Get CORNWATECOMPREHENSIVE PREDICTOR 2019 B, C & D / VATI RN COMPREHENSIVE PREDICTOR 2019 FORM A,B,C &D EACH FORM CONTAINS 180 QUESTIONS AND ANSWERS AGRADE

RN VATI COMPREHENSIVE PREDICTOR FORM A

- 1. A nurse on a mental health unit is admitting a client who has posttraumatic stress disorder. Which of the following findings should the nurse expect?
- A. Talks continuously about the event
- B. Preoccupied with having a serious illness
- C. Has difficulty concentrating on a task
- D. Experiences frequent grandiose thoughts
- 2. A nurse is administering a scheduled medication to a client. The client reports that the medication appears different than what they take home. Which of the following responses should the nurse make?
- A. "Did the doctor discuss with you that there was a change in this medication?"
- B. "Do you know why this medication is being prescribed for you?"
- C. "I will call the pharmacist now to check on this medication"
- D. "I recommend that you take this medication as prescribed"
- 3. A nurse is assessing a client who is in skeletal traction for a fractured left tibia. The nurse should Identify that which the following findings indicates altered tissue perfusion of the affected extremity?
- A. Purulent drainage at the site
- B. Faint pedal pulse of left leg
- C. Pain with movement of the left great toe
- D. Warm skin temperature distal to pin site
- 4. A nurse is providing teaching to an adolescent who has peptic ulcer disease. Which of the following statements by the client indicates an understanding of the teaching?
- A. "I will decrease my daily protein intake to 15 grams per day"
- B. "I will use ibuprofen as needed to control abdominal pain"
- C. "I will take sucralfate with meals three times per"
- D. "I will avoid food and beverages that contain caffeine"
- 5. A nurse is caring for a client who is in the advanced stage of amyotrophic lateral sclerosis (ALS). Which of the following referrals is the nurse's priority?
- A. Occupational therapist

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- C. Speech-language pathologist
- D. Psychologist
- 6. A nurse administers digoxin 0.125 mg PO to an adult client. For which of the following findings should the nurse notify the provider?
- A. Constipation for 2 days
- B. Potassium level 4.2 mEq/L

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get complete pdf at learnexams.com C. Digoxin level 1 ng/mL ** normal levels 0.5- 2.0

- D. Apical pulse 58/ min
- 7. A nurse is updating the plan of care for a client who has an exacerbation of psoriasis. Which of the following interventions should the nurse include in the plan?
- A. Discontinue ultraviolet light therapy if lesions become itchy
- B. Cover lesions with an occlusive dressing after applying a corticosteroid.
- C. Scrub external lesions with a pumice stone
- D. Instruct the client to add rubbing alcohol to bath water
- 8. A nurse is verifying a record of informed consent for a client who scheduled for surgery. Which of the following actions should the nurse take?
- A. Provide Information on the informed consent form about the benefits of the surgery
- B. Confirm the client's signature is authentic
- C. Inform the client about the condition that requires treatment
- D. Explain the procedure to the client before verifying informed consent.???
- 9. A nurse is caring for a client who requests the creation of a living will. Which of the following actions should the nurse take?
- A. Schedule a meeting between the hospital ethics committee and client
- B. Determine the client's preferences about postmortem care
- C. Evaluate the client's understanding of life sustaining measures
- D. Request a conference with the client's family
- 10. A nurse in an emergency department caring for a toddler who has burns following a house fire. Which of the following actions should the nurse take first?
- A. Administer antibiotics prophylactically to prevent sepsis.
- B. Determine the location and depth of the burns.
- C. Calculate fluid replacement based on vital signs and urinary output.
- D. Check the mouth for soot and smoky breath.
- 11. A nurse is caring for an older adult client who has prescriptions for multiple medications. Which of the following factors should the nurse identify as an age-related change that increases the risk for adverse effects from medications?
- A. Prolonged medication half-life
- B. Increased medication elimination
- C. Decreased medication sensitivity
- D. Rapid gastric emptying

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12. A nurse is caring for a client who is in a seclusion room following violent behavior. The client continues to display aggressive behavior. Which of the following actions should the nurse take?

- A. Express sympathy for the client's situation.
- B. Confront the client about this behavior.
- C. Speak assertively to the client.
- D. Stand within 30 cm (1 fu of the client when speaking with them.
- 13. A nurse is reviewing the medical record of a client who is requesting combination oral contraceptives. Which of the following conditions in the client's history is a contraindication to the use of combination oral contraceptives?
- A. Hypocalcemia
- B. Diverticulosis
- C. Hyperthyroidism
- D. Thrombophlebitis
- 14. A nurse is creating a plan of care for a female client who has recurrent urinary tract infections. Which of the following interventions should the nurse include in the plan?
- A. Wear loose-fitting underwear.
- B. Take a bubble bath after intercourse
- C. Drink four 240 mL (8 oz) glasses of water each day
- D. Void every to 6 hr during the day. NO
- 15. A nurse is consulting a pharmacological reference about medication compatibility prior to administering warfarin to a client. Which of the following medications should the nurse identify as being incompatible with warfarin?
- A. Magnesium hydroxide
- B. Naproxen NSAID'S
- C. Lisinopril
- D. Propranolol
- 16. A nurse in an emergency department is caring for a client following a motor-vehicle crash. The client's Glasgow coma scale rating is 15. Which of the following findings should the nurse expect?
- A. The withdraws from pain.
- B. The client is oriented times three.
- C. The dent is unable to obey commands non.
- D. The client opens eyes to sound.