

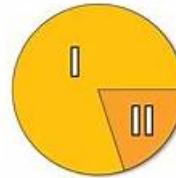
CCRN-Adult Learning Mode & Valid CCRN-Adult Exam Guide

Adult CCRN Exam Outline

Content Categories	Percentage of Exam
I. Clinical Judgment <ul style="list-style-type: none">CardiovascularRespiratoryEndocrineHematologyGastrointestinalRenalIntegumentaryMusculoskeletalNeurologicalPsychosocialMultisystem	80%
II. Professional Caring and Ethical Practice <ul style="list-style-type: none">AdvocacyMoral AgencyCaring PracticesResponse to DiversityFacilitation of LearningCollaborationSystems ThinkingClinical Inquiry	20%

Mometrix TEST PREPARATION

Time limit: 3 hours
Total questions: 150
Question format: Multiple-choice
Exam delivery: Computer-based or paper-and-pencil



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AACN CCRN-Adult Exam Syllabus Topics:

Topic	Details
Topic 1	<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 2	<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 3	<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.

Topic 5	<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.
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>> CCRN-Adult Learning Mode <<

Valid AACN CCRN-Adult Exam Guide, Reliable CCRN-Adult Test Pattern

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AACN CCRN (Adult) - Direct Care Eligibility Pathway Sample Questions (Q928-Q933):

NEW QUESTION # 928

Which of the following is NOT one of the main methods initially used to diagnose injury of a patient who has experienced abdominal trauma?

- A. Abdominal X-ray
- B. Physical examination
- C. FAST exam
- D. CAT scan

Answer: A

Explanation:

An abdominal X-ray would not provide significant information about many of the injuries that may occur with abdominal trauma, as many of the organs affected consist of soft tissues that will not be easily accessible by a simple single-view X-ray. A focused assessment with sonography for trauma (FAST) exam, CAT scan, and physical assessment are all important methods used to diagnose injury for someone who has experienced abdominal trauma.

NEW QUESTION # 929

An 82-year-old female arrives at the emergency department with complaints of abdominal cramping, nausea and diarrhea. She has a history of renal failure and type 2 diabetes mellitus (T2DM). 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.

During a physical assessment of this patient, which of the following signs and symptoms would be expected?

- A. Increased deep tendon reflex (DTR) response
- B. Narrowed QRS complex
- C. Tachycardia
- D. Palpitations

Answer: D

Explanation:

Serum potassium (K+) impacts normal neuromuscular and cardiac function. Hyperkalemia is diagnosed with serum K+ levels > 5.5 mEq/L (normal values range from 3.5-5.5 mEq/L).

A nurse would expect this patient with hyperkalemia to have chest pain, palpitations, dyspnea, vague muscle weakness, mental confusion, nausea, diarrhea, cramping, flaccid paralysis and decreased DTRs.

The muscle weakness would most likely originate in the legs and travel to the trunk.

Other cardiac abnormalities include bradycardia, tall/peaked T waves, a shortened QT interval, slowed intraventricular conduction,

and a widened QRS complex.

NEW QUESTION # 930

The critical care nurse and a student nurse are caring for a patient who has recently experienced a blunt chest trauma. The student nurse suggests considering drawing a troponin T level on this patient. Which of the following responses by the nurse is best?

- A. We already know that this will not be elevated, and there is no need to test this.
- **B. This would be a good way to evaluate for myocardial damage.**
- C. We already know that this will definitely be elevated, and there is no need to test this.
- D. This would only tell us if the patient is having a myocardial infarction.

Answer: B

Explanation:

Testing the patient's troponin T following a blunt chest trauma can indicate if myocardial damage has occurred and can allow for quantification of this damage. This test is not only indicated for myocardial infarction and is indicated under this patient's circumstances.

NEW QUESTION # 931

Which of the following is REQUIRED to resolve the symptoms of a Transient Ischemic Attack (TIA)?

- A. A STAT head CT
- **B. No medical interventions are required**
- C. Providing a low stimuli environment
- D. Administration of a thrombolytic

Answer: B

Explanation:

A Transient Ischemic Attack (TIA) is temporary ischemia of the brain parenchyma that resolves spontaneously prior to causing any lasting tissue necrosis. Because TIAs resolve spontaneously, no treatments are necessary to help the symptoms resolve.

Administration of a thrombolytic is not necessary. While providing a low stimuli environment may be nice, it is not required to resolve the symptoms of a TIA. A STAT head CT may be indicated, but will not help the symptoms of a TIA to resolve.

NEW QUESTION # 932

Which of the following is used to screen for congenital coagulation disorders and for monitoring anticoagulation with unfractionated (IV) heparin therapy?

- A. Prothrombin Time (PT)
- B. Activated Coagulation Time (ACT)
- **C. Activated partial thromboplastin time (aPTT)**
- D. Vitamin K levels

Answer: C

Explanation:

The activated partial thromboplastin time (aPTT) is reported in seconds and is used to evaluate fibrin clot formation stimulated by the intrinsic and common pathways of coagulation. This test is used to screen for congenital coagulation disorders and for monitoring anticoagulation with unfractionated (IV) heparin therapy.

Activated Coagulation Time (ACT) is reported in seconds and is used most commonly to monitor effects of unfractionated heparin during and following cardiovascular procedures such as cardiopulmonary bypass and percutaneous coronary interventions.

Prothrombin Time (PT) evaluates the extrinsic pathway and final common pathway of fibrin clot formation.

Vitamin K levels are not used to evaluate for congenital coagulation disorders or for monitoring anticoagulation.

NEW QUESTION # 933

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