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Name: _____

Score: ____ / 51

Class: _____

Date: _____

Verve College Pre/Post Assessment
N102

1. Following a liver biopsy, the nurse should observe for hemorrhage and ensure that the patient is kept on bed rest for 24 hours. For the first 1-2 hours, the nurse should keep the patient:

- a. on his or her right side
- b. on his or her back
- c. on his or her left side
- d. in a high Fowler's position

2. The patient has undergone a lumbar puncture. The nurse places the patient in which position for up to 12 hours to avoid discomfort and post puncture spinal headache?

- a. Lateral
- b. Supine
- c. Sims'
- d. prone

3. To protect a patient from aspiration following a bronchoscopy, the nurse should keep the patient NPO for 2 hours until the:

- a. patient is fully awake
- b. patient asks for a drink
- c. gag reflex has returned
- d. preoperative medication has worn off

4. The nurse carefully measures drainage during the first 24 hours after surgery on a patient with a Jackson-Pratt drain. It is considered abnormal if the drainage exceeds:

- a. 50 mL
- b. 100 mL
- c. 200 mL
- d. 300 mL

5. The nurse recognizes that the Jackson-Pratt Drainage removal system is classified as a(n):

- a. open drainage system



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- b. sterile drainage system
- c. closed drainage system
- d. self-measuring drainage system

6. A PN assesses the edematous cardiac patient, the nurse is aware that the condition is a result of retained fluid and the patient is:

- a. Hyponatremic
- b. Hypokalemic
- c. Hypercalcemic
- d. Hybernatic

7. The nurse closely assesses a patient with hypokalemia for:

- a. cardiac complications
- b. the systemic edema
- c. muscle cramping
- d. impaired kidney function

8. After assessing a calcium level of 6.2 mEq/L, the nurse modifies the care plan for the immobilized patient to include observation for possible:

- a. Tooth loss
- b. Osteoporosis
- c. Contractures
- d. Renal calculi

9. The home health nurse explains that due to the patient's implantation of a pacemaker, he is not a candidate for the use of:

- a. opioid analgesics
- b. peripheral analgesics
- c. A TENS unit
- d. Adjuvant analgesics

10. The main goal of treatment for acute glomerulonephritis is to:

- a. Encourage activity
- b. encourage high protein intake
- c. maintain fluid balance
- d. teach intermittent urinary catheterization

11. Nursing no see mostly differ from medical diagnosis in that they are:

- a. Dependent upon medical diagnosis for the direction of appropriate interventions
- b. primarily with caring, Weill medical diagnosis primarily concerned with curing



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- c. primarily concerned with human response, while medical diagnosis are primarily concerned with pathology
- d. primarily concerned with psychosocial parameters, while medical diagnosis are primarily concerned with physiologic parameters

12. To prevent a common, adverse effect of prolonged use of phenytoin sodium (Dilantin), patients taking the drug are instructed to:

- a. drink at least 2 L of fluids daily including 8-10 glasses of water
- b. Avoid crowds and obtain an annual influenza vaccination
- c. eat a potassium rich, low sodium diet
- d. practice good dental hygiene and Report gum swelling or bleeding

13. A patient who received spinal anesthesia 4 hours ago during surgery is transferred to the surgical unit and, after one and a half hours, now reports severe incisional pain. The patient's blood pressure is 170/90 mmHg, pulse is 108 beats/min, temperature is 99 F (37.2C), and the respirations are 30 breaths/min. The patient's skin is pale, and the surgical dressing is dry and intact. The most appropriate nursing intervention is to:

- a. Place the patient in a high Fowler's position and administer oxygen
- b. place the patient in a reverse Trendelenburg position and open the IV line
- c. Medicate the patients for pain
- d. Report the findings to the provider

14. The most common, preventable complication of abdominal surgery is:

- a. Atelectasis
- b. fluid and electrolyte Imbalance
- c. Thrombophlebitis
- d. urinary retention

15. During an assessment of a patient who sustained a head injury 24 hours ago, the medical-surgical nurse notes the development of slurred speech and disorientation to time and place.

The nurse's initial action is to:

- a. Continue the hourly neurologic assessments
- b. Informed the neurosurgeon of the patient status
- c. prepare the patient for emergency surgery
- d. recheck the patient's neurological status in 15 minutes

16. An 80 year old patient is placed in isolation when infected with methicillin-resistant Staphylococcus aureus. The patient was alert and oriented on admission, but is now having visual hallucinations and can follow only simple directions. The medical-surgical nurse recognizes that the changes in the patient's mental status are related to:



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- a. Sundowning
- b. a fluid and electrolyte imbalance
- c. sensory deprivation
- d. a stimulating environment

17. To prepare a patient on the unit for a bronchoscopic procedure, a medical-surgical nurse administers the IV sedative. The medical-surgical nurse then instructs the licensed practical nurse to:

- a. take the patient to the bathroom one more time
- b. educate the patient about the pending procedure
- c. measure the patient's blood pressure and pulse readings
- d. give the patient small sips of water only

18. Which electrolyte is essential for enzyme and neurochemical activities?

- a. Chloride
- b. Magnesium
- c. Potassium
- d. Phosphate

19. Which statement by the patient with diabetes mellitus indicates an understanding of the medication insulin glargine (Lantus)? (Select all that apply)

- a. Lantus causes weight loss
- b. Lantus is used only at night
- c. the duration of Lantus is 24 hours
- d. There is no Peak time for Lantus

20. Which action occurs primarily during the evaluation phase of the nursing process?

- a. priority setting and expected outcomes
- b. data collection
- c. decision making and judgment
- d. reassessment and audit

21. Which action best describes a sentinel event alert?

- a. indicating that a community or institution is unsafe
- b. documenting the breakdown in communication during a shift report
- c. recording the harm done when a medication error occurs
- d. signaling the need for immediate investigation and response

22. Which is primarily a developmental task of middle age?

- a. relying strongly upon spiritual beliefs



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- b. Rediscovering or developing satisfaction in one's relationship with a significant other
- c. learning and acquiring new skills and information
- d. risk-taking and its perceived consequences

23. A nursing department in an acute care setting decides to redesign its nursing practice based on a theoretical framework. The feedback from patients, families and staff reflects that caring is a key element. Which theorist best supports this concept?

- a. Erikson
- b. Maslow
- c. Rogers
- d. Watson

24. For a patient with Crohn's disease, the medical-surgical nurse recommends a diet that is:

- a. high in fiber and low in protein and calories
- b. high in potassium
- c. low in fiber and high in protein and calories
- d. low in potassium

25. When examining a patient who is paralyzed below the T4 level, the medical-surgical nurse expects to find:

- a. flaccidity of the upper extremities
- b. hyperreflexia and spasticity of the upper extremities
- c. Impaired diaphragmatic function requiring ventilator support
- d. independent use of upper extremities and efficient cough

26. After completing a thorough neurological and physical assessment of a patient who is admitted for a suspected stroke, a medical-surgical nurse anticipates the next step in the immediate care of this patient to include:

- a. administering tissue plasminogen activator
- b. obtaining a neurosurgical consultation
- c. preparing a carotid Doppler ultrasonography
- d. obtaining a computed tomography scan of the head without contrast

27. A 93 year old Female with a history of Alzheimer's disease gets admitted to an Alzheimer's unit. The patient has exhibited signs of increased confusion and limited stability with gait. Moreover, the patient is refusing to use a wheelchair. Which of the following is the most appropriate course of action for the nurse?

- a. recommend a speech therapy consult to the doctor
- b. recommend the patient remain in her room at all times
- c. recommend family members bring pictures to the patient's room



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- d. recommend the patient attempt to walk pushing the wheelchair for safety

28. A nurse caring for a patient has recently been diagnosed with fibromyalgia and COPD. Which of the following tasks should the nurse delegate to the NAP?

- a. ambulating the patient for the first time
- b. taking the patient's breath sounds
- c. educating the patient monitoring fatigue
- d. transferring the patient to the shower

29. A nurse has just started on the 7 PM surgical unit shift. Which of the following patients' should the nurse check on first?

- a. a 75 year old female who is scheduled for an EGD in 10 hours
- b. A 34 year old male who is complaining of low back pain following back surgery and has an onset of urinary incontinence in the last hour
- c. a 21 year old male who had a lower extremity BKA yesterday, following a MVA and has phantom pain
- d. a 27 year old female who has received 1.5 units of RBC's, via transfusion the previous day

30. A 64 year old male who has been diagnosed with COPD and CHF exhibits and increase in total body weight of 10 pounds over the last few days. The nurse should:

- a. contact the patient's physician immediately
- b. encourage the patient to ambulate to reduce lower extremity edema
- c. check the patient's vitals every 2 hours
- d. check the intake and output on the patient flow sheet

31. A 32 year old male with a complaint of dizziness has an order for morphine via IV. The nurse should do which of the following first?

- a. request the physician on call to assess the patient
- b. check the patient's lab results
- c. perform a neurological screen on the patient
- d. retake vitals including blood pressure

32. A nurse teaching a patient with COPD pulmonary exercises should do which of the following?

- a. encourage repetitive heavy lifting exercises that will increase strength
- b. teach pursed-lip breathing techniques
- c. limit exercises based on respiratory acidosis
- d. take breaks every 10-20 minutes with exercises



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33. A nurse reviewed the arterial blood gas (ABG) reading of a 30 year old male. The nurse should be able to conclude the patient is experiencing which of the following conditions?

Bicarbonate ion - 25mEq/L

pH - 7.45

PaCO₂ - 29 mmHg

PaO₂ - 54 mmHg

(FiO₂) - .22

- a. Metabolic acidosis
- b. respiratory acidosis
- c. metabolic alkalosis
- d. respiratory alkalosis

34. Tricyclics (Antidepressants) sometimes have which of the following adverse effects on patients that have a diagnosis of depression?

- a. shortness of breath
- b. large intestinal ulcers
- c. distal muscular weakness
- d. Fainting

35. A nurse is instructing a patient about the warning signs of (Digitalis) side effects. Which of the following side effects should the nurse tell the patient are sometimes associated with excessive levels of digitalis?

- a. Seizures
- b. Depression
- c. muscle weakness
- d. Anxiety

36. A nurse is assessing a patient in the ICU. The patient has the following signs: weak pulse, quick respiration, acetone breath and nausea. Which of the following conditions is most likely occurring?

- a. Hypoglycemic patient
- b. cardiac arrest
- c. end stage renal failure
- d. Hyperglycemic patient

37. A nurse is taking a patient's history realizes the patient is complaining of SOB and weakness in the lower extremities. The Patient has a history of hyperlipidemia and hypertension. Which of the following may be occurring?

- a. the patient is developing CHF
- b. the patient may be developing COPD



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- c. the patient may be having a MI
- d. the patient may be having an onset of PVD

38. A nurse has been assigned a patient who has recently been diagnosed with Guillain-Barre Syndrome. Which of the following statements is the most applicable when discussing the impairments with Guillain-Barre Syndrome with the patient?

- a. Guillain-Barre syndrome causes muscle weakness in the legs
- b. Guillain-Barre syndrome gets better after five years in almost all cases
- c. Guillain-Barre syndrome causes limited sensation in the abdominal region
- d. Guillain-Barre syndrome does not affect breathing in severe cases

39. The charge nurse on a cardiac unit tells you a patient is exhibiting signs of right-sided heart failure. Which of the following would not indicate right-sided heart failure?

- a. Nausea
- b. Anorexia
- c. Rapid weight gain
- d. SOB (shortness of breath)

40. A patient has been prescribed Albuterol. Which of the following changes are not associated with Albuterol?

- a. Hypertension
- b. Bronchodilation
- c. Sensory Changes
- d. Tachycardia

41. A nurse suspects a patient is developing Bell's Palsy. The nurse wants to test the function of cranial nerve VII. Which of the following would be the most appropriate testing procedures?

- a. Test the taste sensation over the back of the tongue and activation of the facial muscles
- b. Test the sensation of the facial muscles and sensation of the back of the tongue
- c. Test the sensation of the facial muscles and the front of the tongue
- d. Test the taste sensation over the front of the tongue and activation of the facial muscles.

42. A nurse has been ordered to administer morphine to a patient. Which of the following effects is unrelated to morphine's effects on a patient?

- a. Depressed function of the CNS
- b. Increased blood flow
- c. Decreased venous capacity
- d. Pain relief



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43. A nurse has been ordered to set-up Buck's Traction on a patient's lower extremity due to a femur fracture. Which of the following applies to Buck's Traction?

- a. A weight greater than 10 lbs. should be used
- b. The line of pull is upward at an angle
- c. The line of pull is straight
- d. A weight greater than 20 lbs. should be used.

44. A nurse is caring for an MD. The MD asks the question, "What type of cells secrete insulin?" The nurse responds:

- a. "Alpha cells"
- b. "Acinar cells"
- c. "Plasma cells"
- d. "Beta cells"

45. A patient 3 hours post-op from a hysterectomy is complaining of intense pain at the incision site. When assessing the patient the PN notes a BP of 168/96, pulse 146 bpm and regular. What action should the PN take?

- a. Recheck BP and pulse every 20 minutes for the next hour
- b. Administer Nifedipine and assess client's response
- c. Reassure patient that pain is normal following surgery.
- d. Administer Meperidine HCL and assess client's response

46. A nurse is scheduled to do pre-operative teaching on a blind patient who is scheduled for surgery the following morning. What teaching strategy would best fit the situation?

- a. Pre-operative booklet in Braille
- b. Provide a tape for the client
- c. Have the patient's family member instruct the patient
- d. Verbal teaching in short sessions throughout the day

47. If your patient is acutely psychotic, which of the following independent nursing interventions would not be appropriate?

- a. Conveying calmness with one on one interaction
- b. Encourage client participation in group therapy
- c. Listen and identify cause of their behavior
- d. Recognizing and dealing with your own feelings to prevent escalation of the patient's anxiety level.



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48. Nursing staff members at a community mental health center are formulating an outpatient treatment plan with a 30 year-old patient with schizophrenia. A major consideration is that:
- The patient will likely need weekly supportive treatment for life.
 - The patient will require a referral for vocational rehabilitation services.
 - The patient's contact with the center will diminish as he or she becomes stable, but the patient will continue to need support.
 - The patient's contact with the center will gradually decrease until his or her therapy can be terminated.
49. In which circumstance is a breach of patient confidentiality appropriate?
- A supervisor inquires about the patient.
 - The family inquires about the patient without his or her knowledge.
 - The patient appears sincere in threatening to harm another person.
 - The patient has participated in illegal activity.
50. A patient is being discharged after spending six days in the hospital, due to depression with suicidal ideation. The psychiatric and mental health nurse knows that an important outcome has been met when the patient states:
- "I can't wait to get home and forget that this ever happened".
 - "I feel so much better. If I continue to feel this way, I can probably stop taking my medication soon".
 - "I have a list of support groups and a crisis line that I can call, if I feel suicidal".
 - "I have to leave here soon, if I want to make it to the shelter before they run out of beds".
51. Informatics nursing is distinguished from other nursing specialties by its focus on:
- Computerized medical records
 - Data coding and the use of abbreviations.
 - Training and education
 - Data and information content and representation