

FEUER NURSING REVIEW

**NCLEX®-RN
PRACTICE QUESTIONS BOOK**

2023 EDITION

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**MEDICAL SURGICAL NURSING
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MEDICAL SURGICAL NURSING

Booklet 1

Each question in this examination lists possible answers. Choose the best answer(s) for each.

1. A 24-year-old woman enters the emergency department (ED) via emergency medical services (EMS) subsequent to a motor vehicle accident (MVA). She is not awake or alert and needs to be manually ventilated by the clinician. She has sustained multiple traumatic injuries to her head, neck and face region. What will the nurse do first?
 1. Splint the hemorrhaging areas to decrease blood loss.
 2. Apply direct pressure to any bleeding open areas.
 3. Assess for a patent airway.
 4. Start a central intravenous line.
2. After a client has expired in the long-term skilled nursing facility, the nurse is preparing to perform postmortem care. Prior to the arrival of the client's family, which of the following below statements is most appropriate?
 1. The body is placed on a transport stretcher and covered with a sheet for removal to the morgue or funeral home.
 2. The body is bathed; dressed in clean pajamas or hospital gown; and positioned in the bed for the family for farewell.
 3. The body is bathed, placed in a shroud with ID tags attached to the big toe or ankle and the outside of the shroud.
 4. The body is placed in a shroud with equipment or tubing left in place and the HOB lowered, to await pick-up by the funeral home.
3. When carrying out and implementing a disaster plan for the health and safety of the immediate general population, the nurse must:
 1. Analyze disaster plan effectiveness.
 2. Follow directions provided by governmental agencies.
 3. Modify the disaster plan as needed.
 4. Help reduce post-traumatic stress disorders.
4. When performing nursing interventions on a client receiving peritoneal dialysis, the nurse will make sure to carefully withhold of the following pharmaceuticals?
 1. Metformin
 2. Erythropoietin
 3. Iron
 4. Vitamin E
5. A patient is scheduled to have an electromyogram (EMG). Prior to the test, the nurse should explain to the patient that:
 1. He will have to lie flat for 24 hours after the test.
 2. He will have to drink plenty of fluids after the test.
 3. He must fast from midnight the night before the test.
 4. His muscles may ache for a short time after the test.

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6. A nurse working at a hospital has completed an incident report related to a client fall. Which of the following actions are correct? Select all that apply.
1. Document in the client's medical record that an incident report was completed.
 2. Notify the client's primary healthcare provider regarding the fall.
 3. Notify the charge nurse that an incident report was completed.
 4. Notify the client's family that an incident report was completed.
 5. Have the client, or a family member of the client, sign the incident report.
7. Which of the following assessment findings would the nurse expect to observe in a patient with Lyme disease?
1. Multiple white pustules that appear 48 hrs after a tick bite.
 2. Scattered raised red hives.
 3. A flat, circular 2 inches macule.
 4. A generalized rash that appears within 24 hrs of a tick bite.
8. A patient with asthma also has angina pectoris. An antianginal drug that is contraindicated for patients with asthma is:
1. Verapamil (Calan)
 2. Propranolol (Inderal)
 3. Nifedipine (Procardia)
 4. Nitroglycerin
9. A nurse is preparing to administer 0.25 mg of alprazolam (Xanax) po. The pharmacy provides Xanax 0.5 mg po. Which procedure regarding preparation of this medication delivery is correct?
1. Obtain 2 pills to administer to the client.
 2. Have a nurse witness the wasting of $\frac{1}{2}$ of the pill.
 3. Keep the extra half of the pill in the client's room to administer at the next dosage time.
 4. Discard the extra half of the pill in the nearest wastebasket.
10. A 62-year-old female complains that she needs more light to see and has increased inability to focus on close objects despite several changes in the strength of her glasses over the years. The nurse is aware that:
1. A cataract is probably developing.
 2. She should be tested for diabetes as she is demonstrating signs of diabetic retinopathy.
 3. She should be tested for glaucoma.
 4. These are normal signs of aging.

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11. The nurse is changing the dressing on a postoperative client's abdominal incision. The incision has well approximated sutures and a JP drain, and there is a moderate amount of serosanguineous drainage. What is the nurse's best action for cleaning this incision site?

1. Cleaning the incision with hydrogen peroxide and sterile saline
2. Cleaning from the JP drain toward the suture line using sterile water
3. Cleaning the incision with Betadine after obtaining a wound culture
4. Cleaning the incision from the center outward using sterile normal saline

12. Which of the following statements made by a nurse shows the best understanding regarding the requirements of the Health Insurance Portability and Accountability Act (HIPAA)?

1. "I will close the door when taping or listening to the unit's shift report."
2. "My nursing assistant will hand me the patient flow-sheet, and not just put it on my clipboard on the medication cart."
3. "I will call the MRI department to inform them, that I would fax the client's demographic information."
4. "The client's family called wondering how he slept last night, but I told them that I could not tell them over the phone."

13. Which statements regarding amyotrophic lateral sclerosis (ALS) are correct? Select all that apply.

1. It is usually caused by a viral infection.
2. Prognosis is generally good with only minor symptoms.
3. It is also known as Lou Gehrig's disease.
4. Clients will eventually require mechanical ventilation.
5. The client's cognitive functioning deteriorates quickly.

14. The nurse is caring for a client diagnosed with multiple sclerosis (MS). Which clinical manifestations would the nurse anticipate? Select all that apply.

1. visual disturbances
2. coagulation abnormalities
3. balance difficulties
4. compromised immune system
5. mood disorders

15. A nurse is caring for a client with a major burn injury and understands that this client is at risk for developing hypersecretion of gastric acids as a response to stress. Based on this understanding, the nurse should assess for which potential complication?

1. gastric distension
2. hiatal hernia
3. esophagitis
4. Curling's ulcer

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16. The nurse is assisting the cardiothoracic surgeon in removing wound staples on a client status-post thoracotomy. Which of the following below actions demonstrated by the nurse indicates the staple remover is being used correctly while removing the wound staples?
1. Squeezing the handles and pulling to the right
 2. Squeezing the handles together all the way
 3. Squeezing the handles and pulling to the left
 4. Squeezing the handles and twisting back and forth
17. Which of the following patients should the nurse see first?
1. A patient receiving heparin who has a PTT that is 1 ½ times control.
 2. A patient with diabetes with glucose level of 210.
 3. A patient with paraplegia with a complaint of constipation.
 4. A patient with asthma with a FiO₂ of 50%.
18. Which of the following patients is at highest risk for cerebrovascular accident?
1. A 30-year old African American male with atrial fibrillation.
 2. A 30-year old African American female with morbid obesity.
 3. A 30-year old Caucasian female with high cholesterol.
 4. A 30-year old Caucasian male with hypertension.
19. The nurse is interviewing a client with suspected Guillain-Barré syndrome. Which question should the nurse ask a client to support this diagnosis?
1. “Do you take any prescription or over the counter medications?”
 2. “Were you exposed to anyone with this syndrome?”
 3. “Have you had any type of cold or stomach virus in the last month?”
 4. “Have you noticed any changes in your handwriting?”
20. A client presents to the emergency department and complains that for a three hour period the day before he had not been able to see clearly, had weakness on one side of his body, and had experienced garbled speech. The nurse correctly identifies that based on these clinical manifestations, the client most likely experienced which condition?
1. ischemic stroke
 2. hemorrhagic stroke
 3. seizure
 4. transient ischemic attack
21. A client with chronic obstructive pulmonary disease (COPD) is being monitored by the nurse. Which clinical manifestations would the nurse anticipate? Select all that apply.
1. coughing
 2. dyspnea on exertion
 3. barrel chest appearance
 4. shortened expiratory phase
 5. clubbing of fingers and toes
 6. Fever

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22. The nurse is preparing to teach a client regarding liquid iron preparations. Which instructions would the nurse include? Select all that apply.

1. It is best to take iron supplements on an empty stomach.
2. Milk is advisable to take with iron supplements as it soothes the stomach.
3. Vitamin C can aid in the absorption of iron.
4. Liquid iron preparations should be taken through a straw.
5. The client should rinse out their mouth after taking a liquid iron preparation.

23. A nurse has an order to perform a right eye irrigation. After obtaining an irrigation set with a piston syringe, the patient should be positioned:

1. upright with the head tilted toward the affected eye.
2. upright with the head tilted toward the unaffected eye.
3. supine with the head tilted toward the affected eye.
4. supine with the head tilted toward the unaffected eye.

24. When receiving one unit of packed red blood cells, a client complains of headache, nausea, and vomiting during the start of the third hour of the transfusion. Which one of the following actions should the nurse take first?

1. Check the vital signs.
2. Stop the titration.
3. Medicate with prescribed antipyretic.
4. Notify the health care provider.

25. Which of the following findings will the nurse assess for in order to determine the effectiveness of fluid restriction for a renal failure client in need of hemodialysis?

1. Absence of lung crackles
2. Decreased serum creatinine level
3. Decreased serum potassium level
4. Increased muscle strength

26. A home health nurse is planning to see four clients who live within a few miles from each other, the nurse should first see:

1. A 30-year-old client with rheumatoid arthritis who had a knee replacement 6 days ago.
2. A 45-year-old client who is recovering from a cholecystectomy performed 5 days ago.
3. A 60-year-old client with urinary retention who was taught self-catheterization before being discharged from the hospital the previous day.
4. An 85-year-old client with a pressure ulcer on the right hip and hemiparesis related to CVA.

27. Which of the following patients can be placed in a room together?

1. A patient with ulcerative colitis and a patient with a colostomy.
2. A patient with diarrhea and a patient with HIV.
3. A patient 1 day S/P cholecystectomy and a patient receiving chemotherapy.
4. A patient with R/O tuberculosis and a patient newly diagnosed with tuberculosis.

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28. The nurse notes that the client's TPN solution is infusing too slowly. She calculates that the client has received 300 cc less than what was ordered. Which of the following should the nurse institute? Select all that apply.

1. Assess the infusion system, note the client's condition and notify MD.
2. Increase the flow rate to infuse an additional 300 ml over the next 2 hours.
3. Maintain the flow at the current rate and document discrepancy in the chart.
4. Discontinue the solution and hang a bag of D5W in its place.
5. Assess the infusion system, complete an incident report.

29. The nurse receives report on four clients. Which of the following four clients should the nurse see first?

1. A client with a hip fracture complaining of shortness of breath.
2. A client with end-stage chronic obstructive pulmonary disease (COPD) with a CO₂ level of 61%.
3. A client with four days of diarrhea.
4. A client with a history of coronary artery disease and a blood pressure of 140/90 mmHg.

30. The nurse, caring for a client with Myasthenia Gravis, will pay special attention to which component?

1. The ability of the client to chew and speak distinctly.
2. The degree of anxiety the client is experiencing.
3. The ability of the client to smile and close his/her eyes.
4. The client's ability to swallow and breathe with minimal effort.

31. A nurse is caring for a new post-operative thyroidectomy client. The nurse should closely monitor the client for which of the following? Select all that apply.

1. elevated temperature
2. decreased blood pressure
3. edema
4. hoarseness
5. muscle twitching

32. A nurse is assessing a diabetic client with an arm immobilizer. The nurse notes that the client's fingers are blanched, cool, and slightly swollen. Which is the nurse's first intervention?

1. Elevating the arm above the level of the heart
2. Encouraging active and passive range of motion
3. Applying heat therapy to the affected hand and arm
4. Removing the immobilizer and applying a bivalve cast

33. The peri-operative nurse is teaching a client who is scheduled for surgery and will have an incision in the lower left abdomen. Which of the following interventions by the peri-operative nurse will help decrease pain across the surgical suture site when the client is asked to cough post-surgery?

1. Implementing a pillow splint over the lower abdomen
2. Keeping the HOB flat with feet flexed
3. Turning the client onto the right Sims' position
4. Applying gentle pressure above and below the incision bilaterally

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34. A client has undergone a colon resection and now has a left lower abdomen colostomy. Which of the following foods should the ostomy nurse encourage the patient to eat over the next 6 weeks ?

1. Cooked vegetables
2. Fresh fruit
3. Whole grain breads
4. Poached eggs with rice

35. In which of the following circumstances would the nurse stop an aminophylline drip?

1. Bradycardia
2. Low BP
3. Oliguria
4. Rashes

36. A patient comes into the Emergency Department complaining of cough, night sweats, and unexplained weight loss. He states that he began to cough up blood about an hour ago and that is what brought him to the ED. Which of the following orders would the nurse expect to see? Select all that apply.

1. Chest X-ray
2. Negative pressure room
3. Standard precautions
4. Airborne precautions
5. Droplet precautions

37. The nurse is preparing a dose of methotrexate for a client with psoriasis. The primary healthcare provider has prescribed methotrexate 15 mg IM weekly. Using the pharmacy label provided below, calculate one dose of this medication.



38. A 50-year-old male is admitted for bowel obstruction. He has been vomiting for several hours and is being worked up for surgery.

Lab Values:

pH	7.50
paCO ₂	42
HCO ₃	33

To effectively treat this acid base imbalance, which of the following drug is recommended?

1. Mannitol
2. Aldosterone
3. Lasix
4. Diamox

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39. The nurse plans the post-operative care for a 45-year-old woman scheduled for stapedectomy. What should the nurse teach the patient before she goes to surgery?

1. Expect hearing to be completely restored immediately.
2. Expect to be drowsy from general anesthesia.
3. Expect to have drains in both ears.
4. Expect to experience some vertigo, nausea and vomiting.

40. The RN is observing a student nurse care for a patient with a tracheostomy tube. The nurse would intervene if which of the following is noted?

1. The student nurse removes the soiled tracheostomy ties then replaces with clean ones.
2. The student nurse uses clean gloves to remove the tracheostomy dressing.
3. The student nurse replaces the dressing with a folded 4x4 gauze.
4. The student nurse cleans the inner canula with hydrogen peroxide.

41. A nurse is providing discharge teaching regarding reducing transmission of the Herpes Zoster virus. Which of the following instructions are correct? Select all that apply.

1. Cover mouth when sneezing or coughing.
2. Keep the rash covered.
3. Remove any crust that forms over any lesions.
4. Do not touch or scratch the rash.
5. Wash hands often.

42. The Same-Day-Surgery nurse is instituting the pre-operative care checklist for a 45 year old African American female client who is scheduled for an operative procedure later that afternoon. Which of the following pre-operative assessment findings necessitates a follow-up notification to the surgeon?

1. Hemoglobin (Hgb) 14 g/100 mL
2. Blood urea nitrogen (BUN) 15 mg/100 mL
3. Platelets 300,000/mm³
4. Serum creatinine 3.2 mg/100 mL

43. The wife of a 45-year-old alcoholic who has just been admitted for Delirium tremens is teary-eyed and distraught. She states that she has tried everything from hiding bottles to pleading with him to stop. Which of the following community resources would be the most appropriate for the nurse to refer her to?

1. Alanon
2. Alcoholics Anonymous
3. Private psychiatrist
4. Hospital chaplain

44. Which of the following instructions would be appropriate for the nurse to give a client with an ileostomy prior to discharge?

1. Only take medication that is in capsule form.
2. Try to increase the amount of fiber in the diet.
3. The special collection device must be worn at all times.
4. The stool should be in solid form