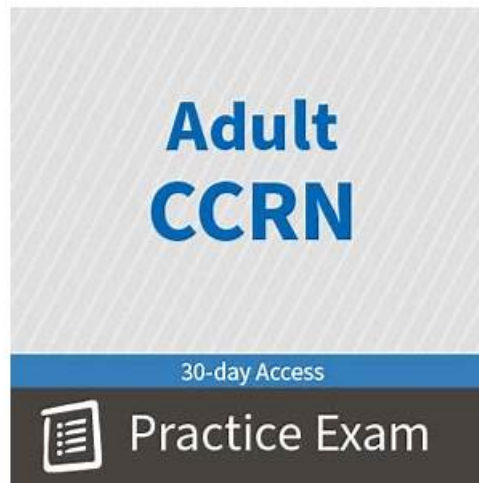


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AACN CCRN-Adult Exam Syllabus Topics:

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">• 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 4	<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.

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AACN CCRN (Adult) - Direct Care Eligibility Pathway Sample Questions (Q462-Q467):

NEW QUESTION # 462

A critical care nurse notices a recurring issue with delayed medication administration due to the pharmacy's response time. Which of the following should the nurse do FIRST to address this systems- level issue?

- A. Raise awareness of the issue with other nurses on the unit
- B. Make a detained note each time the delay occurs so that the pattern will be recognized
- C. Confront the pharmacy directory about the delays
- D. Discuss the issue with the unit manager

Answer: D

Explanation:

The nurse should communicate with leadership about the recurring issue to best initiate interdisciplinary collaboration that will result in a solution. Raising awareness with other nurses is not likely to result in change if the root cause of the issue is interdisciplinary. Directly confronting the pharmacy without involving nursing leadership is not the best approach and could lead to unproductive conflict. Making notes so that a pattern will be recognized is not necessary if the nurse has already recognized a pattern.

NEW QUESTION # 463

Which of the following conditions would be the MOST probable cause of the acid-base imbalance of uncompensated respiratory alkalosis?

- A. Acute Respiratory Distress Syndrome (ARDS)
- B. Excessive diuretic therapy
- C. Hyperventilation
- D. Kidney failure

Answer: C

Explanation:

Respiratory alkalosis occurs when the pH is > 7.45 and the PaCO_2 is < 35 mmHg. With this condition, there is an excessive amount of ventilation (alveolar hyperventilation) and removal of CO_2 from the body. If these ABG changes persist for over 24 hours, the kidneys attempt to compensate for the elevated pH by increasing the excretion of HCO_3^- until normal or near normal pH levels are regained.

Management is aimed at treating the underlying cause and decreasing excessive ventilation if possible.

Excessive diuretic therapy is associated with metabolic alkalosis; ARDS is associated with respiratory acidosis, and kidney failure is not a direct result of any one acid-base imbalance.

NEW QUESTION # 464

Which of the following interventions is NOT LIKELY to be a priority in managing a patient with meningitis?

- A. Frequently checking blood glucose levels
- B. Promptly administering antibiotic therapy
- C. Managing elevated ICP

- D. Implementing seizure precautions

Answer: A

Explanation:

Frequently checking blood glucose levels is not a component of managing meningitis unless the patient also has other underlying comorbidities. Intracranial Pressure (ICP) can be elevated with meningitis, and managing elevated ICP is important. Implementing seizure precautions and promptly administering antibiotic therapy are also essential components of managing meningitis.

NEW QUESTION # 465

emergency department with complaints of abdominal cramping, nausea, and diarrhea. She has a history of renal failure and diabetes mellitus. The nurse establishes an IV line and draws the patient's blood for lab studies. The patient's serum potassium level is 6.3 mEq/L and hyperkalemia is diagnosed.

Pharmacologic management of the patient's hyperkalemia should include all of the following EXCEPT:

- A. administer Kayexalate (sodium polystyrene sulfonate)
- B. administer sodium bicarbonate
- C. administer 50% glucose and regular insulin
- D. administer lactulose enemas

Answer: D

Explanation:

Hyperkalemia is considered the most life-threatening of all the potential electrolyte imbalances because of potassium's profound impact on the electrophysiology of the heart; it is also the most common reason for initiation of dialysis in the Acute Renal Failure (ARF) patient. Cardiac monitoring should always be initiated in patients with hyperkalemia, as it assists in recognizing cardiac manifestations of altered potassium levels.

Pharmacologic treatment of hyperkalemia includes administering:

* Kayexalate: Used to increase K⁺ (potassium) excretion from the body. It is administered by mouth or by enema with sorbitol (to prevent colonic necrosis and other severe gastrointestinal side effects).

Kayexalate pulls fluid into the bowels where it causes an exchange between Na⁺ (sodium) and K⁺ ions.

The K⁺ is then eliminated through feces.

* Sodium bicarbonate: Causes the movement of K⁺ temporarily into the cell, encouraging the exchange of hydrogen ion inside the cells with the excess K⁺ ion outside the cell

* Insulin: Activates the Na & K pump and drives potassium into the cells (protecting the heart from the effect of the elevated serum (extracellular) K⁺)

* Glucose: Drives potassium into the cells

* Calcium salts: Stimulates cardiac contractility

Lactulose is used to treat hepatic failure and should not be used in the treatment of hyperkalemia.

NEW QUESTION # 466

Which of the following is a clinician-level skill, and not a systems-level intervention, for improving communication and support to caregivers in the intensive care unit (ICU)?

- A. Maintaining dedicated meeting spaces for family meetings
- B. Integrating palliative care and/or ethics teams into care for difficult cases
- C. Introducing all participants at family meetings
- D. Conducting regular, structured interprofessional family meetings

Answer: C

Explanation:

Systems-level interventions for improving communication and support in the ICU setting are interventions that go beyond interventions provided by individual clinicians and are part of the way the entire healthcare system itself responds.

System-level interventions can include:

* conducting regular, structured interprofessional family meetings

* providing printed educational materials to families

* maintaining dedicated meeting spaces for family meetings

* integrating palliative care and/or ethics teams into care for difficult cases

Introducing all participants is an individual-level clinical

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