

# ATI Comprehensive 2019 study material

## ATI COMPREHENSIVE C

1. A nurse is caring for a client who has bipolar disorder and is experiencing acute mania. The nurse obtained a verbal prescription for restraints. Which of the following should the actions the nurse take?

- A. Request a renewal of the prescription every 8 hr.
- B. Check the client's peripheral pulse rate every 30 min
- C. Obtain a prescription for restraint within 4 hr.
- D. **Document the client's condition every 15 minutes**

2. A nursing planning care for a school-age child who is 4 hr postoperative following perforated appendicitis. Which of the following actions should the nurse include in the plan of care?

- a. Offer small amounts of clear liquids 6 hr following surgery (assess for gag reflex first)
- b. Give cromolyn nebulizer solution every 6 hr (for asthma)
- c. Apply a warm compress to the operative site every 4 hr
- d. **Administer analgesics on a scheduled basis for the first 24 hr**

3. A nurse is receiving change-of-shift report for a group of clients. Which of the following clients should the nurse plan to assess first?

- a. A client who has sinus arrhythmia and is receiving cardiac monitoring
- b. A client who has diabetes mellitus and a hemoglobin A1C of 6.8%
- c. A client who has epidural analgesia and weakness in the lower extremities
- d. **A client who has a hip fracture and a new onset of tachypnea**

4. A nurse is preparing to apply a transdermal nicotine patch for a client. Which of the following actions should the nurse take?

- a. Shave hairy areas of skin prior to application (apply to hairless, clean & dry areas to promote absorption; avoid oily or broken skin)
- b. **Wear gloves to apply the patch to the client's skin**
- c. Apply the patch within 1 hr of removing it from the protective pouch (apply immediately)
- d. Remove the previous patch and place it in a tissue (fold patch in half with sticky sides pressed together)

5. A nurse has just received change-of-shift report for four clients. Which of the following clients should the nurse assess first?

- a. **A client who was just given a glass of orange juice for a low blood glucose level**
- b. A client who is scheduled for a procedure in 1 hr (can wait)
- c. A client who has 100 mL fluid remaining in his IV bag (can wait)
- d. A client who received a pain medication 30 min ago for postoperative pain

6. A nurse is caring for a client who is receiving intermittent enteral tube feedings. Which of the following places the client at risk for aspiration?

- a. **A history of gastroesophageal reflux disease**
- b. Receiving a high osmolarity formula
- c. Sitting in a high-Fowler's position during the feeding
- d. A residual of 65 mL 1hr postprandial

7. A nurse is reviewing the laboratory results for a client who has Cushing's disease. The nurse should expect the client to have an increase in which of the following laboratory values?

- a. **Serum glucose level- increased**

61. A nurse is caring for a client who has major depressive disorder and a new prescription for **amitriptyline**. The nurse should monitor for which of the following adverse effects?

- a. Increased salivation- dry it will cause - anticholinergic effects
- b. Weight loss
- c. Urinary retention-**
- d. Hypertension- orthostatic hypotension it will cause instead

62. 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?

- a. Asthma
- b. Hypertension**
- c. Fibromyalgia
- d. Fibrocystic breast condition

63. A nurse is preparing to witness a client's signature on a consent form for a colon resection. The nurse should recognize that which of the following information should be provided to the client by the provider before signing the form? (SATA)

- a. Explain the procedure**
- b. Expected outcome of the procedure**
- c. Potential complications**
- d. Possible alternative treatments**
- e. Cost of the procedure

64. A nurse is providing teaching to a client who will undergo a magnetic resonance imaging (MRI) scan. Which of the following statements is appropriate to include in the teaching?

- a. "You should not have this procedure if you are allergic to iodine."**
- b. "You should not have this procedure if you have a tattoo."
- c. "The nurse will ask you to wear protective eyewear during this procedure."
- d. "The nurse will ask you to remove any transdermal patches prior to the procedure."

65. A nurse in a provider's office is reviewing a female client's medical record during a routine visit. The nurse should recommend increasing dietary intake of which of the following vitamins? (Exhibit)

--only tab shown is Tab 3:

H&P: postmenopausal, hx DVT and iron deficiency anemia, works indoors, consumes 1-2 alcoholic beverages per week

- a. Vitamin D
- b. Vitamin K
- c. Vitamin A
- d. Vitamin B12**

66. A nurse is caring for a child who has sickle cell anemia and experiencing vaso-constrictive crisis. Which of the following actions should the nurse include in the plan of care?

- a. Initiate IV fluid replacement-**

115. A nurse is reviewing the laboratory findings of a client who is receiving IV infusion of insulin. The client's lab findings reveal a **potassium level of 5.5 mEq/L**, BUN of 15 mg/dL, and a creatinine level of 1 mg/dL. Which of the following interventions is appropriate for the nurse to take?

- a. **Place a cardiac monitor on the client**
- b. Stop the IV infusion of insulin
- c. Administer oral potassium to the client- potassium is already high
- d. Initiate a 24 hr urine collection

116. A nurse is providing discharge teaching to a client who is postoperative following the surgical repair of a detached retina. Which of the following statements by the client indicates an understanding of the teaching?

- a. I can go jogging after 2 weeks. -Avoid vigorous activities.
- b. I can lift objects that are less than 10 seconds. -avoid lifting more than 5pounds.
- c. **I can resume activities, such as sewing.**
- d. I should bend at the waist when putting on my shoes. -Avoid bending at the waist level.

117. A nurse is planning to administer vancomycin IV to a client. Which of the following actions should the nurse take to reduce the risk of an adverse reaction to the vancomycin?

- a. **Give the dose over 60 min**
- b. Administer the medication undiluted
- c. Obtain trough level 30 min after the medication infusion
- d. Inject 1% lidocaine prior to each dose

118. A nurse is providing discharge teaching to a client who has chronic kidney disease and is receiving hemodialysis. Which of the following instructions should the nurse include in the teaching ?

- a. Take magnesium hydroxide for indigestion -not for pts with CKD or dialysis.
- b. **Eat 1g/kg of protein per day**
- c. Drink at least 3L of fluid daily -too much fluid
- d. Consume foods high in potassium -low potassium diet

119. A nurse is delegating tasks to an assistive personnel group of clients. Which of the following statements should the nurse make?

- a. Take the client in room 106 to radiology-
- b. Take the vital signs of the clients on the side of the unit
- c. **Tell me the standing weight of the client in room 102 before breakfast**
- d. The client in room 109 has spilled his water pitcher

**Rationale:** right direction/communication. Leadership.

120. A nurse is caring for a client who has heart failure and is receiving a continuous IV infusion of low dose dopamine. Which of the following findings is the highest priority?

- a. **Erythema 5 cm (2in) above the IV site**
- b. Blood pressure 92/68 mm Hg -
- c. Urine output 35mL/hr
- d. Pedal pulse of +1 bilaterally

**161.** A charge nurse is preparing to lead negotiations among nursing staff due to conflict about overtime requirements. Which of the following strategies should the charge nurse use to promote effective negotiation?

- a. Identify Solutions prior to negotiation
- b. personalize the conflict
- c. **Attempt to understand both sides of the issue**
- d. Focus on how the conflict occurred

**Assess the situation first prior to trying to solve it.**

**162.** A nurse is preparing to remove an IV catheter from the arm of a client who has phlebitis at the peripheral IV site. Which of the following actions should the nurse plan to take?

- a. Insert a new IV catheter distal to the discontinued IV site
- b. apply pressure dressing at the IV site
- c. **Please a warm moist compress on the site**
- d. Express drainage from the IV site and send it to be cultured

Phlebitis is characterized by pain, increased skin temperature, and redness along the vein. It is commonly treated by discontinuing the IV line and applying a moist, warm compress over the area.

**163.** A nurse is preparing to administer three medications to a client who is receiving continuous enteral tube feeding through an NG tube. Which of the following actions is appropriate for the nurse to take?

- a. ADD medication directly to enteral feeding - not without crushing them first
- b. Dissolve the medications together- some medications can mix others can't
- c. **Use a syringe to allow the medications to Flow by gravity**
- d. Flush the NG tube with 5 ml water- 10ml

**164.** The nurse is caring for a client who has histrionic personality disorder. Which of the following findings should the nurse expect?

- a. Repeated acts of unlawful Behavior
- b. Suspicious demeanor
- 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?