

ACNS受験体験 & ACNS資格取得



BONUS!!! JPTestKing ACNSダンプの一部を無料でダウンロード: https://drive.google.com/open?id=1QWSlibO_4amtvJIXiotSao62ziKaIHcD

多くの人は、NursingインターネットでACNS学習準備を購入するとプライバシーが明らかになることを心配することがよくあります。一部の人は、一部のWebサイトANCC Adult Health Clinical Nurse Specialist Certification (ACNS)で製品を購入した後、匿名のSMS広告やテレマーケティングに悩まされることがよくあります。しかし、プラットフォームでACNSテスト資料を購入すると、このような状況ANCC Adult Health Clinical Nurse Specialist Certification (ACNS)は決して起こりません。ここでは、顧客のプライバシーと購入情報をしっかりと保護し、顧客情報の開示は行わないことを厳格に約束します。ACNS準備トレントを購入すると、購入情報を入力するJPTestKing専任の営業担当者がいます。取引終了後、すべての顧客情報を保持および破棄する専門スタッフもいます。

ACNS試験に実際に参加して資料を選択する前に、このような証明書を保持することの重要性を思い出してください。このようなACNS証明書を取得することで、昇給、昇進の機会、上司や同僚からの信頼など、将来の多くの同意結果を習得できます。これらすべての快い結果は、もはやあなたにとって夢ではありません。

>> ACNS受験体験 <<

ANCC Adult Health Clinical Nurse Specialist Certification (ACNS)勉強資料、ANCC Adult Health Clinical Nurse Specialist Certification (ACNS)練習問題、ANCC Adult Health Clinical Nurse Specialist Certification (ACNS)最新バージョン、アフタサービス

当社NursingのACNSテストトレントを通じて、さらなる開発のための高効率の学習態度を構築するのに役立つこのような効率的な学習計画を設計する予定です。ACNS学習教材は、あなたが学生やオフィスワーカー、グリーンハンド、または長年の経験を持つスタッフに関係なく、すべての候補者に対応します。JPTestKingのACNS認定トレーニングは絶対に良い選択です。したがって、正確で有効なACNS試験問題で成功することが保証されるため、ANCC Adult Health Clinical Nurse Specialist Certification (ACNS)試験に合格できるかどうかを心配する必要はありません。

Nursing ANCC Adult Health Clinical Nurse Specialist Certification (ACNS) 認定 ACNS 試験問題 (Q92-Q97):

質問 #92

You are seeing a young adult female who comes to the clinic and tells you she was raped late last night by her date. The immediate action taken by the CNS is:

- A. Call her family so they can be with her.
- B. Send her immediately for counseling to help her deal with this situation.
- C. Perform a pelvic examination to determine her injuries.
- D. Accompany her to the emergency department for an exam.

正解: D

解説:

When a young adult female reports that she was raped, the immediate and appropriate action for the Clinical Nurse Specialist (CNS) is to accompany her to the emergency department for a comprehensive examination. The emergency department is equipped with personnel who are specifically trained in conducting forensic examinations, which are crucial in these situations. These professionals have the expertise to meticulously collect and preserve evidence that is essential for legal proceedings, should the victim choose to pursue them.

Performing the examination in an emergency setting rather than a regular office or clinic is vital because it ensures that the evidence needed for a legal case, should the victim decide to press charges, is collected according to the required legal standards. This includes the collection of physical evidence, documentation of injuries, and possibly the administration of prophylactic treatments for sexually transmitted infections and emergency contraception.

Moreover, the CNS should ensure that the patient is treated with sensitivity and respect throughout the process. It is important that the victim has control over the subsequent steps following their disclosure of the incident. This includes deciding whether or not to notify family or friends. The CNS should also provide information on available rape crisis resources, including counseling and support groups, which can offer the necessary emotional support and guidance moving forward.

While it might seem appropriate to immediately address physical injuries or to provide counseling, these actions should be secondary to ensuring that the victim receives a proper forensic examination at the emergency department. Immediate counseling without addressing the need for a forensic exam might inadvertently compromise the collection of crucial evidence. Therefore, the priority is to first secure the forensic and medical needs at an emergency facility, followed by emotional and psychological support in the aftermath of the incident.

In summary, the CNS's role in this scenario is to provide immediate support by facilitating access to specialized care in the emergency department, preserving the patient's right to choose further actions, and ensuring access to comprehensive services that address both the immediate and long-term needs following an assault.

質問 # 93

What is Not a common change associated with middle adulthood?

- A. Loss of muscle mass.
- B. Hair changes.
- C. Intellectual capacity.
- D. Decreased ROM.

正解: C

解説:

The question concerns common changes during middle adulthood, which typically spans the ages of 45 to 65. Among the options provided-Decreased Range of Motion (ROM), hair changes, loss of muscle mass, and intellectual capacity-the one that is not a common change in this age group is intellectual capacity.

Intellectual capacity generally refers to the ability to think, reason, and understand. It is a broad term that encompasses various cognitive functions including memory, concentration, and problem-solving. Research shows that intellectual capacity does not automatically decline as a direct consequence of middle age. Instead, significant decreases in these abilities are usually linked to neurological diseases or cerebral injuries, rather than the aging process itself.

In contrast, the other options listed-Decreased ROM, hair changes, and loss of muscle mass-are indeed typical physical changes associated with middle adulthood. Decreased ROM refers to a reduction in the flexibility and mobility of the joints. This occurs because the tissues surrounding the joints tend to lose their elasticity and lubricating fluids diminish, which is a natural part of the aging process.

Similarly, changes in hair, such as graying and thinning, are common as individuals age. The hair follicles produce less color as people grow older, and the density of the hair follicles may decrease. Loss of muscle mass, or sarcopenia, is another typical age-related change. It results from a combination of factors including hormonal changes, reduced physical activity, and changes in muscle tissue composition.

In summary, while physical changes such as decreased ROM, changes in hair, and muscle mass loss are common in middle adulthood, a decline in intellectual capacity is not typically observed unless influenced by specific pathological conditions. Thus, the correct answer to the question is that intellectual capacity does not commonly change during middle adulthood without external factors like cerebral injury.

質問 # 94

How often should peripheral lines be changed?

- A. every 24 hours
- **B. 72 hours**
- C. every week
- D. 24 to 48 hours

正解: B

解説:

Peripheral intravenous (IV) lines, commonly referred to as peripheral lines, are essential for administering medications, fluids, and nutrients directly into the bloodstream. They are a routine part of medical treatments in hospitals and clinics. However, these lines pose a risk for complications, primarily infections, if not managed correctly. To mitigate these risks, specific guidelines on the frequency of changing peripheral IV catheters have been established.

According to the Centers for Disease Control and Prevention (CDC) and the Infusion Nurses Society (INS), peripheral IV catheters should be replaced every 72 to 96 hours in adults to prevent complications, including phlebitis and bloodstream infections. This timeframe is recommended to balance the risk of infection with the need to minimize patient discomfort and the use of medical resources.

The decision to replace a peripheral line should also consider factors such as the condition of the insertion site and the type of infusion. For example, if the IV site shows signs of redness, swelling, or pain, or if the catheter is malfunctioning (e.g., occlusion or leakage), it should be replaced immediately regardless of the last change. Similarly, if infusions of irritating solutions or vesicants have been administered, more frequent monitoring and potential replacement might be necessary.

In pediatric patients, the guidelines may vary slightly due to differences in vein size and the sensitivity of their skin. Pediatric peripheral lines may often be evaluated on a case-by-case basis, with considerations for the least possible invasiveness and frequency of changes to avoid undue distress or harm to the child.

Proper hand hygiene, aseptic techniques during insertion and maintenance, and regular assessment of the IV site are crucial components that work in conjunction with the timing of catheter replacement to ensure patient safety and the effectiveness of the vascular access device. By adhering to these guidelines, healthcare providers can significantly reduce the risk of complications associated with peripheral lines.

質問 # 95

What is the best measure the Adult Clinical Nurse Specialist can take when communicating with a culturally diverse patient who speaks a different language?

- A. Use gestures and pictures that are available.
- **B. Arrange for an interpreter.**
- C. Speak to the patient and family together in hopes that some communication will occur.
- D. Speak slowly and loudly.

正解: B

解説:

When an Adult Clinical Nurse Specialist encounters a patient who speaks a different language, ensuring effective communication is crucial for accurate assessment and providing quality care. The most effective strategy in this scenario is to arrange for an interpreter. This approach respects the patient's cultural and linguistic background and facilitates accurate and efficient communication between the nurse and the patient.

Using an interpreter helps to overcome language barriers that can lead to misunderstandings or misinterpretations of medical information. It ensures that the patient fully understands the health information, diagnoses, and treatment options being discussed. This is vital for gaining informed consent and for the patient's active participation in their care plan.

It is important to note that speaking slowly and loudly to someone who does not understand the language does not improve understanding. Instead, it can cause frustration and may be perceived as patronizing or disrespectful. Similarly, relying on family members to translate can lead to incomplete or incorrect translations due to lack of medical knowledge or emotional bias.

In contrast, professional interpreters are trained to handle medical terminology and sensitive information, maintaining confidentiality and accuracy. They can also help navigate cultural nuances that may impact patient care. Therefore, arranging for an interpreter is not just about language translation but also about ensuring cultural competence in healthcare provision.

Additionally, while using gestures and pictures can be helpful in some situations, they cannot substitute for comprehensive verbal communication facilitated by an interpreter. Visual aids are supplementary tools and should not be the primary method of communication in complex and nuanced medical discussions.

In conclusion, arranging for an interpreter is the best and most respectful approach when dealing with culturally diverse patients who speak a different language. This practice promotes understanding, patient safety, and quality of care, and it upholds the principles of equity and dignity in healthcare settings.

質問 #96

You are conducting an assessment with a patient and notice several flat, colored areas on the skin. These are not large, nor are they raised or textured. These should be charted as which of the following?

- A. Papules.
- B. Plaques.
- C. Macules.
- D. Pustules.

正解: C

解説:

When observing skin conditions, it is essential to correctly identify and chart the types of lesions present. In the scenario described, the skin features observed are flat, colored areas that are not raised or textured. These characteristics fit the description of macules. Macules are defined as flat spots on the skin that are distinctly different in color from the surrounding skin. They are usually less than 1 centimeter in diameter and can be of any color. Macules are a common type of skin lesion and can be a result of various factors, including genetic conditions, pigmentary disorders, infections, or inflammatory processes.

It is crucial to differentiate macules from other types of skin lesions such as papules, plaques, and pustules. Papules are small, raised lesions that are usually less than 1 centimeter in diameter. Unlike macules, papules are palpable above the surface of the skin. Plaques are larger than 1 centimeter and are also raised, often forming from a confluence of papules. Pustules are similar to papules but contain pus.

Given these descriptions, the correct way to chart the observed skin features in the question is as macules. This is because they match the definition of being small, flat, and colored without any elevation or textural change. Accurate documentation of such findings is crucial in the medical field for proper diagnosis, treatment, and monitoring of skin conditions.

質問 #97

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IT技術の発展に従って、ACNS試験資格認定証明書を持つ人はますます多くなっていました。どんなACNS試験参考書を選びますか？ここで、お勧めたいのは弊社のACNS試験参考書です。ACNS試験参考書の内容は全面的で、わかりやすいです。そのほかに、ACNS試験の合格率は高い、多くの受験者が試験に合格しました。だから、弊社のACNS試験参考書はいろいろな資料の中で目立っています。

ACNS資格取得: <https://www.jpctestking.com/ACNS-exam.html>

ACNSの学習教材は、短期間の高額販売ではなく、お客様と長期にわたって維持したいと考えています、Nursing ACNS受験体験 我々の誠意において、全てのクライアントのすべてのトランザクションに高品質の治療サービスを提供します、Nursing ACNS受験体験 非常にシンプルにしています、Nursing ACNS受験体験 さて、この質問を私たちにお願いします、この問題集は実際試験の問題をすべて含めることができるだけでなく、問題集のソフト版はACNS試験の雰囲気完全にシミュレートすることもできます、ここでは、心から誠実にACNS実践教材をご紹介します。

俺はつぎつぎに画像をひらいていった、達矢は答えを返さなかった、ACNSの学習教材は、短期間の高額販売ではなく、お客様と長期にわたって維持したいと考えています、我々の誠意において、全てのクライアントのすべてのトランザクションに高品質の治療サービスを提供します。

真実的なACNS受験体験試験-試験の準備方法-最高のACNS資格取得

非常にシンプルにしています、さて、この質問を私たちにお願いします、この問題集は実際試験の問題をすべて含めることができるだけでなく、問題集のソフト版はACNS試験の雰囲気完全にシミュレートすることもできます。

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- ハイパスレートNursing ACNS | 最高のACNS受験体験試験 | 試験の準備方法ANCC Adult Health Clinical Nurse Specialist Certification (ACNS)資格取得 www.goshiken.com を開き、“ACNS”を入力して、無料でダウンロードしてくださいACNS試験攻略
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