

These are your easy-to-comprehend nursing bullets for medical-surgical nursing! This reviewer for your NCLEX contains 160 bits of easily digestible information and concepts that will help you in your review. You can simply print a copy of this reviewer and carry it all around and read it during your free time.

Nursing Bullets

Below are the nursing bullets for Medical-Surgical Nursing.

1. **Bone scan** is done by injecting radioisotope per IV and then x-rays are taken.
2. To prevent edema on the site of sprain, **apply cold compress** on the area for the first 24 hours.
3. To turn the client after lumbar **Laminectomy**, use the logrolling technique.
4. **Carpal tunnel syndrome** occurs due to the injury of median nerve.
5. **Massaging the back of the head** is specifically important for the client with Crutchfield tong.
6. A one-year-old child has a fracture of the left femur. He is placed in **Bryant's traction**. The reason for elevation of his both legs at 90° angle is his weight isn't adequate to provide sufficient countertraction, so his entire body must be used.
7. **Swing-through crutch gait** is done by advancing both crutches together and the client moves both legs past the level of the crutches.
8. The appropriate nursing measure to prevent displacement of the prosthesis after a **right total hip replacement** for arthritis is to place the patient in the position of right leg abducted.
9. Pain on non-use of joints, subcutaneous nodules and elevated ESR are characteristic manifestations of **rheumatoid arthritis**.
10. Teaching program of a patient with SLE should include emphasis on walking in shaded area.

119. When evaluating whether an answer on an examination is correct, the nurse should consider whether the action that's described promotes autonomy (independence), safety, self-esteem, and a sense of belonging.

120. **Veracity** is truth and is an essential component of a therapeutic relationship between a health care provider and his patient.

121. **Beneficence** is the duty to do no harm and the duty to do good. There's an obligation in patient care to do no harm and an equal obligation to assist the patient.

122. **Nonmaleficence** is the duty to do no harm.

123–128. Frye's ABCDE cascade provides a framework for prioritizing care by identifying the most important treatment concerns.

- ♦ **A: Airway.** This category includes everything that affects a patent airway, including a foreign object, fluid from an upper respiratory infection, and edema from trauma or an allergic reaction.
- ♦ **B: Breathing.** This category includes everything that affects the breathing pattern, including hyperventilation or hypoventilation and abnormal breathing patterns, such as Kussmaul's, Biot's, or Cheyne-Stokes respiration.
- ♦ **C: Circulation.** This category includes everything that affects the circulation, including fluid and electrolyte disturbances and disease processes that affect cardiac output.
- ♦ **D: Disease processes.** If the patient has no problem with the airway, breathing, or circulation, then the nurse should evaluate the disease processes, giving priority to the disease process that poses the greatest immediate risk. For example, if a patient has terminal cancer and hypoglycemia, hypoglycemia is a more immediate concern.
- ♦ **E: Everything else.** This category includes such issues as writing any incident report and completing the patient chart. When evaluating needs, this category is never the highest priority.

129. **Rule utilitarianism** is known as the "greatest good for the greatest number of people" theory.

130. **Egalitarian theory** emphasizes that equal access to goods and services must be provided to the less fortunate by an affluent society.