

Mannat Group of Nursing Academy

Main Norcet – TEST 3

Important Instructions:

- The question paper contain 100 questions
- All questions are compulsory
- One question carry 1 mark only
- There will be 0.33 negative marking

Total marks: 100

Time: 1 ½ Hrs.

- 1. A papular lesion is noted on the perineum of the laboring client. Which initial action is most appropriate?**
 - (a) Document the finding
 - (b) Report the finding to the doctor
 - (c) Prepare the client for a C-section
 - (d) Continue primary care as prescribed
- 2. A client with a diagnosis of human papillomavirus (HPV) is at risk for which of the following?**
 - (a) Lymphoma
 - (b) Vaginal cancer
 - (c) Leukemia
 - (d) Systemic lupus
- 3. The client seen in the family planning clinic tells the nurse that she has a painful lesion on the perineum. The nurse is aware that the most likely source of the lesion is:**
 - (a) Syphilis
 - (b) Herpes
 - (c) Candidiasis
 - (d) Condylomata
- 4. A client visiting a family planning clinic is suspected of having an STI. The most diagnostic test for treponema pallidum is:**
 - (a) Venereal Disease Research Lab (VDRL)
 - (b) Rapid plasma reagin (RPR)
 - (c) Florescent treponemal antibody (FTA)
 - (d) Thayer-Martin culture (TMC)
- 5. Which laboratory finding is associated with HELLP syndrome in the obstetric client?**
 - (a) Elevated blood glucose
 - (b) Elevated platelet count
 - (c) Elevated creatinine clearance
 - (d) Elevated hepatic enzymes
- 6. The nurse is assessing the deep tendon reflexes of the client with hypomagnesemia. Which method is used to elicit the biceps reflex?**
 - (a) The nurse places her thumb on the muscle inset in the antecubital space and taps the thumb briskly with the reflex hammer.
 - (b) The nurse loosely suspends the client's arm in an open hand while tapping the back of the client's elbow.
 - (c) The nurse instructs the client to dangle her legs as the nurse strikes the area below the patella with the blunt side of the reflex hammer.
 - (d) The nurse instructs the client to place her arms loosely at her side as the nurse strikes the muscle insert just above the wrist.
- 7. Which medication should be used with caution in the obstetric client with diabetes?**
 - (a) Magnesium sulfate
 - (b) Brethine
 - (c) Stadol
 - (d) Ancef
- 8. A multigravida is scheduled for an amniocentesis at 32 weeks gestation to determine the L/S ratio and phosphatidyl glycerol level. The L/S ratio is 1:1. The nurse's assessment of this data is:**
 - (a) The infant is at low risk for congenital anomalies.
 - (b) The infant is at high risk for intrauterine growth retardation.
 - (c) The infant is at high risk for respiratory distress syndrome.
 - (d) The infant is at high risk for birth trauma.
- 9. Which observation in the newborn of a mother who is alcohol dependent would require immediate nursing intervention**
 - (a) Crying
 - (b) Wakefulness
 - (c) Jitteriness
 - (d) Yawning
- 10. The nurse caring for a client receiving magnesium sulfate must closely observe for side effects associated with drug therapy. An expected side effect of magnesium sulfate is:**
 - (a) Decreased urinary output
 - (b) Hyper somnolence
 - (c) Absence of knee jerk reflex
 - (d) Decreased respiratory rate
- 11. The 57-year-old male client has elected to have epidural anesthesia as the anesthetic during a hernia repair. If the client experiences hypotension, the nurse would:**
 - (a) Place him in the Trendelenburg position
 - (b) Obtain an order for Benedryl
 - (c) Administer oxygen per nasal cannula
 - (d) Speed the IV infusion of normal saline
- 12. A client has cancer of the pancreas. The nurse should be most concerned with which nursing diagnosis?**
 - (a) Alteration in nutrition
 - (b) Alteration in bowel elimination
 - (c) Alteration in skin integrity
 - (d) Ineffective individual coping
- 13. The nurse is caring for a client with ascites. Which is the best method to use for determining early ascites?**
 - (a) Inspection of the abdomen for enlargement
 - (b) Bimanual palpation for hepatomegaly
 - (c) Daily measurement of abdominal girth
 - (d) Assessment for a fluid wave
- 14. The client arrives in the emergency department after a motor vehicle accident. Nursing assessment findings include BP 80/34, pulse rate 120, and respirations 20. Which is the client's most appropriate priority nursing diagnosis?**
 - (a) Alteration in cerebral tissue perfusion
 - (b) Fluid volume deficit
 - (c) Ineffective airway clearance
 - (d) Alteration in sensory perception
- 15. Which information obtained from the visit to a client with hemophilia would cause the most concern? The client:**
 - (a) Likes to play football
 - (b) Drinks several carbonated drinks per day
 - (c) Has two sisters with sickle cell tract
 - (d) Is taking acetaminophen to control pain
- 16. The nurse on oncology is caring for a client with a white blood count of 800, a platelet count of 150,000, and a red blood cell count of 250,000. During evening visitation, a visitor is noted to be coughing and sneezing. What action should the nurse take?**
 - (a) Ask the visitor to wash his hands
 - (b) Document the visitor's condition in the chart
 - (c) Ask the visitor to leave and not return until the client's white blood cell count is 1,000
 - (d) Provide the visitor with a mask and gown

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17. **The nurse is caring for the client admitted after trauma to the neck in an automobile accident. The client suddenly becomes unresponsive and pale, with a BP of 60 systolic. The initial nurse's action should be to:**
- Place the client in Trendelenburg position
 - Increase the infusion of normal saline
 - Administer atropine IM
 - Obtain a crash cart
18. **Immediately following the removal of a chest tube, the nurse would:**
- Order a chest x-ray
 - Take the blood pressure
 - Cover the insertion site with a Vaseline gauze
 - Ask the client to perform the Valsalva maneuver
19. **A client being treated with sodium warfarin has an INR of 9.0. Which intervention would be most important to include in the nursing care plan?**
- Assess for signs of abnormal bleeding
 - Anticipate an increase in the dosage
 - Instruct the client regarding the drug therapy
 - Increase the frequency of neurological assessments
20. **Which snack selection by a client with osteoporosis indicates that the client understands the dietary management of the disease?**
- A glass of orange juice
 - A blueberry muffin
 - A cup of yogurt
 - A banana
21. **The elderly client with hypomagnesemia is admitted to the unit with an order for magnesium sulfate. Which action by the nurse indicates understanding of magnesium sulfate?**
- The nurse places a sign over the bed not to check blood pressures in the left arm.
 - The nurse places a padded tongue blade at the bedside.
 - The nurse measures the urinary output hourly.
 - The nurse darkens the room.
22. **The nurse is caring for a 10-year-old client scheduled for surgery. The client's mother tells the nurse that her religion forbids blood transfusions. What nursing action is most appropriate?**
- Document the mother's statement in the chart
 - Encourage the mother to reconsider
 - Explain the consequences of no treatment
 - Notify the physician of the mother's refusal
23. **A client is admitted to the unit 3 hours after an injury with second degree burns to the face, neck, and head. The nurse would be most concerned with the client developing which of the following?**
- Hypovolemia
 - Laryngeal edema
 - Hypernatremia
 - Hyperkalemia
24. **The nurse is evaluating nutritional outcomes for an elderly client with anorexia. Which data best indicates that the plan of care is effective?**
- The client selects a balanced diet from the menu.
 - The client's hematocrit improves.
 - The client's tissue turgor improves.
 - The client gains weight
25. **The client is admitted following repair of a fractured femur with cast application. Which nursing assessment should be reported to the doctor?**
- Pain
 - Warm toes
 - Pedal pulses rapid
 - Paresthesia of the toes
26. **Which would be an expected finding during injection of dye with a cardiac catheterization?**
- Cold extremity distant to the injection site
 - Warmth in the extremity
 - Extreme chest pain
 - Itching in the extremities
27. **Which action by the healthcare worker indicates a need for further teaching?**
- The nursing assistant wears gloves while giving the client a bath.
 - The nurse wears goggles while drawing blood from the client.
 - The doctor washes his hands before examining the client.
 - The nurse wears gloves to take the client's vital signs.
28. **The client is having electroconvulsive therapy for treatment of severe depression. Which of the following indicates that the client's ECT has been effective?**
- The client loses consciousness.
 - The client vomits.
 - The client's ECG indicates tachycardia.
 - The client has a grand mal seizure.
29. **The 5-year-old is being tested for pinworms. To collect a specimen for assessment of pinworms, the nurse should teach the mother to:**
- Examine the perianal area with a flashlight 2–3 hours after the child is asleep and to collect any eggs on a clear tape
 - Scrape the skin with a piece of cardboard and bring it to the clinic
 - Obtain a stool specimen in the afternoon
 - Bring a hair sample to the clinic for evaluation
30. **Which instruction should be given regarding the medication used to treat enterobiasis (pinworms)?**
- Treatment is not recommended for children less than 10 years of age.
 - The entire family should be treated.
 - Medication therapy will continue for 1 year.
 - Intravenous antibiotic therapy will be ordered.
31. **Which client should be assigned to the pregnant licensed practical nurse?**
- The client who just returned after receiving linear accelerator radiation therapy for lung cancer
 - The client with a radium implant for cervical cancer
 - The client who has just been administered soluble brachytherapy for thyroid cancer
 - The client who has returned from placement of iridium seeds for prostate cancer
32. **Which client should be assigned to a private room if only one is available?**
- The client with Cushing's syndrome
 - The client with diabetes
 - The client with acromegaly
 - The client with myxedema
33. **The nurse caring for a client on the pediatric unit administers adult-strength Digitalis to the 3-pound infant. As a result of her actions, the baby suffers permanent heart and brain damage. The nurse can be charged with:**
- Negligence
 - Tort
 - Assault
 - Malpractice
34. **Which assignment should not be performed by the licensed practical nurse?**
- Inserting a Foley catheter
 - Discontinuing a nasogastric tube
 - Obtaining a sputum specimen
 - Initiating a blood transfusion

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35. **The client returns to the unit from surgery with a blood pressure of 90/50, pulse 132, and respirations 30. Which action by the nurse should receive priority?**
(a) Continuing to monitor the vital signs
(b) Contacting the physician
(c) Asking the client how he feels
(d) Asking the LPN to continue the post-op care
36. **Which nurse should be assigned to care for the post-partal client with preeclampsia? The nurse with:**
(a) 2 weeks of experience in postpartum
(b) 3 years of experience in labor and delivery
(c) 10 years of experience in surgery
(d) 1 year of experience in the neonatal intensive care unit
37. **Which information should be reported to the state Board of Nursing?**
(a) The facility fails to provide literature in both Spanish and English.
(b) The narcotic count has been incorrect on the unit for the past 3 days.
(c) The client fails to receive an itemized account of his bills and services received during his hospital stay
(d) The nursing assistant assigned to the client with hepatitis fails to feed the client and give the bath
38. **The nurse is suspected of charting the administration of a medication that he did not give. After talking to the nurse, the charge nurse should**
(a) Call the Board of Nursing
(b) File a formal reprimand
(c) Terminate the nurse
(d) Charge the nurse with a tort
39. **The nurse is making rounds. Which client should be seen first?**
(a) The 78-year-old who had a gastrectomy 3 weeks ago and has a PEG tube
(b) The 5-month-old discharged 1 week ago with pneumonia who is being treated with amoxicillin liquid suspension
(c) The 50-year-old with MRSA (methicillin-resistant staphylococcus aurea)
(d) The 30-year-old with an exacerbation of multiple sclerosis being treated with cortisone intravenously
40. **The emergency room is flooded with clients injured in a tornado. Which clients can be assigned to share a room in the emergency department during the disaster?**
(a) A schizophrenic client having visual and auditory hallucinations and the client with ulcerative colitis
(b) The client who is 6 months pregnant with abdominal pain and the client with facial lacerations and a broken arm
(c) A child whose pupils are fixed and dilated and his parents, and a client with a frontal head injury
(d) The client who arrives with a large puncture wound to the abdomen and the client with chest pain
41. **The nurse is caring for a 6-year-old client admitted with the diagnosis of conjunctivitis. Before administering eye drops, the nurse should recognize that it is essential to consider which of the following?**
(a) The eye should be cleansed with warm water, removing any exudate, before instilling the eye drops.
(b) The child should be allowed to instill his own eye drops.
(c) The mother should be allowed to instill the eye drops.
(d) If the eye is clear of any redness or edema, the eye drops should be held.
42. **The nurse is discussing meal planning with the mother of a 2-year-old toddler. Which of the following statements, if made by the mother, would require a need for further instruction?**
(a) "It is okay to give my child white grape juice for breakfast."
(b) "My child can have a grilled cheese sandwich for lunch."
(c) "We are going on a trip, and I have bought hot dogs to grill for his lunch."
(d) "For a snack, my child can have ice cream."
43. **A 2-year-old toddler is seen in the pediatrician's office. During physical assessment, the nurse would anticipate the need for which intervention?**
(a) Ask the parent/guardian to leave the room when assessments are being performed
(b) Ask the parent/guardian to remove the child's toys during examination
(c) Ask the parent/guardian to stay with the child during the examination
(d) If the child is screaming, tell him this is inappropriate behavior
44. **Which instruction should be given to the client who is fitted for a behind-the-ear hearing aid?**
(a) Remove the mold and clean every week
(b) Store the hearing aid in a cool place
(c) Clean the lint from the hearing aide with a toothpick
(d) Change the batteries weekly
45. **A priority nursing diagnosis for a child being admitted from surgery following a tonsillectomy is:**
(a) Body image disturbance
(b) Impaired verbal communication
(c) Risk for aspiration
(d) Pain
46. **A client with bacterial pneumonia is admitted to the pediatric unit. What would the nurse expect the admitting assessment to reveal?**
(a) High fever
(b) Nonproductive cough
(c) Rhinitis
(d) Vomiting and diarrhea
47. **The nurse is caring for a client admitted with acute laryngotracheobronchitis (LTB). Because of the possibility of complete obstruction of the airway, which of the following should the nurse have available?**
(a) Intravenous access supplies
(b) Emergency intubation equipment
(c) Intravenous fluid administration pump
(d) Supplemental oxygen
48. **The 45-year-old client is seen in the clinic with hyperthyroidism. What would the nurse expect the admitting assessment to reveal?**
(a) Bradycardia
(b) Decreased appetite
(c) Exophthalmos
(d) Weight gain
49. **The nurse is providing dietary instructions to the mother of an 8-year-old child diagnosed with celiac disease. Which of the following foods, if selected by the mother, would indicate her understanding of the dietary instructions?**
A. Whole-wheat bread
B. Spaghetti and meatballs
C. Hamburger on white bread with ketchup
D. Cheese omelet
50. **The nurse is caring for a 9-year-old child admitted with asthma. During the morning rounds, the nurse finds an O2 sat of 78%. Which of the following actions should the nurse take first?**

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- (a) Check the arterial blood gases
(b) Do nothing; this is a normal O₂ sat for this client
(c) Apply oxygen
(d) Assess the child's pulse
51. **A gravida II para 0 is admitted to the labor and delivery unit. The doctor performs an amniotomy. Which observation would the nurse expect to make after the amniotomy?**
(a) Fetal heart tones 160bpm
(b) A moderate amount of straw-colored fluid
(c) A small amount of greenish fluid
(d) A small segment of the umbilical cord
52. **The client is admitted to the unit. Vaginal exam reveals that she is 3cm dilated. Which of the following statements would the nurse expect her to make?**
(a) "I can't decide what to name the baby."
(b) "It feels good to push with each contraction."
(c) "Don't touch me. I'm trying to concentrate."
(d) "When can I get my epidural?"
53. **The client is having fetal heart rates of 100–110bpm during the contractions. The first action the nurse should take is:**
(a) Reassess the fetal heart tones in 15 minutes
(b) Turn the client to her left side
(c) Get the client up and walk her in the hall
(d) Move the client to the delivery room
54. **The nurse is monitoring the client admitted for induction of labor. The nurse knows that Pitocin has been effective when:**
(a) The client has a rapid, painless delivery.
(b) The client's cervix is effaced.
(c) The client has infrequent contractions.
(d) The client has progressive cervical dilation.
55. **A vaginal exam reveals a breech presentation. The nurse should take which of the following actions at this time?**
(a) Prepare the client for a Caesarean section
(b) Apply the fetal heart monitor
(c) Place the client in Trendelenburg position
(d) Perform an ultrasound exam
56. **The nurse is caring for a gravida 1 admitted in labor. Which finding would suggest the need for an internal fetal monitor?**
(a) The cervix is dilated 5cm.
(b) The fetal heart tones are difficult to assess using the external to monitor.
(c) The fetus is at station 0.
(d) Contractions are every 3 minutes.
57. **Which nursing diagnoses is most appropriate for the client as she completes the latent phase of labor?**
(a) Impaired gas exchange related to hyperventilation
(b) Alteration in oxygen perfusion related to maternal position
(c) Impaired physical mobility related to fetal-monitoring equipment
(d) Potential fluid volume deficit related to decreased fluid intake
58. **As the client reaches 8cm dilation, the nurse notes a pattern on the fetal monitor that shows a drop in the fetal heart rate of 30bpm beginning at the peak of the contraction and ending at the end of the contraction. The FHR baseline is 165–175bpm with variability of 0–2bpm. What is the most likely explanation of this pattern?**
(a) The baby is asleep.
(b) The umbilical cord is compressed.
(c) There is a vagal response.
(d) There is uteroplacental insufficiency.
59. **The nurse notes variable decelerations on the fetal monitor strip. The most appropriate initial action would be to:**
(a) Notify her doctor (b) Document the finding
(c) Reposition the client (d) Readjust the monitor
60. **Which of the following is a characteristic of a reassuring fetal heart rate pattern?**
(a) A fetal heart rate of 170–180bpm
(b) A baseline variability of 25–35bpm
(c) Ominous periodic changes
(d) Acceleration of FHR with fetal movements
61. **The nurse asks the client with an epidural anesthesia to void every hour during the labor. The rationale for this intervention is:**
(a) The bladder fills more rapidly because of the medication used for the epidural.
(b) Her level of consciousness is such that she is in a trancelike state.
(c) The sensation of the bladder filling is diminished or lost.
(d) She is embarrassed to ask for the bedpan that frequently.
62. **A client in the family planning clinic asks the nurse about the most likely time for her to conceive. The nurse explains that conception is most likely to occur when:**
(a) Estrogen levels are low.
(b) Lutenizing hormone is high.
(c) The endometrial lining is thin.
(d) The progesterone level is low.
63. **A client tells the nurse that she plans to use the rhythm method of birth control. The nurse is aware that the success of the rhythm method depends on the:**
(a) Age of the client
(b) Frequency of intercourse
(c) Regularity of the menses
(d) Range of the client's temperature
64. **A client with diabetes asks the nurse for advice regarding methods of birth control. Which method of birth control is most suitable for the client with diabetes?**
(a) Intrauterine device (b) Oral contraceptives
(c) Diaphragm (d) Contraceptive sponge
65. **The doctor suspects that the client has an ectopic pregnancy. Which symptom is consistent with a diagnosis of ectopic pregnancy?**
(a) Painless vaginal bleeding
(b) Abdominal cramping
(c) Throbbing pain in the upper quadrant
(d) Sudden, stabbing pain in the lower quadrant
66. **The nurse is teaching a pregnant client about nutritional needs during pregnancy. Which menu selection will best meet the nutritional needs of the pregnant client?**
(a) Hamburger pattie, green beans, French fries, and iced tea
(b) Roast beef sandwich, potato chips, baked beans, and cola
(c) Baked chicken, fruit cup, potato salad, coleslaw, yogurt, and iced tea
(d) Fish sandwich, gelatin with fruit, and coffee
67. **The client with hyperemesis gravidarum is at risk for developing:**
(a) Respiratory alkalosis without dehydration
(b) Metabolic acidosis with dehydration

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- (c) Respiratory acidosis without dehydration
(d) Metabolic alkalosis with dehydration
68. **A client tells the doctor that she is about 20 weeks pregnant. The most definitive sign of pregnancy is:**
(a) Elevated human chorionic gonadotropin
(b) The presence of fetal heart tones
(c) Uterine enlargement
(d) Breast enlargement and tenderness
69. **The nurse is caring for a neonate whose mother is diabetic. The nurse will expect the neonate to be:**
(a) Hypoglycemic, small for gestational age
(b) Hyperglycemic, large for gestational age
(c) Hypoglycemic, large for gestational age
(d) Hyperglycemic, small for gestational age
70. **Which of the following instructions should be included in the nurse's teaching regarding oral contraceptives?**
(a) Weight gain should be reported to the physician.
(b) An alternate method of birth control is needed when taking antibiotics.
(c) If the client misses one or more pills, two pills should be taken per day for 1 week.
(d) Changes in the menstrual flow should be reported to the physician
71. **The nurse is discussing breastfeeding with a postpartum client. Breastfeeding is contraindicated in the postpartum client with:**
(a) Diabetes (b) Positive HIV
(c) Hypertension (d) Thyroid disease
72. **A client is admitted to the labor and delivery unit complaining of vaginal bleeding with very little discomfort. The nurse's first action should be to**
(a) Assess the fetal heart tones
(b) Check for cervical dilation
(c) Check for firmness of the uterus
(d) Obtain a detailed history
73. **A client telephones the emergency room stating that she thinks that she is in labor. The nurse should tell the client that labor has probably begun when:**
(a) Her contractions are 2 minutes apart.
(b) She has back pain and a bloody discharge.
(c) She experiences abdominal pain and frequent urination.
(d) Her contractions are 5 minutes apart.
74. **The nurse is teaching a group of prenatal clients about the effects of cigarette smoke on fetal development. Which characteristic is associated with babies born to mothers who smoked during pregnancy?**
(a) Low birth weight
(b) Large for gestational age
(c) Preterm birth, but appropriate size for gestation
(d) Growth retardation in weight and length
75. **The physician has ordered an injection of RhoGam for the postpartum client whose blood type is A negative but whose baby is O positive. To provide postpartum prophylaxis, RhoGam should be administered:**
(a) Within 72 hours of deliver
(b) Within 1 week of delivery
(c) Within 2 weeks of delivery
(d) Within 1 month of delivery
76. **After the physician performs an amniotomy, the nurse's first action should be to assess the:**
(a) Degree of cervical dilation
(b) Fetal heart tones
(c) Client's vital signs
(d) Client's level of discomfort
77. **A client is admitted to the labor and delivery unit. The nurse performs a vaginal exam and determines that the client's cervix is 5cm dilated with 75% effacement. Based on the nurse's assessment, the client is in which phase of labor?**
(a) Active (b) Latent
(c) Transition (d) Early
78. **A newborn with narcotic abstinence syndrome is admitted to the nursery. Nursing care of the newborn should include:**
(a) Teaching the mother to provide tactile stimulation
(b) Wrapping the newborn snugly in a blanket
(c) Placing the newborn in the infant seat
(d) Initiating an early infant-stimulation program
79. **A client elects to have epidural anesthesia to relieve the discomfort of labor. Following the initiation of epidural anesthesia, the nurse should give priority to:**
(a) Checking for cervical dilation
(b) Placing the client in a supine position
(c) Checking the client's blood pressure
(d) Obtaining a fetal heart rate
80. **The nurse is aware that the best way to prevent post-operative wound infection in the surgical client is to:**
(a) Administer a prescribed antibiotic
(b) Wash her hands for 2 minutes before care
(c) Wear a mask when providing care
(d) Ask the client to cover her mouth when she coughs
81. **The elderly client is admitted to the emergency room. Which symptom is the client with a fractured hip most likely to exhibit?**
(a) Pain (b) Dis-alignment
(c) Cool extremity (d) Absence of pedal pulses
82. **The nurse knows that the 60-year-old female client's susceptibility to osteoporosis is most likely related to:**
(a) Lack of exercise
(b) Hormonal disturbances
(c) Lack of calcium
(d) Genetic predisposition
83. **A 2-year-old is admitted for repair of a fractured femur and is placed in Bryant's traction. Which finding by the nurse indicates that the traction is working properly?**
(a) The infant no longer complains of pain.
(b) The buttocks are 15° off the bed.
(c) The legs are suspended in the traction.
(d) The pins are secured within the pulley.
84. **A client with a fractured hip has been placed in traction. Which statement is true regarding balanced skeletal traction? Balanced skeletal traction:**
(a) Utilizes a pin through bones
(b) Requires that both legs be secured
(c) Utilizes Kirschner wires
(d) Is used primarily to heal the fractured hips
85. **The client is admitted for an open reduction internal fixation of a fractured hip. Immediately following surgery, the nurse should give priority to assessing the client for:**
(a) Hypovolemia (b) Pain
(c) Nutritional status (d) Immobilizer
86. **Which statement made by the family member caring for the client with a percutaneous gastrostomy tube indicates understanding of the**

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- nurse's teaching?
- (a) "I must flush the tube with water after feedings and clamp the tube."
 - (b) "I must check placement four times per day."
 - (c) "I will report to the doctor any signs of indigestion."
 - (d) "If my father is unable to swallow, I will discontinue the feeding and call the clinic."
87. **The nurse is assessing the client with a total knee replacement 2 hours post-operative. Which information requires notification of the doctor?**
- (a) Bleeding on the dressing is 2cm in diameter.
 - (b) The client has a low-grade temperature.
 - (c) The client's hemoglobin is 6g/dL.
 - (d) The client voids after surgery.
88. **The nurse is caring for the client with a 5-year-old diagnosed with plumbism. Which information in the health history is most likely related to the development of plumbism?**
- (a) The client has traveled out of the country in the last 6 months.
 - (b) The client's parents are skilled stained-glass artists.
 - (c) The client lives in a house built in 1990.
 - (d) The client has several brothers and sisters.
89. **A client with a total hip replacement requires special equipment. Which equipment would assist the client with a total hip replacement with prevention of dislocation of the prosthesis?**
- (a) An abduction pillow
 - (b) A straight chair
 - (c) A pair of crutches
 - (d) A soft mattress
90. **The client with a joint replacement is scheduled to receive Lovenox (enoxaparin). Which lab value should be reported to the doctor?**
- (a) PT of 20 seconds
 - (b) PTT of 300 seconds
 - (c) Protome of 30 seconds
 - (d) INR 3
91. **An elderly client with abdominal surgery is admitted to the unit following surgery. In anticipation of complications of anesthesia and narcotic administration, the nurse should:**
- (a) Administer oxygen via nasal cannula
 - (b) Have Narcan (naloxane) available
 - (c) Prepare to administer blood products
 - (d) Prepare to do cardio-resuscitation
92. **Which roommate would be most suitable for the 6-year-old male with a fractured femur in Russell's traction?**
- (a) 16-year-old female with scoliosis
 - (b) 12-year-old male with a fractured femur
 - (c) 10-year-old male with sarcoma
 - (d) 6-year-old male with osteomyelitis
93. **A client with rheumatoid arthritis has a prescription for hydroxychloroquine (Plaquenil). Which instruction should be included in the discharge teaching?**
- (a) Take the medication with milk
 - (b) Report joint pain
 - (c) Allow 6 weeks for optimal effects
 - (d) Have eye exams every six months
94. **A client with a fractured tibia has a plaster-of-Paris cast applied to immobilize the fracture. Which action by the nurse indicates understanding of a plaster-of-Paris cast? The nurse:**
- (a) Handles the cast with the fingertips
 - (b) Bivalves the cast
 - (c) Dries the cast with a hair dryer
 - (d) Allows 24 hours before bearing weight
95. **The teenager with a fiberglass cast asks the nurse if it will be okay to allow his friends to autograph his cast. Which response would be best?**
- (a) "It will be alright for your friends to autograph the cast."
 - (b) "Because the cast is made of plaster, autographing can weaken the cast."
 - (c) "If they don't use chalk to autograph, it is okay."
 - (d) "Autographing or writing on the cast in any form will harm the cast."
96. **The nurse is assigned to care for the client with a Steinmen pin. During pin care, she notes that the LPN uses sterile gloves and Q-tips to clean the pin. Which action should the nurse take at this time?**
- (a) Assist the LPN with opening sterile packages and peroxide
 - (b) Tell the LPN that clean gloves are allowed
 - (c) Tell the LPN that the registered nurse should perform pin care
 - (d) Ask the LPN to clean the weights and pulleys with peroxide
97. **A child with scoliosis has a spica cast applied. Which action specific to the spica cast should be taken?**
- (a) Checking the bowel sounds
 - (b) Assessing the blood pressure
 - (c) Offering pain medication
 - (d) Checking for swelling
98. **The client with a cervical fracture is placed in traction. Which type of traction will be utilized at the time of discharge?**
- (a) Russell's traction
 - (b) Buck's traction
 - (c) Halo traction
 - (d) Crutchfield tong traction
99. **A client with a total knee replacement has a CPM applied during the post-operative period. Which statement made by the nurse indicates understanding of the CPM machine?**
- (a) "Use of the CPM will permit the client to ambulate during the therapy."
 - (b) "The CPM machine controls should be positioned distal to the site."
 - (c) "If the client complains of pain during the therapy, I will turn off the machine and call the doctor."
 - (d) "Use of the CPM machine will alleviate the need for physical therapy after the client is discharged."
100. **A client with a fractured hip is being taught correct use of the walker. The nurse is aware that the correct use of the walker is achieved if the:**
- (a) Palms rest lightly on the handles
 - (b) Elbows are flexed 0°
 - (c) Client walks to the front of the walker
 - (d) Client carries the walker