurse is caring for a patient who is postoperative following total hip arthroplasty. Which of the following actions should the nurse take to prevent dislocation of the prosthesis?

- Raise the head of the client's bed to a high-fowler's position.
 - Elevate the client's effected leg on a pillow when in bed.
 - Position the client's knees slightly higher than the hips when up in a chair.
 - D. Keep an abduction pillow between the client's legs.
- A nurse in a pediatric clinic is teaching a newly hired nurse about the varicella zoster virus. Which of the following information should the nurse include?
 - Children who have varicella should be placed on droplet precautions.
 - Children who have varicella are contagious 4 days before the first vesicle eruption.
 - C. Children who have varicella are contagious until the vesicles are crusted.
 - D. Children who have varicella should receive the herpes zoster vaccine.
- A nurse is caring for a patient who is experiencing a panic attack. Which of the following actions should the nurse take?
 - Teach the patient how to meditate
 - Sit with the patient to provide a sense of security.
 - Encourage the patient to watch television.
 - Administer a dose of atomoxetine to decrease anxiety.
- A nurse is teaching a newly licensed nurse about ergonomic principles. Which of the following actions by the newly licensed nurse indicates an understanding of the teaching?
 - Stands with feet together when lifting a patient up in bed.
 - Places a gait belt around the client's upper chest before assisting a patient to stand.
 - C. Uses a mechanical lift device to move a patient from the bed to the chair.
 - D. Raises the client's head of the bed before pulling the patient up.
- A nurse is teaching a patient about condom use. Which of the following patient statements should the nurse identify as an understanding of the teaching?
 - "I can use petroleum jelly as a lubricant with the condom."
 - "I can re-use the condom one time after initial use."
 - "I can use natural-skin condoms to prevent sexually transmitted infections."
 - D. "I can store the condoms in the drawer of my night-stand."

- A nurse is planning care for a patient who has a chest tube. Which of the following interventions should the nurse include in the plan? (SATA)
 - Maintain the collection chamber above the level of the client's waist.
 - B. Mark the drainage output on the collection chamber hourly.
 - Clamp the chest tube every 2 hours to assess the amount of drainage.
 - Add water to the water seal chamber as it evaporates.
 - Strip the chest tube vigorously to dislodge blood clots.
- The nurse is reviewing a medical record of a patient who has a prescription for intermittent heat therapy for a foot injury. Which of the following findings should the nurse identify as a contraindication to heat therapy?
 - Osteoarthritis
 - Peripheral neuropathy
 - Abdominal aortic aneurysm
 - Phlebitis
- A charge nurse is recommending postpartum clients for discharge following a local disaster. Which of the following client's should the nurse recommend for discharge first?
 - A 15-year-old patient who delivered via emergency cesarean birth 1 day ago
 - A 42-year-old patient who has preeclampsia and a BP of 166/110 mm Hg
 - A patient who delivered precipitously and has a second-degree perineal laceration
 - A patient who has received 2 units of RBCs 6 hr ago for a postpartum hemorrhage
- A nurse is providing teaching about crutch safety to a client. Which of the following patient actions indicates an understanding of the teaching?
 - The patient flexes her elbows 10 degrees when supporting weight by using the handgrips.
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 - The patient places the crutches 30 cm (12 in) to the front and side of each foot while standing
 - The patient leans on both crutches to support body weight.
 - D. The patient keeps her axillae free of pressure.
- A nurse is preparing the body of a patient who has died for the family to view. Which of the following actions should the nurse take?
 - Place a pillow under the client's head.
 - Remove the client's dentures.
 - Remove the client's identification tags.
 - Place the client's arms across their chest.

- A nurse is reviewing annual education requirements for fire safety. Identify the sequence that the nurse should use when operating a fire extinguisher.
 1. Unlock the handle by pulling on the pin.
 2. Point the hose at the base of the fire.
 - Squeeze the handles together.
 - Sweep the extinguisher from side to side.

- A nurse is reviewing legal issues in health care with a group of newly licensed nurses. Which of the following recommendations should the nurse make?
 - Ensure that the patient has a living will on file prior to treatment.
 - Place copies of incident reports in the clients' medical records.
 - Obtain personal professional liability insurance coverage.
 - Overestimate the clients' acuity to prevent short staffing.

- A nurse is caring for a patient who speaks a language different than the nurse. Which of the following actions should the nurse make?
 - Review the facility policy about the use of an interpreter.
 - Direct attention toward the interpreter when speaking to the client.
 - Request a family member or friend to interpret information to the client.
 - Request an interpreter of a different sex from the client.

- A nurse in the emergency department is caring for a patient following a motor-vehicle crash. Which of the following findings should the nurse identify as a manifestation of hypovolemic shock?
 - Decreased respiratory rate
 - Change in level of consciousness
 - Increased urine output
 - Hyperactive deep-tendon reflexes

- A nurse is caring for a patient following application of a cast. Which of the following actions should the nurse take first?
 - Position the casted extremity on a pillow.
 - Place an ice pack over the cast.
 - Teach the patient to keep the cast clean and dry.
 - D. Palpate the pulse distal to the cast.

- A nurse is performing a gait assessment on a patient to evaluate the client's ability to perform ADLs. Which of the following findings indicates a standard gait?
 - The patient looks at the floor when walking.
 - The client's shoulders are rounded slightly forward.
 - C. The client's heels touch the ground before their toes.
 - D. The client's dominant foot bears more weight.
- A nurse on a mental health unit is caring for a patient who has suicidal ideation. Which of the following actions should the nurse take?
 - Place the patient in a group therapy session.
 - Avoid discussing suicidal thoughts with the client.
 - Give the patient a radio to listen to in his room.
 - D. Establish a no-suicide contract with the client.
- A nurse is providing teaching about nutrition therapy to a patient who is experiencing anorexia due to chemotherapy treatment. Which of the following statements should the nurse make?
 - "Snack frequently on fresh fruit."
 - "Add water to soups to increase volume."
 - "Avoid adding butter to foods."
 - "Add grated cheese to vegetable dishes."
- A nurse is providing teaching to a patient who has a new diagnosis of type 1 diabetes mellitus about administering NPH and regular insulin together in one injection. Which of the following instructions should the nurse include?
 - Inject into the vastus lateralis.
 - Draw up the regular insulin prior to NPH.
 - Use a 15-degree angle for the injection.
 - Roll the syringe gently to ensure mixture of the insulins.
- A nurse is caring for a patient who has a calcium level of 8 mg/dL. Which of the following actions should the nurse take?
 - Request a prescription for magnesium citrate.
 - Request a prescription for furosemide.

- Place the patient on a low-calcium diet.
 - D. Place the patient on seizure precautions.
- A nurse is caring for a patient who has schizophrenia and is experiencing delusions. Which of the following actions should the nurse take?
 - Encourage the patient to rest quietly in bed twice per day.
 - Direct long conversations about the delusions toward reality-based topics.
 - Allow the patient unlimited time to discuss the delusions when they occur.
 - Avoid assessing the client's delusions.
- A nurse is conducting a health promotion class about the use of oral contraceptives. Which of the following disorders is a contraindication for oral contraceptive use?
 - Asthma
 - Fibromyalgia
 - Hypertension
 - Fibrocystic breast condition
- A nurse in the emergency department is triaging victims of a house fire. Which of the following clients should the nurse prioritize as emergent?
 - patient who has a compound fracture of the femur
 - B. patient who has hypertension and reports chest pain
 - patient who has severe abdominal pain
 - patient who has a deep laceration on both thighs
- A nurse is planning care for a group of clients. Which of the following methods should the nurse use to manage time effectively?
 - Gather supplies prior to completing a dressing change.
 - Complete partial assessments on all clients before planning the day.
 - Prioritize activities based on the nurse's needs.
 - Use break time to perform documentation.
- A nurse on a mental health unit is planning room assignments for four clients. Which of the following clients should the nurse assign to room near the nurse's station?
 - A patient who has a somatic symptom disorder and reports chronic pain.
 - A patient who has an anxiety disorder and is experiencing moderate anxiety.

- A patient who has bipolar disorder and impaired social interactions.
 - D. A patient who has a depressive disorder and reports feeling hopeless.
- A nurse is assessing coping strategies of a patient whose partner has alcohol use disorder. Which of the following findings indicates that the patient is coping effectively?
 - The patient utilizes strategies to enhance codependent behaviors.
 - B. The patient attends regular counseling sessions.
 - The patient exhibits sympathy to the partner.
 - The patient ignores the partner when they are using alcohol.
- A nurse is caring for a patient who has Graves' disease and is experiencing a thyroid storm. Which of the following actions is the nurse's priority?
 - Obtain the client's blood glucose.
 - Administer 0.9% sodium chloride

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 - C. Provide a cooling blanket.
 - D. Monitor the client's cardiac rhythm. This has more priority
- A nurse is providing preoperative teaching to a patient about promoting circulation during the postoperative period. Which of the following instructions should the nurse include?
 - "Remain on bed rest for 24 hours following the procedure."
 - "Use an incentive spirometer every 4 hours."
 - C. "Participate in range-of-motion exercises."
 - D. "Place a pillow under your knees while in bed."
- A nurse is setting up a sterile field to perform wound irrigation for a client. Which of the following actions should the nurse take when pouring the sterile solution?
 - Hold the bottle in the center of the sterile field when pouring the solution.
 - Hold the irrigation solution bottle with the label facing away from the palm of the hand.
 - Place the sterile gauze over areas of spilled solution within the sterile field.
 - D. Remove the cap and place it sterile-side up on a clean surface.