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## Nursing ANCC Adult Health Clinical Nurse Specialist Certification (ACNS) Sample Questions (Q125-Q130):

### NEW QUESTION # 125

What is a hordeolum?

- A. Damage to the corneal epithelium due shingles or herpes infection.
- **B. Painful acute bacterial infection of a hair follicle on the eyelid.**
- C. A yellow triangular thickening of the conjunctiva that extends across the cornea.
- D. Chronic inflammation of the sweat glands of the eyelids.

**Answer: B**

Explanation:

A hordeolum, commonly referred to as a stye, is a painful, acute bacterial infection that involves a hair follicle on the eyelid. This condition results primarily from the infection of the sebaceous glands or apocrine sweat glands that are associated with the eyelash

follicles. The most common causative agent is *Staphylococcus aureus*, a type of bacteria.

The typical signs of a hordeolum include a localized, painful, red swelling on the eyelid. Sometimes, the affected area may also have a small pus point at the center of the swelling, indicating the presence of an abscess. The pain and swelling can cause significant discomfort and may interfere with the opening of the eye or cause a sensation of irritation and scratchiness in the eye.

Treatment of a hordeolum generally involves warm compresses applied several times a day to help promote drainage and resolve the infection. In some cases, antibiotic ointments or drops may be prescribed to help clear the infection more rapidly. It is important for individuals with a hordeolum to avoid squeezing or attempting to pop the stye, as this can spread the infection.

A hordeolum should not be confused with a chalazion, which is a chronic granulomatous inflammation of the Meibomian glands in the eyelid. Unlike a hordeolum, a chalazion is typically painless and involves a slower development of a firm lump in the eyelid.

Treatment for a chalazion may include warm compresses and, in persistent cases, surgical intervention.

Proper eyelid hygiene, including regular cleaning, is crucial for preventing the occurrence of styes and other eyelid infections. People who are prone to eyelid infections should also consider discussing preventive measures with a healthcare professional. Avoiding the use of expired or contaminated eye makeup and eye care products can also help reduce the risk of developing styes.

### NEW QUESTION # 126

When weaning a patient from mechanical ventilation, you should consider returning the patient to the ventilator if which of the following occurs?

- A. all of the above
- B. increasing PaCO<sub>2</sub>
- C. decreased VT
- D. O<sub>2</sub> desaturation by blood gas analysis or pulse oximetry

**Answer: A**

Explanation:

When weaning a patient from mechanical ventilation, there are several physiological changes and clinical signs that must be closely monitored to determine if the patient is ready to breathe independently or if they should be returned to ventilatory support. The process of weaning should be carefully managed, considering various factors that may indicate the patient's inability to maintain adequate respiratory function without assistance. Here are the key considerations:

**\*\*Decreased Tidal Volume (VT):\*\*** Tidal volume is the volume of air moved into and out of the lungs during each respiratory cycle. A significant decrease in tidal volume can be a sign that the patient is struggling to maintain adequate ventilation. This might happen due to muscle fatigue or worsening of the underlying respiratory condition. If the tidal volume falls below a critical threshold, it could lead to inadequate gas exchange and respiratory acidosis, necessitating the return to mechanical support.

**\*\*Increasing PaCO<sub>2</sub>:\*\*** An increase in arterial carbon dioxide (PaCO<sub>2</sub>) levels is a direct indicator of hypoventilation. During the weaning process, if the patient's PaCO<sub>2</sub> levels begin to rise, it suggests that they are not able to adequately exhale CO<sub>2</sub> due to reduced respiratory drive or muscle strength. This retention of CO<sub>2</sub> can lead to respiratory acidosis, a dangerous condition requiring immediate intervention, potentially including reinstatement of mechanical ventilation.

**\*\*O<sub>2</sub> Desaturation:\*\*** Monitoring oxygen saturation is crucial during the weaning process. Desaturation, detected either through blood gas analysis or pulse oximetry, indicates that the patient is not receiving enough oxygen. This could be due to a variety of reasons including inadequate lung mechanics, increased work of breathing, or underlying pulmonary pathology. Persistent low oxygen levels can cause vital organs to suffer from hypoxia, which is detrimental and necessitates reevaluation of the patient's readiness for weaning.

**\*\*Other Indications:\*\*** Besides the specific signs mentioned, several other clinical indicators should prompt consideration of returning a patient to ventilatory support. These include the development of new or worsening cardiac dysrhythmias, significant changes in blood pressure or heart rate, or other hemodynamic instability. These changes can reflect the patient's overall struggle or failure to adapt to reduced ventilatory support, indicating that the weaning process may be too aggressive or premature.

**\*\*Conclusion:\*\*** When considering whether to return a patient to mechanical ventilation, one must evaluate all these factors collectively. The choice to continue weaning or to reinstate mechanical support should be based on a comprehensive assessment of the patient's respiratory and cardiovascular status, ensuring that the decision supports the best possible outcome for the patient. Thus, when faced with the question of whether to return a patient to the ventilator, considering 'all of the above' reasons is a prudent approach.

### NEW QUESTION # 127

When assessing the mouth and tongue, what should the Nurse Practitioner especially take note of?

- A. Malocclusion.
- B. Dental plaque or tartar.

- C. Proper calcification.
- D. Leukoplakia.

**Answer: D**

Explanation:

When assessing the mouth and tongue, a Nurse Practitioner should be vigilant in checking for several critical indicators that help in identifying potential health issues. Key among these is the presence of leukoplakia, which is notably important due to its potential to indicate precancerous conditions.

Leukoplakia appears as thickened, white patches on the mucous membranes of the mouth, including the tongue and the inner aspect of the cheeks. These patches are typically smooth, hardened, and non-removable, distinguishing them from other common oral lesions that might simply scrape off. The etiology of leukoplakia is not fully understood but is strongly correlated with tobacco use—both smoking and chewing—and alcohol, which are significant risk factors for oral cancers.

During the examination, the nurse should not only identify the presence of leukoplakia but also assess its texture, size, and exact location. Any changes in the appearance of these patches over time, alongside symptoms such as difficulty in swallowing, a sensation of something stuck in the throat, or unexplained bleeding, should prompt further investigation and potential referral to a specialist.

The appearance of leukoplakia can sometimes be confused with other conditions like oral thrush, lichen planus, or oral hairy leukoplakia, so a careful differential diagnosis is crucial.

Apart from leukoplakia, it is important for the Nurse Practitioner to observe other oral health indicators such as signs of malocclusion, dental plaque, or tartar build-up, and proper calcification. Malocclusion—misalignment of teeth—can lead to difficulty in chewing and speech, and increase the risk of periodontal diseases. Dental plaque and tartar contribute to the development of cavities and gum disease. Observing these conditions can provide comprehensive insights into a patient's oral hygiene and overall health status.

Therefore, a thorough examination of the mouth and tongue during a routine check-up is crucial. It enables early detection of potentially serious conditions like leukoplakia, prompting timely intervention and better patient outcomes. Nurse Practitioners play a pivotal role in this aspect of patient care, utilizing their skills to differentiate between benign conditions and those requiring further medical attention.

#### **NEW QUESTION # 128**

The CNS understands that the primary purpose of a pre-employment physical examination is:

- A. to identify existing health problems that might adversely affect the company's insurance rates
- B. to document any existing disabilities and recommend accommodations
- C. to determine the mental status of the applicant
- D. to determine if the applicant is physically capable of doing the job

**Answer: D**

Explanation:

Pre-employment physical examinations are conducted by employers to assess whether a potential employee is physically capable of performing the duties required in a job role. This evaluation is crucial in ensuring that the applicant can safely and effectively handle the physical demands of the position, which may include lifting, standing for extended periods, or operating machinery.

While mental status may also be evaluated during a pre-employment screening, it is not the primary focus of the physical examination. The main goal is to ascertain physical capabilities rather than mental health conditions. However, if the job requires specific mental or cognitive abilities, separate assessments might be conducted to evaluate these aspects.

It is important to note that the purpose of the pre-employment physical is not to screen out individuals with health problems or disabilities. Such practices could be considered discriminatory under laws such as the Americans with Disabilities Act (ADA), which protects job applicants and employees from discrimination based on disabilities. The ADA also requires employers to provide reasonable accommodations to qualified individuals with disabilities, unless doing so would cause undue hardship to the business.

Furthermore, the examination should not be used to identify existing health problems solely for the purpose of influencing health insurance rates or to discriminate against applicants with higher health risks. The primary and legally sound objective of the pre-employment physical examination is to ensure that the applicant is physically capable of performing the job duties safely and effectively, thereby promoting a productive and safe workplace.

#### **NEW QUESTION # 129**

The CNS is following up on a diabetic patient who was instructed to manage his diabetes with diet and exercise. To check on his progress and if the treatment is working, what test should the CNS order?

- A. Urine ketone analysis.

- B. Fasting blood glucose level.
- **C. Glycosylated hemoglobin level.**
- D. Complete blood count (CBC)

**Answer: C**

Explanation:

For a diabetic patient managing their condition through diet and exercise, the CNS (Clinical Nurse Specialist) should consider ordering a glycosylated hemoglobin level test, commonly referred to as the HbA1c test. This test measures the average blood glucose concentration over the past two to three months. It does so by assessing the percentage of hemoglobin proteins in the blood that have glucose attached to them. Hemoglobin is a protein in red blood cells that carries oxygen, and its glucose-bound form is termed as glycosylated hemoglobin.

The significance of the HbA1c test lies in its ability to provide a long-term overview of the patient's average blood sugar levels, as opposed to the fluctuations that might be observed in daily blood glucose tests. Since red blood cells have a lifespan of about 120 days, the test effectively reflects the average blood glucose levels over this period. This attribute makes HbA1c an excellent indicator of how well the patient has been managing their diabetes over time.

The use of the HbA1c test in managing diabetes is preferred because it does not require fasting and can be conducted at any time of the day, providing much convenience for both the patient and healthcare providers. High HbA1c levels indicate poor blood sugar control and an increased risk of diabetes-related complications. Therefore, by monitoring HbA1c levels, the CNS can determine if the current management strategy (diet and exercise) is effective or if adjustments are needed to better control the patient's blood glucose levels.

Other tests such as the fasting blood glucose level, complete blood count (CBC), and urine ketone analysis also hold importance in specific contexts within diabetes management. For instance, fasting blood glucose levels can indicate daily fluctuations, a CBC can reveal anemia or infections, and urine ketone analysis can detect ketoacidosis, a serious diabetes complication. However, for ongoing, comprehensive monitoring of glycemic control in a patient managing diabetes primarily through non-pharmacological means, the glycosylated hemoglobin level test is the most informative and reliable choice.

## NEW QUESTION # 130

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