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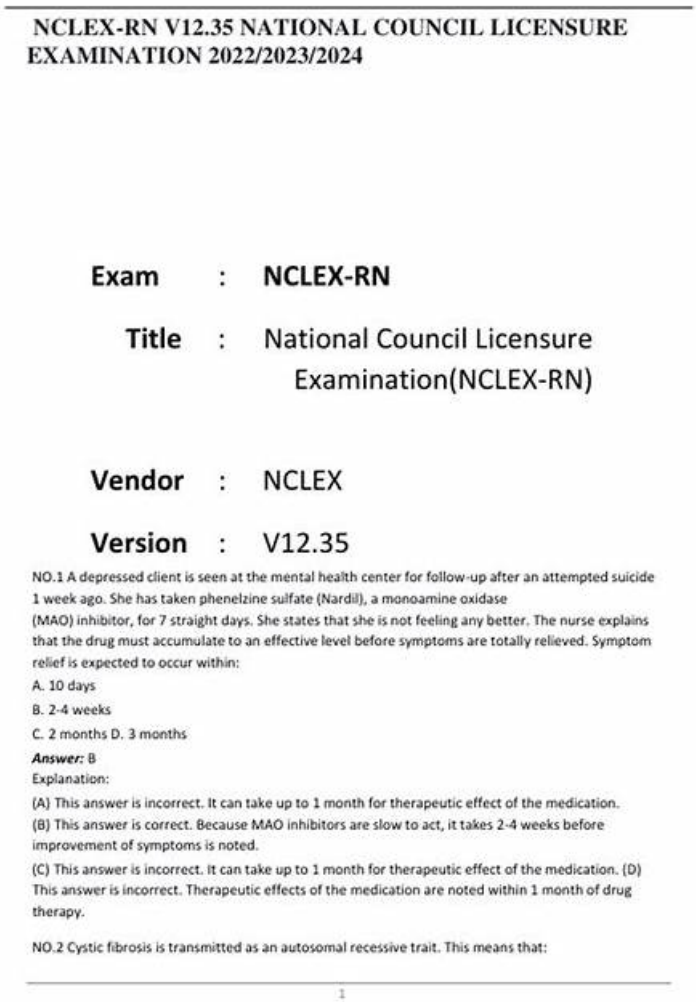

NCLEX-RN V12.35 NATIONAL COUNCIL LICENSURE EXAMINATION 2022/2023/2024

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 exam is computerized and adaptive, meaning that the difficulty level of the exam adjusts based on a nurse's performance. NCLEX-RN exam is designed to be challenging, and many nurses find it to be a stressful experience. However, the NCLEX-RN is an essential step for nurses who wish to enter the workforce and begin practicing as registered nurses. With proper preparation and study, nurses can feel confident and well-prepared to pass the exam and begin their careers in nursing.

NCLEX-RN (National Council Licensure Examination for Registered Nurses) is an exam that is designed to test the knowledge, skills, and abilities of individuals who are seeking to become registered nurses. NCLEX-RN Exam is developed and administered by the National Council of State Boards of Nursing (NCSBN) and is used to assess the competency of nurses who are seeking licensure in the United States and Canada. The NCLEX-RN is a computer adaptive test (CAT) which means that the questions are tailored to the individual’s ability level.

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NCLEX-RN exam is a computer-adaptive test (CAT) that adapts to the test taker's abilities. This means that the difficulty level of the questions will adjust based on the test taker's responses. NCLEX-RN Exam consists of a minimum of 75 questions and a maximum of 265 questions. Test takers have up to six hours to complete the exam, which includes two optional breaks.

NCLEX National Council Licensure Examination(NCLEX-RN) Sample Questions (Q631-Q636):

NEW QUESTION # 631
A client is diagnosed with organic brain disorder. The nursing care should include:

- A. Challenging educational programs
- B. Detailed explanations of procedures
- C. Long, extended family visits
- D. Organized, safe environment

Answer: D

Explanation:
Explanation
(A) A priority nursing goal is attending to the client's safety and well-being. Reorient frequently, remove dangerous objects, and maintain consistent environment. (B) Short, frequent visits are recommended to avoid overstimulation and fatigue. (C) Short, concise, simple explanations are easier to understand. (D) Mental capability and attention span deficits make learning difficult and frustrating.

NEW QUESTION # 632
Following TURP, which of the following instructions would be appropriate to prevent or alleviate anxiety concerning the client's sexual functioning?

- A. "You may resume sexual intercourse in 2 weeks."
- B. "Many men experience impotence following TURP."
- C. "A transurethral resection does not usually cause impotence."
- D. "Check with your doctor about resuming sexual activity."

Answer: C

Explanation:
(A) Sexual activity should be delayed until cleared by the client's physician. (B) Although many men experience retrograde ejaculation following prostate surgery, potency is seldom affected. (C) Although the client may experience retrograde ejaculation, it will not limit his ability to engage in sexual intercourse. (D) Although the client should obtain clearance from his physician before resuming sexual activity, this statement does not give the client any information or reassurance about future sexual activity or potency that could decrease his anxiety.

NEW QUESTION # 633
Goal setting for a client with Meniere's disease should include which of the following?

- A. Consumption of three meals per day
- B. Frequent ambulation

- C. Prevention of a fall injury
- D. Prevention of infection

Answer: C

Explanation:
(A) Although not contraindicated, initially ambulation may be difficult because of vertigo and is recommended only with assistance. (B) Vertigo resulting in balance problems is one of
the most common manifestations of Meniere's disease. (C) Adequate nutrition is important, but the emphasis in Meniere's disease is not the number of meals per day but a decrease in intake of sodium. (D) Infection is not an anticipated problem.

NEW QUESTION # 634
A female client is anticipating a visit with her parents over the Thanksgiving holidays. She has recently begun experiencing periods of extreme shortness of breath, which her physician has labeled as panic attacks. Which of the following statements by the nurse would enhance therapeutic communication?

- A. "Perhaps you and I can discover what produces your anxiety."
- B. "Tell me about your dislike for your parents."
- C. "Don't worry, everything will be all right on your visit with your parents."
- D. "Why do you feel this way?"

Answer: A

Explanation:
Explanation/Reference:
Explanation:
(A) Asking the client to provide an explanation for her feelings is often intimidating. (B) This response is probing and may make the client feel used and valued only for the information she can provide. (C) This underrates the client's feelings and belittles her concerns. It may cause the client to stop sharing feelings for fear that they will be ridiculed. (D) The emphasis is on working with the client. It shows that there is hope for change through collaboration.

NEW QUESTION # 635
The nurse is caring for a laboring client. Assessment data include cervical dilation 9 cm; contractions every
1-2 minutes; strong, large amount of "bloody show." The most appropriate nursing goal for this client would be:

- A. Assist with assessment procedures.
- B. Maintain client's privacy.
- C. Provide strategies to maintain client control.
- D. Enlist additional caregiver support to ensure client's safety.

Answer: C

Explanation:
Explanation
(A) Privacy may help the laboring client feel safer, but measures that enhance coping take priority. (B) The frequency of assessments do increase in transition, but helping the client to maintain control and cope with this phase of labor takes on importance. (C) This laboring client is in transition, the most difficult part of the first stage of labor because of decreased frequency, increased duration and intensity, and decreased resting phase of the uterine contraction. The client's ability to cope is most threatened during this phase of labor, and nursing actions aredirected toward helping the client to maintain control. (D) Safety is a concern throughout labor, but helping the client to cope takes on importance in transition.

NEW QUESTION # 636
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