

ATI RN COMPREHENSIVE PREDICTOR 2019 FORM A

1. A nurse in a pediatric unit is preparing to insert an IV catheter for 7-year-old. Which of the following actions should the nurse take?
- A. (Unable to read)
 - B. Tell the child they will feel discomfort during the catheter insertion.
 - C. Use a mummy restraint to hold the child during the catheter insertion.
 - D. Require the parents to leave the room during the procedure.
2. A nurse is caring for a client who has arteriovenous fistula. Which of the following findings should the nurse report?
- A. Thrill upon palpation.
 - B. Absence of a bruit.
 - C. Distended blood vessels
 - D. Swishing sound upon auscultation.
3. A nurse is providing discharge teaching for a client who has an implantable cardioverter defibrillator. Which of the following statements demonstrates understanding of the teaching?
- A. "I will soak in the tub rather than showering"
 - B. "I will wear loose clothing around my ICD"
 - C. "I will stop using my microwave oven at home because of my ICD"
 - D. "I can hold my cellphone on the same side of my body as the ICD"
4. A nurse is caring for a client who is at 14 weeks gestation and reports feelings of ambivalence about being pregnant. Which of the following responses should the nurse make?
- A. "Describe your feelings to me about being pregnant"
 - B. "You should discuss your feelings about being pregnant with your provider"
 - C. "Have you discussed these feelings with your partner?"
 - D. "When did you start having these feelings?"
5. A nurse is planning care for a client who has a prescription for a bowel-training program following a spinal cord injury. Which of the following actions should the nurse include in the plan of care?
- A. Encourage a maximum fluid intake of 1,500 ml per day.
 - B. Increase the amount of refined grains in the client's diet.
 - C. Provide the client with a cold drink prior to defecation.
 - D. Administer a rectal suppository 30 minutes prior to scheduled defecation times.

6. A nurse is caring for a client who is in active labor and requests pain management. Which of the following actions should the nurse take?

- A. Administer ondansetron.
- B. Place the client in a warm shower.
- C. Apply fundal pressure during contractions.
- D. Assist the client to a supine position.

7. a nurse in an emergency department is performing triage for multiple clients following a disaster in the community. To which of the following types of injuries should the nurse assign the highest priority?

- A. Below-the knee amputation
- B. Fractured tibia
- C. 95% full-thickness body burn
- D. 10cm (4in) laceration to the forearm

8. a nurse manager is updating protocols for the use of belt restraints. Which of the following guidelines should the nurse include?

- A. Remove the client's restraint every 4hr
- B. Document the client's condition every 15 min
- C. Attach the restrain to the bed's side rails
- D. Request a PRN restrain prescription for clients who are aggressive

9. A nurse is teaching an in-service about nursing leadership. Which of the following information should the nurse include about an effective leader?

- A. Acts as an advocate for the nursing unit.
- B. (Unable to read) for the unit
- C. Priorities staff request over client needs.
- D. Provides routine client care and documentation.

10. A nurse is reviewing the laboratory findings of a client who has diabetes mellitus and reports that she has been following her (unable to read) care. The nurse should identify which of the following findings indicates a need to revise the client's plan of care.

- A. Serum sodium 144 mEq/
- B. (Unable to read)
- C. Hba1c 10 %
- D. Random serum glucose 190 mg/dl.

152. A nurse is caring for a client who is postpartum and request information about contraception. Which of the following instructions should the nurse include?

- A. "The lactation amenorrhea method is effective for your first year postpartum"
- B. "You can continue to use the diaphragm used before your pregnancy"
- C. "Place transdermal birth control patch on your upper arm"
- D. "I should avoid vaginal spermicides while breast feeding."

153. A nurse is reviewing the facility's safety protocols considering newborn abduction with the parent of a newborn. Which of the following statements indicates an understanding of the teaching?

- A. "Staff will apply identification band after first bath"
- B. "I will not publish public announcement about my baby's birth"
- C. "I can remove my baby's identification band as long as she is in my room"
- D. "I can leave my baby in my room while I walk in the hallway"

154. A nurse is developing a plan of care for a client who has preeclampsia and is to receive magnesium sulfate via continuous IV infusion. Which of the following actions should the nurse include in the plan?

- A. Restrict the client's total fluid intake to 250 mL/hr
- B. Give the protamine if signs of magnesium sulfate toxicity occur
- C. Monitor the FHR via Doppler every 30min
- D. Measure the client's urine output every hour

155. A nurse is receiving a telephone prescription from a provider for a client who requires additional medication for pain control. Which of the following entries should the nurse make in the medical record?

- A. "Morphine 3 mg SQ every 4 hr. PRN for pain."
- B. "Morphine 3 mg Subcutaneous (Unable to read)"
- C. "Morphine 3.0 mg sub q every 4 hr. PRN for pain."
- D. "Morphine 3 mg SC q 4 hr. PRN for pain."

156. A nurse is assessing a client who has acute kidney injury and a respiratory rate of 34/min. The client's ABG results are ph. 7.28 HCO₃ 18 mEq/L. (Unable to read) PaO₂ 90 mm Hg. Which of the following conditions should the nurse expect?

- A. Metabolic acidosis.
- B. Metabolic alkalosis.
- C. Respiratory acidosis.
- D. Respiratory alkalosis.

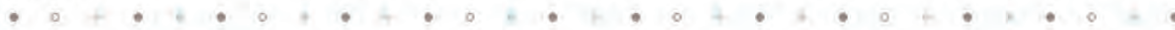
A charge nurse is teaching new staff members about factors that increase a client's risk to become violent. Which of the following risk factors should the nurse include as the best predictor of future violence?



- Previous violent behavior
- A history of being in prison
- Experiencing delusions
- Male gender

92 **A**

A nurse is teaching a client who is trying to conceive. Which of the following should the nurse instruct the client to increase in her diet to prevent a neural tube defect?



- Folate
- Zinc
- Iron
- Calcium

93 **A**

A nurse is caring for a client who is experiencing acute mania. Which of the following foods should the nurse provide for this client?



- Peanut butter sandwich
- Oatmeal with butter
- Chicken noodle soup
- Celery sticks

94 **A**

A nurse is preparing to administer an IV medication to a client and accidentally punctures the IV bag causing the medication to leak on the counter. Which of the following medications requires the nurse to follow facility procedures in the safe handling of a biohazardous material spill?



- Doxorubicin hydrochloride
- Ampicillin sodium
- Metronidazole
- Phenytoin

95 **C**

A nurse in a provider's office is reviewing a female client's medical record during a routine visit. The nurse should recommend increased dietary intake of which of the following vitamins? (Click on the "Exhibit" button for additional information about the client. There are three tabs that contain separate categories of data.)



- Vitamin D
- Vitamin K
- Vitamin B₁₂
- Vitamin A

Exhibit

d. Arrange for client transportation to follow-up appointments Rationale Priority: Assess first.

13. A nurse is assessing the remote memory of an older adult client who has mild dementia. Which of the following questions should the nurse ask the client?

- a. "Can you tell me who visited you today?"
- b. **"What high school did you graduate from"**
- c. "Can you list your current medications?"
- d. "What did you have for breakfast yesterday?"

14. A nurse is providing teaching to an adolescent who has type 1 diabetes mellitus. Which of the following goals should the nurse include in the teaching

- a. HbA1c level greater than 8%- 6.5 - 8 is the target reference. >
- b. Blood glucose level greater than 200 mg/dL at bedtime
- c. Blood glucose level less than 60 mg/dL before breakfast- < 70 = HYPOGLYCEMIC
- d. **HbA1c level less than 7%**

15. A nurse is caring for a client who is receiving phenytoin for management of grand mal seizures and has a new prescription for isoniazid and rifampin. Which of the following should the nurse conclude if the client develops ataxia and incoordination?

- a. The client is experiencing an adverse reaction to rifampin
- b. The client's seizure disorder is no longer under control
- c. **The client is showing evidence of phenytoin toxicity**
- d. The client is having adverse effects due to combination antimicrobial therapy

16. A nurse is caring for a client who is 1 hr postoperative following rhinoplasty. Which of the following manifestations requires immediate action by the nurse?

- a. **Increase in frequency of swallowing**→ may indicate bleeding
- b. Moderate sanguineous drainage on the drip pad
- c. Bruising to the face→ side effect

69. A nurse is caring for a client who is dissatisfied with the care from the provider and decides to leave the facility against medical advice. After notifying the provider, which of the following actions is appropriate for the nurse to take?

- a. Summon a security guard
- b. Explain the risks of leaving**
- c. Complete an incident report
- d. Notify a social worker

Rationale:

70. A nurse is making an initial postpartum home visit. Which of the following client statements should the nurse identify as a manifestation of increased risk for child abuse?

- a. "I try to respond to the baby quickly ."
- b. "I think the baby should be sleeping through the night by now."**
- c. "I have several friends who come by to help out with the baby."
- d. "I want to meet other parents to see if they are going through the same thing."

121. A nurse is providing teaching about the use of crutches using a three-point gait to a client who has tibia fracture. Which of the following actions by the client indicates an understanding of the teaching?

- A. **Positioning both hands on the grips with his elbows slightly flexed**
- B. Supporting his body weight while leaning on the axillary crutch pads (Support body weight using both Crutches when shifting weight)
- C. Stepping with his affected leg first when going up stairs (Unaffected First)
- D. Moving both crutches with the stronger leg forward

122. A nurse is assessing a 24-month-old toddler during a well-child visit. Which of the following developmental tasks should the toddler be able to perform?

- A. Hop on one foot
- B. **Kick a ball forward**
- C. Climb Stairs with alternate feet
- D. Ride a tricycle

123. A case manager is meeting with a client who asks about using alternative therapies to manage her rheumatoid arthritis. Which of the following statements should the nurse make?

- A. Im sure you can find alternative remedies through an online support group
- B. If there are therapies available to you, your provider will tell you about them
- C. Feel free to try whatever therapies that fit within your personal belief system
- D. **We can review some information to help you select a safe alternative practitioner.**

- c. **Seductive Behavior**
- d. Lack of remorse

165. A nurse in a prenatal Clinic is teaching a client about non pharmacological pain management during labor. Which of the following statements by the client indicates an understanding of the teaching?

- a. My nurse can teach me biofeedback at the beginning of labor- biofeedback would be taught earlier to control other pain, not pain of labor
- b. A transcutaneous electrical nerve stimulator will help with pelvic pressure- This would mess with the readings of the pt and baby
- c. The nurse will initiate acupuncture when I arrive at the unit - Needles during labor no.
- d. **I can use my ultrasound picture as a focal point during contractions**

166. A nurse is assessing a client Telemetry strip. Which of the following findings should the nurse report to the provider?