

NCLEX NCLEX-RN Exam Training, NCLEX-RN Updated Testkings

NCLEX-RN Exam Outline

Content Categories	Percentage of Examination
I. Management of care	15%-21%
II. Safety and infection control	10%-16%
III. Health promotion and maintenance	6%-12%
IV. Psychosocial integrity	6%-12%
V. Basic care and comfort	6%-12%
VI. Pharmacological and parental therapies	13%-19%
VII. Reduction of risk potential	9%-15%
VIII. Physiological adaptation	11%-17%

Time limit: 5 hours

Total questions: 75-145 scored, 15 unscored

Question Format: Multiple-choice, multiple-response, hot spot, fill-in-the-blank, calculation, exhibit, audio, graphic, tables

Mometrix TEST PREPARATION

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The best strategy to enhance your knowledge and become accustomed to the NCLEX-RN Exam Questions format is to test yourself. ExamBoosts NCLEX NCLEX-RN practice tests (desktop and web-based) assist you in evaluating and enhancing your knowledge, helping you avoid viewing the NCLEX test as a potentially daunting experience. If the reports of your NCLEX practice exams (desktop and online) aren't perfect, it's preferable to practice more. NCLEX-RN self-assessment tests from ExamBoosts works as a wake-up call, helping you to strengthen your NCLEX-RN preparation ahead of the NCLEX actual exam.

NCLEX-RN exam is a computer-adaptive test that is administered by the National Council of State Boards of Nursing (NCSBN). It consists of between 75 and 265 questions, depending on how well the test taker performs. NCLEX-RN exam covers a wide range of nursing-related topics, including health promotion and maintenance, safety and infection control, pharmacology, and psychological and physiological integrity. The NCLEX-RN exam is widely regarded as one of the most challenging professional exams, and requires a significant amount of preparation and study.

Passing the NCLEX-RN Exam is essential for aspiring nurses to become licensed nurses in the United States. NCLEX-RN exam is designed to ensure that nurses have the necessary knowledge and skills to provide safe and effective patient care. The NCLEX-RN exam is recognized by all U.S. state and territorial nursing boards, and passing NCLEX-RN exam is a requirement for obtaining a nursing license in any state in the U.S.

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Testkings: National Council Licensure Examination(NCLEX-RN)

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NCLEX-RN exam is an important step in the process of becoming a registered nurse. After completing a nursing program, candidates must apply to their state board of nursing to take the exam. Once they pass the exam and meet other licensure requirements, they can practice as a registered nurse. NCLEX-RN Exam is designed to ensure that only qualified individuals are licensed to practice nursing, which helps to protect the public and maintain the integrity of the nursing profession.

NCLEX National Council Licensure Examination(NCLEX-RN) Sample Questions (Q77-Q82):

NEW QUESTION # 77

A 44-year-old female client is receiving external radiation to her scapula for metastasis of breast cancer.

Teaching related to skin care for the client would include which of the following?

- A. Teach her to completely clean the skin to remove all ointments and markings after each treatment.
- B. **Encourage her to avoid direct sunlight on the area being treated.**
- C. Teach her to cover broken skin in the treated area with a medicated ointment.
- D. Encourage her to wear a tight-fitting vest to support her scapula.

Answer: B

Explanation:

Explanation/Reference:

Explanation:

(A) The skin in a treatment area should be rinsed with water and patted dry. Markings should be left intact, and the skin should not be scrubbed. (B) Clients should avoid putting any creams or lotions on the treated area. This could interfere with treatment. (C) Radiation therapy clients should wear loose-fitting clothes and avoid tight, irritating fabrics. (D) The area of skin being treated is sensitive to sunlight, and the client should take care to prevent sun damage by avoiding direct sunlight and covering the area when she is in the sun.

NEW QUESTION # 78

On assessment, the nurse learns that a chronic paranoid schizophrenic has been taking "the blue pill" (haloperidol) in the morning and evening, and "the white pill" (benztropine) right before bedtime. The nurse might suggest to the client that she try:

- A. Doubling the daily dose of benztropine
- B. **Taking the benztropine in the morning**
- C. Decreasing the haloperidol dosage for a few days
- D. Taking her medication with food or milk

Answer: B

Explanation:

Explanation

(A) Suggesting that a client increase a medication dosage is an inappropriate (and illegal) nursing action. This action requires a physician's order. (B) To suggest that a client decrease a medication dosage is an inappropriate (and illegal) nursing action. This action requires a physician's order. (C) This response is an appropriate independent nursing action. Because motorrestlessness can also be a side effect of cogentin, the nurse may suggest that the client try taking the drug early in the day rather than at bedtime. (D) Certain medications can cause gastric irritation and may be taken with food or milk to prevent this side effect.

NEW QUESTION # 79

A pregnant client is at the clinic for a third trimester prenatal visit. During this examination, it has been determined that her fetus is in a vertex presentation with the occiput located in her right anterior quadrant. On her chart this would be noted as:

- A. Right sacroanterior
- B. LOA
- C. Right occipitoposterior
- D. Right occipitoanterior

Answer: D

Explanation:

(A) The fetus in the right occipitoposterior position would be presenting with the occiput in the maternal right posterior quadrant. (B) Fetal position is defined by the location of the fetal presenting part in the four quadrants of the maternal pelvis. The right occipitoanterior is a fetus presenting with the occiput in mother's right anterior quadrant. (C) The fetus in right sacroanterior position would be presenting a sacrum, not an occiput. (D) The fetus in left occipitoanterior position would be presenting with the occiput in the mother's left anterior quadrant.

NEW QUESTION # 80

When a client arrives on the labor and delivery unit, she informs the nurse that she has been having contractions for the last 5 hours. Now the pain is constant and not cyclical as it was earlier. The nurse considers the possibility of uterine rupture. Which of the following symptoms would be consistent with a uterine rupture?

- A. Abdominal rigidity
- B. Increased fetal movements
- C. Systolic hypertension
- D. A large gush of clear fluid from the vagina

Answer: A

Explanation:

(A) This symptom would indicate a rupture of the membranes, which would be expected during labor. There would be no cause for alarm if the fluid were clear. (B) With uterine rupture and the risk of maternal shock secondary to blood loss, the most likely sign would be hypotension indicating hypovolemic shock. (C) In the event of a uterine rupture, an abdominal examination would likely reveal rigidity or tenderness. (D) The most likely finding would be a decrease in fetal movement related to fetal distress due to impaired uteroplacental blood flow. Maintaining the client on her left side would help to maximize uterine blood flow.

NEW QUESTION # 81

A husband asks if he can visit with his wife on her ECT treatment days and what to expect after the initial treatment. The nurse's best response is:

- A. "You'll have to get permission from the physician to visit. Clients are pretty sick after the first treatment."
- B. "Visitors are not allowed. We will telephone you to inform you of her progress."
- C. "There's really no need to stay with her. She's going to sleep for several hours after the treatment."
- D. "Yes, you may visit. She may experience temporary drowsiness, confusion, or memory loss after each treatment."

Answer: D

Explanation:

Explanation

(A) It is within the nurse's realm of practice to grant visiting privileges according to hospital policy. ECT treatments do not make clients sick. (B) Visitors are allowed and encouraged, particularly family members.

(C) Clients are usually awake within 1 hour posttreatment. Drowsiness wanes as the anesthetic wears off. (D) A family member is encouraged to stay with the client after return to the unit. The nurse has used an opportunity to do family teaching and allay fears by explaining temporary side effects of the treatment.

NEW QUESTION # 82

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