

NCLEX Exam NCLEX-RN Voucher: National Council Licensure Examination(NCLEX-RN) - Exam-Killer Official Pass Certify

NCLEX-RN V12.35 NATIONAL COUNCIL LICENSURE EXAMINATION 2022/2023/2024

Exam : NCLEX-RN
Title : National Council Licensure Examination(NCLEX-RN)
Vendor : NCLEX
Version : V12.35

NO.1 A depressed client is seen at the mental health center for follow-up after an attempted suicide 1 week ago. She has taken phenelzine sulfate (Nardil), a monoamine oxidase (MAO) inhibitor, for 7 straight days. She states that she is not feeling any better. The nurse explains that the drug must accumulate to an effective level before symptoms are totally relieved. Symptom relief is expected to occur within:

- A. 10 days
- B. 2-4 weeks
- C. 2 months D. 3 months

Answer: B

Explanation:

- (A) This answer is incorrect. It can take up to 1 month for therapeutic effect of the medication.
- (B) This answer is correct. Because MAO inhibitors are slow to act, it takes 2-4 weeks before improvement of symptoms is noted.
- (C) This answer is incorrect. It can take up to 1 month for therapeutic effect of the medication. (D) This answer is incorrect. Therapeutic effects of the medication are noted within 1 month of drug therapy.

NO.2 Cystic fibrosis is transmitted as an autosomal recessive trait. This means that:

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NCLEX-RN exam is a critical component of the licensure process for registered nurses in the United States. It assesses a candidate's knowledge and skills in nursing practice, client needs, and nursing process. Passing the exam is a key step in becoming a licensed registered nurse and ensuring that only qualified individuals are permitted to practice nursing.

NCLEX-RN (National Council Licensure Examination for Registered Nurses) Certification Exam is a standardized test that assesses the skills and knowledge of individuals who want to become registered nurses in the United States. NCLEX-RN Exam is designed to ensure that nurses have the necessary competencies to provide safe and effective patient care. Passing the NCLEX-RN is a requirement for licensure as an RN in all U.S. states and territories.

NCLEX National Council Licensure Examination(NCLEX-RN) Sample Questions (Q95-Q100):

NEW QUESTION # 95

A client was admitted with rib fractures and a pneumothorax, which were sustained as a result of a motor vehicle accident. A chest tube was placed on the left side to reinflate his lung, and he was transferred to a client unit. Twenty-four hours after admission he continues to have bloody sputum, develops increasing hypoxemia, and his chest x-ray shows patchy infiltrates. The nurse analyzes these symptoms as being consistent with:

- A. Pulmonary edema
- B. Tension pneumothorax
- C. Pneumonia
- D. Pulmonary contusions

Answer: D

Explanation:

Explanation

(A) Pneumonia may be reflected by patchy infiltrates. In addition, fever, an increasing white blood cell count, and copious sputum production would be present. (B) Blunt chest trauma causes a bruising process in which interstitial and alveolar edema and hemorrhage occur. This is manifest by gradual deterioration over 24 hours of arterial blood gases and the continued production of bloody sputum. Patchy infiltrates are evident on chest xray 24 hours postinjury. (C) Pulmonary edema usually results from left heart failure. It is manifest by pink, frothy sputum; increasing dyspnea; tachycardia; and crackles on auscultation. (D) Tension pneumothorax is a potential complication for someone with rib fractures and a chest tube. It is manifest by diminished breath sounds on the affected side, rapidly deteriorating arterial blood gases in the presence of an open airway, and shock that is unexplained by other injuries.

NEW QUESTION # 96

An 11-year-old boy has received a partial-thickness burn to both legs. He presents to the emergency room approximately 15 minutes after the accident in excruciating pain with charred clothing to both legs. What is the first nursing action?

- A. Immerse both legs in cool water.
- B. Apply ice packs to both legs.
- C. Begin debridement by removing all charred clothing from wound.
- D. Apply Silvadene cream (silver sulfadiazine).

Answer: A

Explanation:

Section: Questions Set C

Explanation:

(A) Ice creates a dramatic temperature change in the tissue, which can cause further thermal injury. (B) Charred clothing should not be removed from wound first. This creates further tissue damage. Debridement is not the first nursing action. (C) Applying silver sulfadiazine cream first insulates heat in injured tissue and increases potential for infection. (D) Emergency care of a thermal burn is

immersing both legs in cool water.

Cool water permits gradual temperature change and prevents further thermal damage.

NEW QUESTION # 97

As the nurse assesses a male adolescent with chlamydia, the nurse determines that a sign of chlamydia is:

- A. Hepatomegaly
- B. Enlarged penis
- C. Epididymitis
- D. Secondary lymphadenitis

Answer: C

Explanation:

Section: Questions Set A

Explanation:

(A) An enlarged penis is not a sign of chlamydia. (B) Secondary lymphadenitis is a complication of lymphogranuloma venereum. (C) Untreated chlamydial infection can spread from the urethra, causing epididymitis, which presents as a tender, scrotal swelling. (D) Hepatomegaly is not a complication.

NEW QUESTION # 98

Following a gastric resection, which of the following actions would the nurse reinforce with the client in order to alleviate the distress from dumping syndrome?

- A. Drinking small amounts of liquids with meals
- B. Eating three large meals a day
- C. Taking a long walk after meals
- D. Eating a low-carbohydrate diet

Answer: D

Explanation:

Explanation/Reference:

Explanation:

(A) Six small meals are recommended. (B) Liquids after meals increase the time food empties from the stomach. (C) Lying down after meals is recommended to prevent gravity from producing dumping. (D) A low-carbohydrate diet will prevent a hypertonic bolus, which causes dumping.

NEW QUESTION # 99

A newborn infant is exhibiting signs of respiratory distress. Which of the following would the nurse recognize as the earliest clinical sign of respiratory distress?

- A. Increased respirations
- B. Cyanosis
- C. Sternal and subcostal retractions
- D. Decreased respirations

Answer: C

Explanation:

(A) Cyanosis is a late clinical sign of respiratory distress. (B) Rapid respirations are normal in a newborn. (C) The newborn has to exert an extra effort for ventilation, which is accomplished by using the accessory muscles of ventilation. The diaphragm and abdominal muscles are immature and weak in the newborn. (D) Decreased respirations are a late clinical sign. In the newborn, decreased respirations precede respiratory failure.

NEW QUESTION # 100

