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NCLEX-RN V12.35 NATIONAL COUNCIL LICENSURE
EXAMINATION 2022/2023/2024

Exam : NCLEX-RN

Title : National Council Licensure
Examination(NCLEX-RN)

Vendor : NCLEX

Version : V12.35

NO.1 A depressed client is seen at the mental health center for follow-up after an attempted suicide 1 week ago. She has taken phenelzine sulfate (Nardil), a monoamine oxidase (MAO) inhibitor, for 7 straight days. She states that she is not feeling any better. The nurse explains that the drug must accumulate to an effective level before symptoms are totally relieved. Symptom relief is expected to occur within:

- A. 10 days
- B. 2-4 weeks
- C. 2 months D. 3 months

Answer: B

Explanation:

- (A) This answer is incorrect. It can take up to 1 month for therapeutic effect of the medication.
- (B) This answer is correct. Because MAO inhibitors are slow to act, it takes 2-4 weeks before improvement of symptoms is noted.
- (C) This answer is incorrect. It can take up to 1 month for therapeutic effect of the medication. (D) This answer is incorrect. Therapeutic effects of the medication are noted within 1 month of drug therapy.

NO.2 Cystic fibrosis is transmitted as an autosomal recessive trait. This means that:

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NCLEX-RN (National Council Licensure Examination for Registered Nurses) is a standardized exam that all nurses in the United States must pass to obtain their nursing license. NCLEX-RN Exam is developed and administered by the National Council of State Boards of Nursing (NCSBN) and is designed to test the knowledge and skills necessary for safe and effective nursing practice.

NCLEX-RN exam consists of a maximum of 265 questions, and candidates have up to six hours to complete it. NCLEX-RN exam is computer-adaptive, which means that the difficulty of the questions will vary based on the candidate's performance. NCLEX-RN exam covers a range of topics, including patient care, safety, pharmacology, health promotion, and disease prevention.

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NCLEX National Council Licensure Examination(NCLEX-RN) Sample Questions (Q198-Q203):

NEW QUESTION # 198

A 28-year-old multigravida has class II heart disease. At her prenatal visit at 34 weeks' gestation, all of the following observations are made. Which would require intervention?

- A. Weight gain of 2 kg in 4 weeks
- B. Subjective data: shortness of breath after showering
- C. Ankle edema reported present in late afternoon and evenings
- D. Blood pressure of 128/78

Answer: B

Explanation:

(A) This is not an excessive weight gain indicative of fluid retention. (B) The blood pressure is within normal range. (C) Showering should not cause shortness of breath. This could be a sign of cardiac decompensation. (D) Dependent ankle edema is normal late in the day among pregnant women. Progressive edema would be a dangerous development.

NEW QUESTION # 199

On admission to the inpatient unit, a 34-year-old client is able to follow simple directions, but with great difficulty. He is worried about how he can keep clean in such a public place and repeatedly dusts his bureau, straightens his bed, and adjusts the clothes in his closet. The client is experiencing a severe level of anxiety. Which response by the nurse would be most therapeutic in initially attempting to reduce his anxiety?

- A. "I've inspected this room and it is perfectly clean."
- B. "You will not be allowed to remain in your room if you continue to bother things."
- C. "Tell me why your room needs to be so clean."
- D. "I can see how uncomfortable you are, but I would like you to walk with me so I can show you around the unit."

Answer: D

Explanation:

Explanation

(A) This statement is punitive. (B) Acknowledging the anxiety and channeling it into some positive activity is therapeutic. (C) The client cannot say "why"; this statement puts the client on the defensive. (D) A rational approach, especially a judgmental one, is nontherapeutic.

NEW QUESTION # 200

On the third postpartum day, a client complains of extremely tender breasts. On palpation, the nurse notes a very firm, shiny appearance to the breasts and some milk leakage. She is bottle feeding. The nurse should initially recommend to her to:

- A. Allow the infant to breast-feed at the next feeding time to empty the breasts
- B. Apply ice packs to the breasts and wear a supportive, well-fitting bra
- C. Take 2 ibuprofen (Motrin) tablets by mouth now because the baby will be returning for feeding in 20 minutes
- D. Take a warm shower and express milk from both breasts until empty

Answer: B

Explanation:

(A) Judicious use of analgesics is appropriate with breast engorgement; however, mechanical suppression would be the initial recommendation. (B) Breast-feeding every 112-3 hours will reduce and/or prevent breast engorgement. Breast-feeding will promote milk production, which will compound the distention and stasis of the venous circulation of engorgement in a bottlefeeding mother. (C) Ice packs reduce milk flow while the snug, supportive bra provides mechanical suppression and decreases pulling on Cooper's ligament. In addition, breast binders or ace bandages may be used for some women. (D) Warmth promotes milk production and may stimulate the let-down reflex. These measures would contribute to the venous congestion of engorgement.

NEW QUESTION # 201

A 74-year-old obese man who has undergone open reduction and internal fixation of the right hip is 8 days postoperative. He has a history of arthritis and atrial fibrillation. He admits to right lower leg pain, described as "a cramp in my leg." An appropriate nursing action is to:

- A. Assess for edema and heat of the right leg
- B. Assess for pain with plantiflexion
- C. Elevate right lower extremity with pillows propped under the knee
- D. Instruct him to rub the cramp out of his leg

Answer: A

Explanation:

(A) Calf pain with dorsiflexion of the foot (Homans' sign) can be a sign of a deep venous thrombosis; however, it is not diagnostic of the condition. (B) Swelling and warmth along the affected vein are commonly observed clinical manifestations of a deep venous thrombosis as a result of inflammation of the vessel wall. (C) Rubbing or massaging of the affected leg is contraindicated because of the risk of the clot breaking loose and becoming an embolus. (D) A pillow behind the knee can be constricting and further impair blood flow.

NEW QUESTION # 202

A 67-year-old postoperative TURP client has hematuria. The nurse caring for him reviews his postoperative orders and recognizes that which one of the following prescribed medications would best relieve this problem?

- A. Acetaminophen suppository 650 mg
- B. Promethazine 25 mg IM
- C. Meperidine 50 mg IM
- D. Aminocaproic acid (Amicar) 6 g/24 hr

Answer: D

Explanation:

Explanation/Reference:

Explanation:

(A) Acetaminophen (Tylenol) has analgesic and antipyretic actions approximately equivalent to those of aspirin. It produces analgesia possibly by action on the peripheral nervous system. It reduces fever by direct action on the hypothalamus heat-regulating center with consequent peripheral vasodilation. It is generally used for temporary relief of mild to moderate pain, such as a simple headache, minor joint and muscle pains, and control of fever. (B) Meperidine is a narcotic agonist analgesic with properties similar to morphine except that it has a shorter duration of action and produces less depression of urinary retention and smooth muscle spasm. It is used for moderate to severe pain, for a preoperative medication, for support of anesthesia, and for obstetrical analgesia. In a postoperative TURP client, it would be used in conjunction with other medications for relief of moderate to severe pain, but not specifically for bladder spasms associated with TURP surgery. (C) Promethazine hydrochloride is an antihistamine, antiemetic preparation. It exerts antiserotonin, anticholinergic, and local anesthetic actions. It is used for symptomatic relief of various allergic conditions, motion sickness, nausea, and vomiting. It is used for preoperative, postoperative, and obstetrical sedation and as an adjunct to analgesics for control of pain. (D) This answer is correct because aminocaproic acid is prescribed specifically for hematuria. Aminocaproic acid is excreted in the urine. The nurse should be alert for possible signs of thrombosis, particularly in the extremities.

NEW QUESTION # 203

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