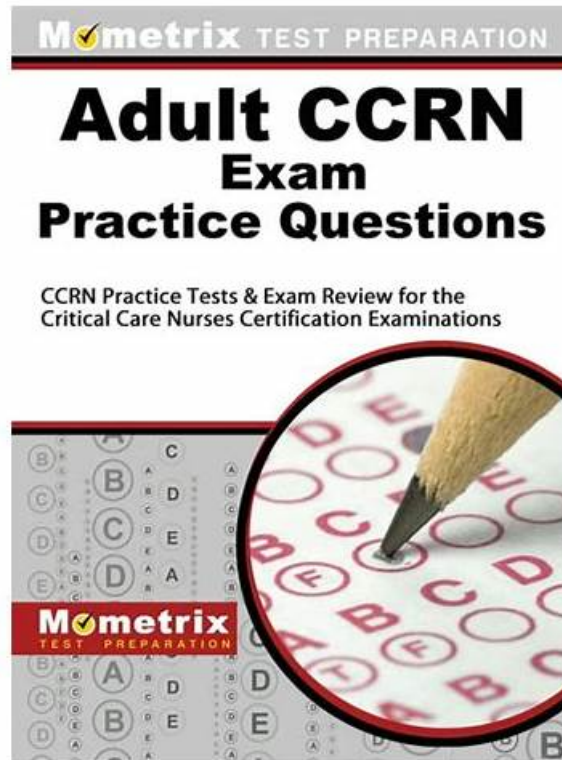


CCRN-Adult Praxisprüfung & CCRN-Adult Vorbereitung



2025 Die neuesten It-Prüfung CCRN-Adult PDF-Versionen Prüfungsfragen und CCRN-Adult Fragen und Antworten sind kostenlos verfügbar: <https://drive.google.com/open?id=1DnGmoYF-k14VFfyCFT12u0qOMIQIrhBd>

Viele Webseiten bieten AACN CCRN-Adult Zertifizierungsunterlagen und andere Unterlagen. Aber wir It-Prüfung sind die einzige Website, die besten AACN CCRN-Adult Zertifizierungsunterlagen zu bieten. Mit der Hilfe von It-Prüfung können Sie nur einmal AACN CCRN-Adult Zertifizierungsprüfung zu bestehen. Die AACN CCRN-Adult Prüfungsfragen und Testantworten von It-Prüfung sind von reichen Erfahrungen und Kenntnissen gesammelt. Diese bieten Ihnen eine gute Chance, in IT-Industrie zu entwickeln.

AACN CCRN-Adult Prüfungsplan:

Thema	Einzelheiten
Thema 1	• 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.
Thema 5	• 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.
Thema 6	• 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.

- 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.

>> CCRN-Adult Praxisprüfung <<

Aktuelle AACN CCRN-Adult Prüfung pdf Torrent für CCRN-Adult Examen Erfolg prep

Es gibt doch Methode, den Erfolg zu erzielen, solange Sie geeignete Wahl treffen. Die Fragenkataloge zur AACN CCRN-Adult Zertifizierungsprüfung von It-Pruefung sind speziell für die IT-Fachleute entworfen, um Ihnen zu helfen, die Prüfung zu bestehen. Wenn Sie noch sich anstrengend bemühen, um sich auf die AACN CCRN-Adult Prüfung vorzubereiten, haben Sie nämlich eine falsche Methode gewählt. Das verschwendet nicht nur Zeit, sondern führt sehr wahrscheinlich zur Niederlage. Aber man kann noch rechtzeitig die Abhilfemaßnahmen ergreifen, indem man die Fragenkataloge zur AACN CCRN-Adult Zertifizierungsprüfung von It-Pruefung kauft. Mit ihr können Sie ein ganz anderes Leben führen. Merken Sie sich doch, das Schicksal ist in Ihrer eigenen Hand.

AACN CCRN (Adult) - Direct Care Eligibility Pathway CCRN-Adult Prüfungsfragen mit Lösungen (Q773-Q778):

773. Frage

Which of the following BEST describes Cheyne-Stokes respiration?

- A. Irregular respiratory pattern with periods of apnea
- **B. Gradual increases and decreases in respiratory rate with periods of apnea**
- C. A normal respiratory rhythm in which each breath has a prolonged expiratory phase
- D. Normal respiratory pattern with periods of apnea

Antwort: B

Begründung:

Cheyne-Stokes respiration is characterized by gradual increases and decreases in respiratory rate with periods of apnea. A normal respiratory rhythm in which each breath has a prolonged expiratory phase describes Kussmaul's respiration. In a Cheyne-Stokes respiratory pattern, breathing does not follow a normal pattern and is better described as a cyclical increase and decrease in respiratory rate than as an irregular respiratory pattern.

774. Frage

The critical care nurse is providing treatment to a patient who has been mechanically ventilated for 3 days while being treated for status epilepticus. The nurse notes that the patient has developed dyspnea, hemoptysis, and a fever. The patient is found to have a WBC count of 15,200/mm³.

Which of the following conditions has the patient MOST LIKELY developed?

- **A. Ventilator-associated pneumonia (VAP)**
- B. Acute respiratory failure (ARF)
- C. Pulmonary arterial hypertension (PAH)
- D. Septicemia

Antwort: A

Begründung:

Development of VAP is a serious complication in critically ill patients, and is associated with prolonged intubation. It is characterized by a number of findings, including: pleuritic chest pain, dyspnea, tachypnea, productive cough and hemoptysis, fever, and elevated WBC. Management involves appropriate broad-spectrum antimicrobial therapy, fluid resuscitation to correct hypovolemia and hypotension (if present), and improving oxygenation and ventilation.

Septicemia may somewhat fit this set of symptoms; however, pleuritic chest pain and hemoptysis are more suggestive of VAP. If not treated promptly, this patient's pneumonia can turn into ARF, but at this stage, the patient's clinical presentation best fits a diagnosis of VAP.

This patient is not exhibiting signs and symptoms indicative of PAH.

775. Frage

In a patient with heart failure, which abnormal heart sound would the nurse expect to be MOST LIKELY?

- A. S4
- **B. S3**
- C. S2
- D. S1

Antwort: B

Begründung:

In healthy adults, there are two normal heart sounds, often described as a lub and a dub, that occur in sequence with each heartbeat. These are the first heart sound (S1) and second heart sound (S2), produced by the closing of the atrioventricular valves and semilunar valves. S3 is an abnormal gallop that occurs during early diastole and is frequently caused by ventricular overload. It is an early sign of right heart failure and can also be heard in left heart failure.

S4 is associated with angina more so than heart failure. While it may occur with heart failure, an S3 is more common.

776. Frage

A 65-year-old male is admitted to the critical care unit with a diagnosis of upper Gastrointestinal (GI) bleeding. What are the most common INITIAL signs and/or symptoms of a GI bleed?

- A. Abdominal and/or epigastric pain
- **B. Hematemesis and/or hematochezia**
- C. Nausea and/or increased or decreased bowel sounds
- D. Tachycardia and/or fever

Antwort: B

Begründung:

The first indicator that a patient has a gastrointestinal bleed is typically the presence of blood in emesis (hematemesis) or feces (hematochezia). Black, tarry stools (melena), or maroon-colored stools are indicative of an upper GI disease that causes bleeding. Other specific signs and symptoms include epigastric or abdominal pain, tachycardia and fever, and nausea with increased or decreased bowel sounds.

The response of a patient to blood loss will depend on the rate and amount of blood loss, the patient's age, overall health status, history, and the timing of the initial resuscitation.

777. Frage

Which of the following BEST describes the nurse's responsibility for reporting suspected elder abuse?

- A. Inform the hospital legal team
- B. Discuss it directly with the patient's family
- **C. Contact local authorities and appropriate state agencies**
- D. Report it to a nurse manager or supervisor who will ultimately be responsible for reporting the possible abuse

Antwort: C

Begründung:

The nurse that discovers abuse is ultimately responsible for reporting suspected abuse. Reporting suspected elder abuse directly to the local authorities and appropriate state agencies will ensure a formal and legal investigation and fulfill the nurse's responsibilities. Informing the hospital legal team may be a part of institutional policy, but it does not release the nurse from their responsibility to initiate a formal investigation. Discussing it with the patient's family may be inappropriate and may put the patient at further risk. While reporting to a nurse manager is correct as an internal action, it does not release the nurse from their responsibility to report the abuse.

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CCRN-Adult Vorbereitung: <https://www.it-pruefung.com/CCRN-Adult.html>

- Außerdem sind jetzt einige Teile dieser It-Pruefung CCRN-Adult Prüfungsfragen kostenlos erhältlich: <https://drive.google.com/open?id=1DnGmoYF-k14VFfYcFT12u0qOMIOIrhBd>