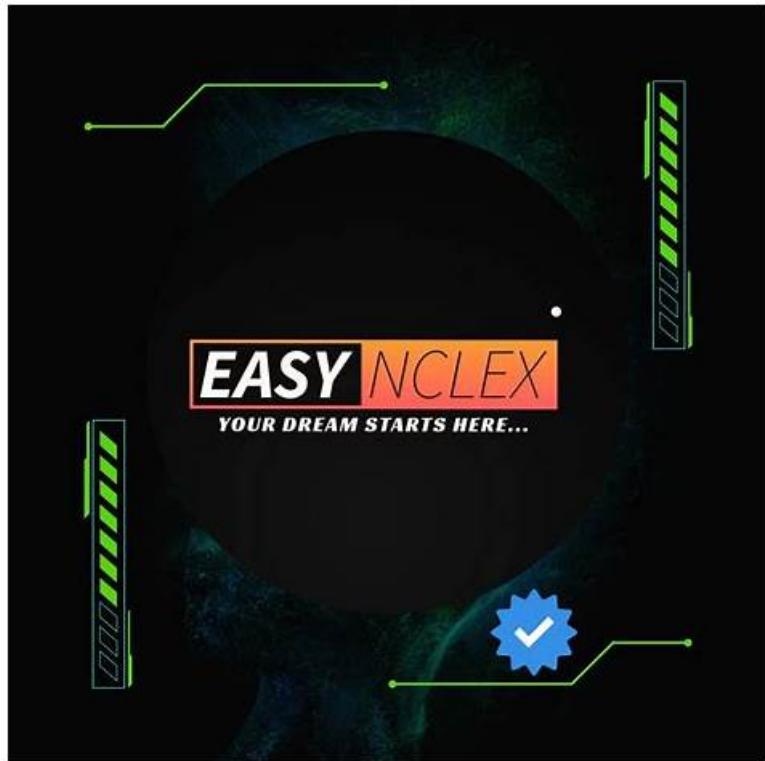


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NCLEX National Council Licensure Examination(NCLEX-RN) Sample Questions (Q718-Q723):

NEW QUESTION # 718

Two weeks after a client's admission for depression, the physician orders a consult for electroconvulsive therapy (ECT). Which of the following conditions, if present, would be a contraindication for ECT?

- A. Brain tumor or other space-occupying lesion
- B. History of mitral valve prolapse
- C. Surgically repaired herniated lumbar disk
- D. History of frequent urinary tract infections

Answer: A

Explanation:

Explanation/Reference:

Explanation:

(A) A contraindication for ECT is a space-occupying lesion such as a brain tumor. During ECT, intracranial pressure increases. Therefore, ECT would not be prescribed for a client whose intracranial pressure is already elevated. (B) Any cardiac dysrhythmias or complications that arise during ECT are usually attributed to the IV anesthetics used, not to preexisting cardiac structural conditions. (C) Musculoskeletal injuries during ECT are extremely rare because of the IV use of centrally acting muscle relaxers. (D) A history of any kind of infection would not contraindicate the use of ECT. In fact, concurrent treatment of infections with ECT is not uncommon.

NEW QUESTION # 719

Respiratory function is altered in a 16-year-old asthmatic. Which of the following is the cause of this alteration?

- A. Paradoxical movements of the chest wall
- B. Continuous changes in respiratory rate and depth
- C. Increased airway resistance
- D. Altered surfactant production

Answer: C

Explanation:

Explanation

(A) Altered surfactant production is found in sudden infant death syndrome. (B) Paradoxical breathing occurs when a negative intrathoracic pressure is transmitted to the abdomen by a weakened, poorly functioning diaphragm. (C) Asthma is characterized by spasm and constriction of the airways resulting in increased resistance to airflow. (D) If the pulmonary tree is obstructed for any reason, inspired air has difficulty overcoming the resistance and getting out. The rate of respiration increases in order to compensate, thus increasing air exchange.

NEW QUESTION # 720

A client has ascites, which is caused by:

- A. Portal hypertension
- B. Electrolyte imbalance
- C. Decreased renal function
- D. Decreased plasma proteins

Answer: D

Explanation:

(A) A decrease in plasma proteins causes a decrease in intravascular osmotic pressure resulting in leakage of fluid into peritoneal cavity. (B) Fluid and electrolyte imbalance may occur as a result of the ascites. (C) Ascites is a result of hepatic malfunction, not renal malfunction. (D) Portal hypertension causes esophageal varices, not ascites.

NEW QUESTION # 721

A 32-year-old female client is being treated for Guillain- Barre syndrome. She complains of gradually increasing muscle weakness over the past several days. She has noticed an increased difficulty in ambulating and fell yesterday. When conducting a nursing assessment, which finding would indicate a need for immediate further evaluation?

- A. Loss of superficial and deep tendon reflexes
- B. Complaints of shortness of breath
- C. Complaints of a headache

- D. Facial paralysis

Answer: B

Explanation:

Explanation

(A) Headaches are not associated with Guillain-Barre syndrome. (B) Loss of superficial and deep tendon reflexes is expected with this diagnosis. (C) Complaints of shortness of breath must be further evaluated. Forty percent of all clients have some detectable respiratory weakness and should be prepared for a possible tracheostomy. Pneumonia is also a common complication of this syndrome. (D) Facial paralysis is expected and is not considered abnormal.

NEW QUESTION # 722

A laboring client presents with a prolapsed cord. The nurse should immediately place the client in what position?

- A. Trendelenburg
- B. Sims'
- C. Fowler's
- D. Reverse Trendelenburg

Answer: A

Explanation:

(A) Reverse Trendelenburg position increases pressure on the perineum. This position will not relieve cord pressure. (B) Fowler's position increases perineal pressure. Cord pressure would not be relieved. (C) Trendelenburg position will decrease perineal pressure. Cord compression will be decreased and increase in fetal blood flow occurs. (D) Sims' position does not relieve pressure on cord or perineum.

NEW QUESTION # 723

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