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- a. High residue
- b. Lactose-free
- c. Gluten-free
- d. Low-fiber - d. Low-fiber

A nurse is caring for a client who is 48 hr postoperative following a total hip arthroplasty. Which of the following actions should the nurse include in the plan of care?

- A. Administer low-dose heparin
- B. Place the client on a full liquid diet
- C. Use an incentive spirometer every 3 hr
- D. Maintain the client on bed rest - A. Administer low-dose heparin

A nurse is providing teaching to the parent of an infant who has a cleft lip palate. Which of the following feeding techniques should the nurse include in the teaching?

- A. Burp the infant frequently during feedings
- B. Position the nipple at the front of the infant's mouth
- C. Hold the infant in a supine position
- D. Use feeding devices without nipples - A. Burp the infant frequently during feedings

A nurse in an acute mental health care facility is prioritizing care for multiple clients. Which of the following clients should the nurse see first?

- A. A client who depressive disorder and requires assistance with ADLs
- B. A client who has obsessive-compulsive disorder and is upset about a change in a daily routine
- C. A client who is taking clozapine to treat schizophrenia and reports sore throat
- D. A client who has narcissistic personality disorder and is mocking other during group therapy - C. A client who is taking clozapine to treat schizophrenia and reports sore throat

31. A nurse is planning care for a group of clients and is working with one licensed practical nurse (LPN) and one assistive personnel (AP). Which of the following actions should the nurse take first to manage her time effectively?

- A. Develop an hourly time frame for tasks
- B. Schedule daily activities
- C. Determine goals of the day
- D. Delegate tasks to the AP - C. Determine goals of the day

A nurse is performing an admission assessment for a client who is in the manic phase of bipolar disorder. Which of the following behaviors should the nurse expect?

- A. Performance of ritualistic behaviors- ocd
- B. Suspiciousness and distrust- schizo
- C. Distractibility and poor judgment
- D. Reports of physical discomfort -anxiety - C. Distractibility and poor judgment

A nurse is caring for an infant who has coarctation of the aorta. Which of the following should the nurse identify as an expected finding?

72. A nurse is caring for a client who is 4 days postpartum. Which of the following assessment findings should the nurse expect? (Select all that apply)

- A. Foul perineal odor
- B. Lochia serosa
- C. Postpartum... if blues, then correct
- D. Fundus displaced to the right
- E. Fundus 4 cm (1.6 cm) below the umbilicus descends 1cm per day - b, e, c?

A nurse is providing discharge teaching to a client following a total gastrectomy. The nurse should instruct the client about which of the following medications

- a. Vitamin K
- b. Ranitidine
- c. Metoclopramide
- d. Vitamin B12- lifelong - d. Vitamin B12- lifelong

A nurse is caring for a child who has cystic fibrosis and requires postural drainage. Which of the following actions should the nurse take?

- a Hold hand flat to perform percussions on the child- cup shape
- b Perform the procedure twice a day
- c Administer a bronchodilator after the procedure
- d Perform the procedure prior to meals * best time - d Perform the procedure prior to meals * best time

A nurse at a community health clinic is planning care for an adolescent who recently learned that she is pregnant and is concerned about her ability to afford and care for her baby. Which of the following actions should the nurse take?

- A. Contact the adolescent's parent for assistance
- B. Advise the adolescent to place the newborn for adoption
- C. Assist the adolescent in applying for Medicaid
- D. Refer the adolescent to a local mental health clinic - C. Assist the adolescent in applying for Medicaid

A nurse is admitting an older adult client who is transferring from another facility. The nurse notes pressure ulcers on the client's coccyx and abrasions around both wrists. Which of the following actions should the nurse take to address suspicions of elder abuse?

- A. Contact the family regarding the client's condition
- B. Notify risk management
- C. Privately interview the client about her condition
- D. Inform the transferring agency of the client's condition - C. Privately interview the client about her condition

A nurse is caring for a client who is experiencing expressive aphasia and right hemiparesis following a cerebrovascular accident. Which of the following actions by the nurse best promotes communications among staff caring for the client?

- A. Noting changes in the treatment plan in the client's medical record

- B. Recording the client's progress in the nurses' notes
- C. Posting swallowing precautions at the head of the client's bed
- D. Having interdisciplinary team meetings for the client on a regular basis - D. Having interdisciplinary team meetings for the client on a regular basis

78. A nurse is caring for a client who has an indwelling urinary catheter. Which of the following actions should the nurse take to provide catheter care?

- A. Empty the collected urine once every 24 hr
- B. Hang the drainage bag on a bed rail
- c. Provide perineal hygiene after defecation
- d. Change the indwelling catheter every 8 hr - c. Provide perineal hygiene after defecation

A nurse is assisting a client who has acute glomerulonephritis to choose menu items for breakfast. Which of the following food choices should the nurse recommend?

- a. Eggs- protein
- b. Banana- proteinX
- c. Smoked salmon- protein X
- d .Bagel - d .Bagel

A newly licensed nurse working at an HIV clinic is reviewing the responsibilities of her position at the clinic. Which of the following tasks should the nurse identify as tertiary prevention?

- a. Helping clients understand health screenings covered by their insurance plans
- b. Using an electronic messaging system to remind clients when to take medications
- c. Educating clients about contraindications to specific immunizations
- d. Providing clients with information about the benefits of exercise - b. Using an electronic messaging system to remind clients when to take medications

A nurse in a long-term care facility is managing the care of an older adult client who has difficulty swallowing and occasional choking during meals. The nurse should initiating a referral to which of the following members of the interprofessional care team?

- A. Occupational therapist
- B. Respiratory therapist
- C. Social worker
- D. Speech-language pathologist - D. Speech-language pathologist

A nurse is performing a preoperative assessment for a client who reports having an allergy to several goods. Which of the following food allergies indicates a risk factor for a latex allergy?

- a. Peanuts b. Eggs c. Bananas d. Shrimp - c. Bananas

A nurse is planning care for a client who is scheduled to receive a peripherally inserted central catheter in the arm. Which of the following interventions is appropriate for the nurse to include in the plan care?

- A. Measure the arm circumference above the insertion site daily

- b. Ampicillin sodium
- c. Metronidazole
- d. Phenytoin - a. Doxorubicin hydrochloride- chemo drug it is hazardous

A nurse is reviewing the medication administration record of a client who has 144.rheumatoid arthritis and is 1 day postoperative following a left total hip arthroplasty. Which of the following medication places the client at risk for delayed wound healing?

- a. Omeprazole 0
- b. Morphine
- c. Prednisone (steroid)
- d. Digoxin - C. Prednisone

A nurse in an emergency department is reviewing the medical record for a client who is having an acute myocardial infarction. Which of the following findings places the client at risk if he receives alteplase?

- a. hip arthroplasty 1 week ago
- b. family history of malignant hypertension
- c. Chronic obstructive pulmonary disease
- d. Acute renal failure 6 months - a. hip arthroplasty 1 week ago

A nurse is caring for a client who has permanent drooping on the left side of the face following a cerebrovascular accident (CVA). The client refuses to see any family members. Which of the following interventions will assist the client to adapt to his body image change?

- a. Establish short-term goals that will enable the client to look in the mirror
- b. Offer contact information for CVA recovery support groups
- c. Initiate a family conference to address the issue
- d. Educate the client about short- and long-term effects of a CVA - d. Educate the client about short- and long-term effects of a CVA

A nurse is teaching the parent of an infant who has positional plagiocephaly. Which of the following statements by the parent indicates an understanding of the teaching?

- a. "I should avoid tummy time when my baby is wearing the helmet"
- b. "I should place my baby in the left side-lying position at night when using the helmet"
- c. "I should keep the helmet on my baby for 23 hours a day" (18-22 hours a day)
- d. "I should expect to have my baby wear this helmet for 10 months" - c. "I should keep the helmet on my baby for 23 hours a day" (18-22 hours a day)

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

- a. Remove the client's restraints every 4 hr- its every 2 hours
- b. Document the client's condition every 15 min