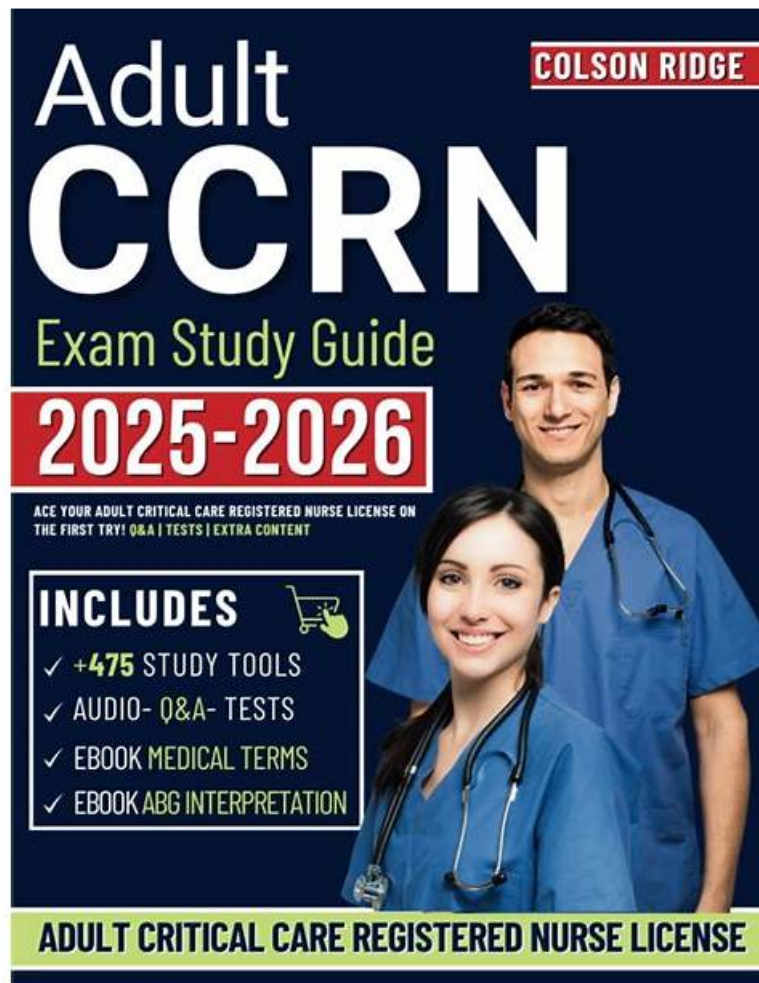


Cert CCRN-Adult Guide & CCRN-Adult New Study Notes



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AACN CCRN-Adult Exam Syllabus Topics:

Topic	Details
Topic 1	<ul style="list-style-type: none">• CLINICAL JUDGMENT: This section measures the skills of Critical Care Nurses and covers a wide range of medical conditions across various systems. It includes cardiovascular issues such as acute coronary syndrome, heart failure, and cardiomyopathies, demonstrating the need for in-depth knowledge in managing these critical conditions. The section also addresses respiratory emergencies like pulmonary embolism and ARDS, emphasizing the importance of understanding respiratory failure and chronic conditions.
Topic 2	<ul style="list-style-type: none">• The endocrine, hematology, gastrointestinal, renal, and integumentary domains are also covered, focusing on conditions like diabetes mellitus, acute kidney injury, and infections. This section highlights the need for nurses to manage complex patient scenarios involving multiple systems effectively.

Topic 5	<ul style="list-style-type: none"> • PROFESSIONAL CARING & ETHICAL PRACTICE: This section assesses the skills of Clinical Nurse Leaders in professional caring and ethical practice. It covers advocacy and moral agency, highlighting the importance of representing patients' interests in healthcare decisions. The section also addresses caring practices that promote patient-centered care and response to diversity, ensuring that care is tailored to individual needs.
Topic 6	<ul style="list-style-type: none"> • Facilitation of learning is emphasized, indicating the role of nurses in educating patients and families about health management. Collaboration is another key component, focusing on teamwork within healthcare settings to improve patient outcomes. Systems thinking is included to encourage understanding of how different components of healthcare interact. Finally, clinical inquiry is highlighted as a means to foster evidence-based practice and continuous improvement in patient care.
Topic 8	<ul style="list-style-type: none"> • In musculoskeletal, neurological, and psychosocial areas, the syllabus includes managing trauma, neurological disorders, and behavioral health issues. This emphasizes the holistic approach required in critical care settings. Lastly, multisystem complications such as sepsis and shock states are included to assess the ability to manage life-threatening conditions that affect multiple organ systems.

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CCRN-Adult Exam Materials: CCRN (Adult) - Direct Care Eligibility Pathway & CCRN-Adult Study Guide Files

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AACN CCRN (Adult) - Direct Care Eligibility Pathway Sample Questions (Q726-Q731):

NEW QUESTION # 726

A patient has recently undergone surgery for a fracture of the left tibia. The patient complains of severe pain that is not relieved by analgesics. On examination, you note that the patient's left lower leg is pale. What is the MOST likely explanation of the patient's symptoms?

- A. Deep vein thrombosis
- **B. Compartment syndrome**
- C. Cellulitis
- D. Peripheral artery disease

Answer: B

Explanation:

Compartment syndrome is characterized by increased pressure within a muscle compartment that can compromise circulation, leading to nerve and muscle damage. Symptoms include severe pain unrelieved by analgesics and pallor. While DVT (Deep vein Thrombosis) could also present with severe pain, it is not typically associated with pallor as it does not inhibit arterial circulation. Cellulitis would present with local warmth and redness. Peripheral artery disease could present with claudication, decreased pulses, and pallor. The patient's recent history, however, suggests that compartment syndrome is more likely.

NEW QUESTION # 727

A patient is admitted with anaphylactic shock secondary to a blood transfusion. The patient's spouse asks the nurse to explain how blood can cause a low blood pressure. The nurse responds that with anaphylactic shock the

- A. kidneys excrete large amounts of urine dropping the blood pressure.
- B. autonomic nervous system is disrupted dropping blood pressure.
- C. peripheral blood vessels dilate, and this creates a maldistribution of volume.
- D. heart muscle weakens and is unable to pump effectively.

Answer: C

Explanation:

Anaphylactic shock is characterized by widespread vasodilation due to the release of histamine and other inflammatory mediators. This vasodilation causes a significant drop in systemic vascular resistance and maldistribution of blood volume, leading to hypotension. The explanation addresses the pathophysiological changes that occur during anaphylactic shock. References: AACN Adult CCRN Certification Review Course, AACN CCRN Exam Handbook.

NEW QUESTION # 728

The critical care nurse is caring for a patient with a diagnosis of cardiogenic shock. Which of the following hemodynamic parameters are aligned with this diagnosis?

- A. Left Atrial Pressure (LAP) 15 mmHg
- B. Cardiac Output (CO) 8.9 L/min
- C. Pulmonary Artery Wedge Pressure (PAWP) 5 mmHg
- D. Heart rate 82 beats per minute

Answer: A

Explanation:

Normal values of LAP are 6-12 mmHg; thus an elevated LAP of 15 mmHg best aligns with the diagnosis of cardiogenic shock. In cardiogenic shock, the heart ceases to function effectively as a pump, resulting in decreases in stroke volume and cardiac output; this leads to a decrease in blood pressure and tissue perfusion. The inadequate emptying of the ventricle increases left atrial pressure, which then increases pulmonary venous pressure. As a result, pulmonary capillary pressure increases, resulting in pulmonary edema. Normal values of CO are 4-8 L/min and are decreased in cardiogenic shock; thus a CO of 8.9 L/min does not align with cardiogenic shock. Cardiogenic shock generally causes PAWP to increase; thus a PAWP of 5 mmHg does not align with the diagnosis (normal is 6-12 mmHg). Patients in shock generally present as tachycardic, so a normal heart rate of 82 does not align with cardiogenic shock.

NEW QUESTION # 729

Which of the following electrolyte imbalances would the nurse expect to see in the patient diagnosed with acute pancreatitis?

- A. Hypernatremia
- B. Hyperkalemia
- C. Hypophosphatemia
- D. Hypocalcemia

Answer: D

Explanation:

Hypocalcemia is most often associated with pancreatitis. The patient with acute pancreatitis would most likely have the following electrolyte abnormalities:

- * Hypocalcemia (serum calcium < 8.5 mg/dL)
- * Hyponatremia (serum sodium < 135 mEq/L)
- * Hypokalemia (serum potassium < 3.5 mEq/L)
- * Hypomagnesemia (serum magnesium < 1.5 mg/dL)

NEW QUESTION # 730

A patient is admitted with hypotension, tachycardia, and intermittent confusion. Upon arrival, the patient asks to walk to the bathroom. Which of the following is a nurse's best action?

- A. Assess the patient's vital signs and ask the physician for an order for activity.
- B. Conduct a fall risk assessment and institute appropriate interventions.

- C. Encourage the patient to walk independently to the bathroom to enhance early mobility.
- D. Situate the patient in bed and provide a bed pan.

Answer: D

Explanation:

Given the patient's symptoms of hypotension, tachycardia, and intermittent confusion, the safest course of action is to keep the patient in bed to prevent falls and further injury. The patient is at high risk for falls due to their hemodynamic instability and altered mental status. Using a bed pan minimizes the risk of injury compared to allowing the patient to walk, which could lead to falls and worsen their condition. References: = CCRN Exam Handbook, AACN Adult CCRN Certification Review Course

NEW QUESTION # 731

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