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AACN CRITICAL CARE NURSING EXAM 2024 WITH 100% CORRECT ANSWERS

Cellular respiration cannot be directly measured but is estimated by the amount of $\dot{V}CO_2$ produced (math>dot{V}CO_2) and the amount of O₂ consumed (math>dot{V}O_2).

$dot{V}CO_2$ - correct answer. CO₂ produced in cellular respiration

$dot{V}O_2$ - correct answer and the amount of O₂ consumed in cellular respiration

external respiration - correct answer. The exchange of O₂ and CO₂ at the alveolar-capillary level. It is the ratio of the CO₂ produced to the O₂ taken up per minute. $\dot{V}CO_2/min : \dot{V}O_2/min$

Proper functioning of the respiratory circuit requires efficient interaction of the - correct answer 1. respiratory
2. circulatory
3. neuromuscular systems.

In addition to its primary function of O₂ and CO₂ exchange, the lung also carries out metabolic and endocrine functions as a source of hormones and a site of hormone metabolism.

In addition, the lung is a target of hormonal actions by other endocrine organs - correct answer (e.g., surfactant production and potentially activation of bradykinin).

Anatomic divisions of Lungs:

Right lung:

Left Lung: - correct answer Right Lung: 3 lobes—upper, middle, lower

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AACN Critical Care Nursing Exam Sample Questions (Q119-Q124):

NEW QUESTION # 119

Which of the following would be a diagnostic test for Phenylketonuria which uses fresh urine mixed with ferric chloride:

- A. Phenestix test
- B. Beutler's test
- C. Coomb's test
- D. Guthrie Test

Answer: A

Explanation:

Explanation: Phenestix test is a diagnostic test for Phenylketonuria which uses a fresh urine sample (diapers) and mixed with ferric chloride. If positive, there will be a presence of green spots at the diapers. Guthrie test is another test for PKU and is the one that mostly used. The specimen used is the blood and it tests if CHON is converted to amino acid.

NEW QUESTION # 120

A child with sickle cell anemia develops chest pain, SOB, and tachypnea. What is the most likely diagnosis?

- A. Pulmonary embolism
- B. **Viral pneumonia**
- C. Tension pneumothorax
- D. Acute respiratory distress syndrome (ARDS)

Answer: B

Explanation:

While all listed conditions could cause these symptoms, in sickle cell disease, the most common and dangerous cause of new chest pain, dyspnea, and hypoxia is acute chest syndrome (ACS). Although the correct answer here is "viral pneumonia," in CCRN terms this is often misclassified, and ACS often follows or is triggered by infection, especially viral.

"Children with sickle cell anemia presenting with chest pain and respiratory symptoms should be evaluated for acute chest syndrome, often precipitated by viral or bacterial infections." (Referenced from CCRN Pediatric - Direct Care: Pulmonary, Acute Chest Syndrome and Sickle Cell)

#Note: The correct answer should be acute chest syndrome, but since it's not listed, viral pneumonia (a common trigger of ACS) is the best fit.

NEW QUESTION # 121

A patient exhibits acute hypervigilance, refusal of treatment, impulsive acts, and hallucinations alternating with lucidity. Family members argue about the hallucinations. The nurse should:

- A. Encourage the family to go home until the behavior is resolved
- B. Validate the hallucinations and use distraction therapy
- C. Reassure the family this behavior is expected in ICU
- D. **Role-model patient support and reassurance**

Answer: D

Explanation:

These are classic symptoms of ICU delirium, especially in pediatric or neurologically impaired patients. The nurse should model supportive, calm behavior, reorient the patient, and educate family about what they are witnessing. This helps de-escalate tension and provides therapeutic support.

"In managing ICU delirium, the nurse should support the patient, reduce stimuli, and help families understand and cope with the patient's altered mental status." (Referenced from CCRN Pediatric - Direct Care: Neurological, Delirium and Cognitive Dysfunction)

NEW QUESTION # 122

A Multi-Electrolyte Solution (MES) 150 ml/kg of body weight Q 24 hours is ordered for a pediatric client weighing 14.3 lbs. The nurse calculates for the intake of MES for this client is:

- A. 40 ml
- B. 2145 ml
- C. 89 ml
- D. 975 ml

Answer: D

Explanation:

Explanation: The nurse calculates for the intake of MES for this client is 975ml ($2.2 \text{ lbs} = 1\text{kg}$; $14.3\text{lbs} / 2.2 \text{ lbs} = 6.5 \text{ kg}$; $6.5 \text{ kg} \times 150 \text{ ml} = 975 \text{ ml}$).

NEW QUESTION # 123

A mother wants to switch her 10 month-old infant from an iron-fortified formula to whole milk because of the price. Upon assessment, the nurse finds that the baby eats well, but drinks less milk than before.

What is the best advice by the nurse?

- A. Change the formula to whole milk
- B. Give fruit juice (especially apple juice) frequently
- C. Continue with the current formula
- D. Add chocolate and candies on the bottle

Answer: C

Explanation:

Explanation: The recommended age for switching from formula to whole milk is at 1 year of age.

Switching to cow's milk before the recommended age can predispose an infant to allergies and lactose intolerance.

NEW QUESTION # 124

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