

HESI Med Surg EXIT EXAM Latest Update Fall 2022

1. Following discharge teaching, a male client with duodenal ulcer tells the nurse the he will drink plenty of dairy products, such as milk, to help coat and protect his ulcer. What is the best follow-up action by the nurse?
 - **Review with the client the need to avoid foods that are rich in milk and cream**
2. A male client with hypertension, who received new antihypertensive prescriptions at his last visit returns to the clinic two weeks later to evaluate his blood pressure (BP). His BP is 158/106 and he admits that he has not been taking the prescribed medication because the drugs make him “feel bad”. In explaining the need for hypertension control, the nurse should stress that an elevated BP places the client at risk for which pathophysiological condition?
 - **Stroke secondary to hemorrhage**
3. The nurse observes an unlicensed assistive personnel (UAP) positioning a newly admitted client who has a seizure disorder. The client is supine and the UAP is placing soft pillows along the side rails. What action should the nurse implement?
 - **Instruct the UAP to obtain soft blankets to secure to the side rails instead of pillows.**
4. An adolescent with major depressive disorder has been taking **duloxetine (Cymbalta)** for the past 12 days. Which assessment finding requires immediate follow-up?
 - **Describes life without purpose**
5. A 60-year-old female client with a positive family history of ovarian cancer has developed an abdominal mass and is being evaluated for possible ovarian cancer. Her Papanicolaou (Pap) smear results are negative. What information should the nurse include in the client’s teaching plan?
 - **Further evaluation involving surgery may be needed**
6. A client who recently underwent a tracheostomy is being prepared for discharge to home. Which instruction is most important for the nurse to include in the discharge plan?
 - **Teach tracheal suctioning techniques**
7. In assessing an adult client with a partial rebreather mask, the nurse notes that the oxygen reservoir bag does not deflate completely during inspiration and the client’s respiratory rate is 14 breaths / minute. What action should the nurse implement?
 - **Document the assessment data**
 - **Rational: reservoir bag should not deflate completely during inspiration and the client’s respiratory rate is within normal limits.**
8. During shift report, the central electrocardiogram (EKG) monitoring system alarms. Which client alarm should the nurse investigate first?
 - **Respiratory apnea of 30 seconds**
9. During a home visit, the nurse observed an elderly client with diabetes slip and fall. What action should the nurse take first?
 - **Check the client for lacerations or fractures**
10. At 0600 while admitting a woman for a scheduled repeat cesarean section (C-Section), the client tells the nurse that she drank a cup of coffee at 0400 because she wanted to avoid getting a headache. Which action should the nurse take first?

- **Inform the anesthesia care provider**
11. After placing a stethoscope as seen in the picture, the nurse auscultates S1 and S2 heart sounds. To determine if an S3 heart sound is present, what action should the nurse take first?
- **Listen with the bell at the same location**
12. A 66-year-old woman is retiring and will no longer have a health insurance through her place of employment. Which agency should the client be referred to by the employee health nurse for health insurance needs?
- **Medicare**
13. A client who is taking an oral dose of a tetracycline complains of gastrointestinal upset. What snack should the nurse instruct the client to take with the tetracycline?
- **Toasted wheat bread and jelly**
14. Following a lumbar puncture, a client voices several complaints. What complaint indicated to the nurse that the client is experiencing a complication?
- **“I have a headache that gets worse when I sit up”**
 - “I am having pain in my lower back when I move my legs”
 - “My throat hurts when I swallow”
 - “I feel sick to my stomach and am going to throw up”
15. An elderly client seems confused and reports the onset of nausea, dysuria, and urgency with incontinence. Which action should the nurse implement?
- **Obtain a clean catch mid-stream specimen**
16. The nurse is assisting the mother of a child with phenylketonuria (PKU) to select foods that are in keeping with the child’s dietary restrictions. Which foods are contraindicated for this child?
- **Foods sweetened with aspartame**
17. Before preparing a client for the first surgical case of the day, a part-time scrub nurse asks the circulating nurse if a 3 minute surgical hand scrub is adequate preparation for this client. Which response should the circulating nurse provide?
- **Direct the nurse to continue the surgical hand scrub for a 5 minute duration**
18. Which breakfast selection indicates that the client understands the nurse’s instructions about the dietary management of osteoporosis?
- **Bagel with jelly and skim milk**
19. The charge nurse of a critical care unit is informed at the beginning of the shift that less than the optimal number of registered nurses will be working that shift. In planning assignments, which client should receive the most care hours by a registered nurse (RN)?
- **An 82-year-old client with Alzheimer’s disease newly-fractures femur who has a Foley catheter and soft wrist restraints applied**

20. A mother brings her 6-year-old child, who has just stepped on a rusty nail, to the pediatrician's office. Upon inspection, the nurse notes that the nail went through the shoe and pierced the bottom of the child's foot. Which action should the nurse implement first?
- **Cleanse the foot with soap and water and apply an antibiotic ointment**
 - Provide teaching about the need for a tetanus booster within the next 72 hours.
 - have the mother check the child's temperature q4h for the next 24 hours
 - transfer the child to the emergency department to receive a gamma globulin injection
21. The mother of an adolescent tells the clinic nurse, "My son has athlete's foot, I have been applying triple antibiotic ointment for two days, but there has been no improvement." What instruction should the nurse provide?
- **Stop using the ointment and encourage complete drying of the feet and wearing clean socks.**
22. A 26-year-old female client is admitted to the hospital for treatment of a simple goiter, and **levothyroxine sodium (Synthroid)** is prescribed. Which symptoms indicate to the nurse that the prescribed **dosage is too high for this client**? The client experiences
- Bradycardia and constipation
 - Lethargy and lack of appetite
 - Muscle cramping and dry, flushed skin
 - **Palpitations and shortness of breath**
23. A client with a history of heart failure presents to the clinic with a nausea, vomiting, yellow vision and palpitations. Which finding is most important for the nurse to assess to the client?
- **Obtain a list of medications taken for cardiac history**
24. The healthcare provider prescribes an IV solution of isoproterenol (Isuprel) 1 mg in 250 ml of D₅W at 300 mcg/hour. The nurse should program the infusion pump to deliver how many ml/hour? (Enter numeric value only.)
- **75**
 - Rationale: Convert mg to mcg and use the formula D/H x Q. $300 \text{ mcg/hour} / 1,000 \text{ mcg} \times 250 \text{ ml} = 3/1 \times 25 = 75 \text{ ml/hour}$
25. The pathophysiological mechanism are responsible for ascites related to liver failure? (Select all that apply)
- **Fluid shifts from intravascular to interstitial area due to decreased serum protein**
 - **Increased hydrostatic pressure in portal circulation increases fluid shifts into abdomen**
 - **Increased circulating aldosterone levels that increase sodium and water retention**
26. The nurse is auscultating a client's heart sounds. Which description should the nurse use to document this sound? (Please listen to the audio first to select the option that applies)
- **Murmur**
 - Rationale: A murmur is auscultated as a swishing sound that is associated with the blood turbulence created by the heart or valvular defect.
27. The healthcare provider prescribes celtazidime (Fortax) 35 mg every 8 hours IM for an

infant. The 500 mg vial is labeled with the instruction to add 5.3 ml diluent to provide a concentration of 100 mg/ml. How many ml should the nurse administered for each dose? (Enter numeric value only. If rounding is required, round to the nearest tenth)

- **0.4**
 - **rationale:** $35\text{mg}/100\text{mg} \times 1 = 0.35 = 0.4 \text{ ml}$
28. The nurse notes that a client has been receiving hydromorphone (Dilaudid) every six hours for four days. What assessment is most important for the nurse to complete?
- **Auscultate the client's bowel sounds**
 - Observe for edema around the ankles
 - Measure the client's capillary glucose level
 - Count the apical and radial pulses simultaneously
 - **Rationale:** hydromorphone is a potent opioid analgesic that slows peristalsis and frequently causes constipation, so it is most important to Auscultate the client's bowel sounds
29. A female client is admitted with end stage pulmonary disease is alert, oriented, and complaining of shortness of breath. The client tells the nurse that she wants “no heroic measures” taken if she stops breathing, and she asks the nurse to document this in her medical record. What action should the nurse implement?
- **Ask the client to discuss “do not resuscitate” with her healthcare provider**
30. A client is receiving a full strength continuous enteral tube feeding at 50 ml/hour and has developed diarrhea. The client has a new prescription to change the feeding to half strength. What intervention should the nurse implement?
- **Add equal amounts of water and feeding to a feeding bag and infuse at 50ml/hour**
31. A female client reports that her hair is becoming coarse and breaking off, that the outer part of her eyebrows have disappeared, and that her eyes are all puffy. Which follow-up question is best for the nurse to ask?
- **Have you noticed any changes in your fingernails?**
 - **Rationale:** The pattern of reported manifestations is suggestive of hypothyroidism
32. After a third hospitalization 6 months ago, a client is admitted to the hospital with ascites and malnutrition. The client is drowsy but responding to verbal stimuli and reports recently spitting up blood. What assessment finding warrants immediate intervention by the nurse?
- **Capillary refill of 8 seconds**
 - bruises on arms and legs
 - round and tight abdomen
 - pitting edema in lower legs
33. After the nurse witnesses a preoperative client sign the surgical consent form, the nurse signs the form as a witness. What are the legal implications of the nurse's signature on the client's surgical consent form? (Select all that apply)
- **The client voluntarily grants permission for the procedure to be done**
 - **The client is competent to sign the consent without impairment of judgment**
 - **The client understands the risks and benefits associated with the procedure**
34. Following surgery, a male client with antisocial personality disorder frequently requests that a specific nurse be assigned to his care and is belligerent when another nurse is assigned. What action should the charge nurse implement?
- **Advise the client that assignments are not based on clients requests**