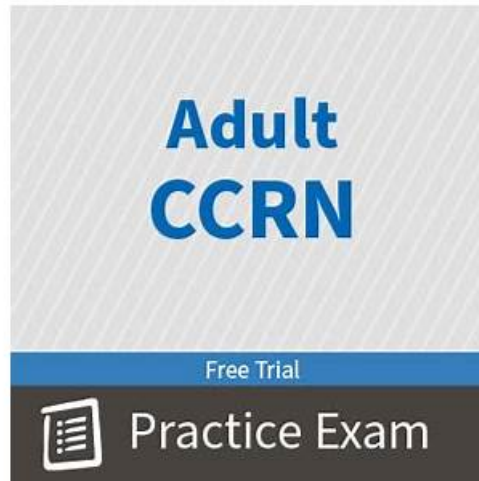


Certification CCRN-Adult Questions - Free CCRN-Adult Practice



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AACN CCRN-Adult Exam Syllabus Topics:

Topic	Details
Topic 1	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 2	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 3	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	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 5	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.

>> Certification CCRN-Adult Questions <<

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AACN CCRN (Adult) - Direct Care Eligibility Pathway Sample Questions (Q313-Q318):

NEW QUESTION # 313

Interpret the following Arterial Blood Gas (ABG) result:
pH 7.57, PaCO₂ 31, HCO₃ 24

- A. Uncompensated metabolic acidosis
- B. Uncompensated respiratory alkalosis**
- C. Uncompensated metabolic alkalosis
- D. Uncompensated respiratory acidosis

Answer: B

Explanation:

The pH is above 7.45 (indicating uncompensated alkalosis), and the PaCO₂ is below 35 mmHg (indicating a respiratory component).

Common causes of respiratory alkalosis include neurogenic hyperventilation, interstitial lung diseases, pulmonary embolism, asthma, acute anxiety/stress/fear, hyperventilation syndromes, excessive mechanical ventilation, and severe hypoxemia.

Normal values for adults:

pH 7.35 to 7.45

PaO₂ 80 to 100 mmHg

SaO₂ > 95%

PaCO₂ 35 to 45 mmHg

HCO₃ 22 to 26mEq/L

NEW QUESTION # 314

Of the following nursing actions, which MIGHT decrease a patient's self-esteem?

- A. Discussing negative aspects of the patient's condition
- B. Allowing the patient to do his or her own dressing changes if desired
- C. Requiring the patient to participate in all treatments**
- D. Providing opportunities to discuss issues important to the patient

Answer: C

Explanation:

Though patient participation in all treatments is highly encouraged and recommended, the nurse cannot require an adult to do anything. Discussing negative consequences of the patient's condition and providing opportunities to discuss issues important to the patient may cause the patient to feel sad or upset, but will not lower self-esteem. Allowing the patient to do their own dressing changes if the patient wishes will help to increase the patient's self-esteem and confidence.

NEW QUESTION # 315

Which of the following statements made by a student nurse indicates that they understand aortic rupture?

- A. If aortic rupture occurs, treatment must be initiated within 30 minutes of the rupture occurring.
- B. Aortic rupture refers to disruption of any layer of aortic vessel, not just to complete disruption of all three layers of the aorta.
- C. Both aortic rupture and aortic dissection are life-threatening emergencies.
- D. Aortic rupture cannot be treated, and will always result in death.

Answer: C

Explanation:

"Both aortic rupture and aortic dissection are life-threatening emergencies" is the correct answer, as aortic dissection carries a high risk of rupture occurring. Aortic rupture is a life-threatening emergency and requires immediate treatment. Waiting 30 minutes to initiate treatment is likely to result in death in many situations. Disruption of one or two of the layers of the aortic vessel is aortic dissection, not aortic rupture. While aortic rupture is associated with poor outcomes, it may be treatable.

NEW QUESTION # 316

The INITIAL assessment of the patient with Gastrointestinal (GI) bleeding begins with which of the following?

- A. Obtaining vital signs
- B. Pain assessment
- C. Patient history
- D. Abdominal assessment

Answer: A

Explanation:

The initial assessment of the patient with GI bleed begins with an assessment of vital signs, the most reliable reflection of the amount of blood lost. With hemodynamic instability, resuscitation should begin immediately and be the top priority. Once the patient's vital signs are assessed and being corrected, if indicated, the bleeding site needs to be identified and controlled, pain needs to be addressed, and a thorough history should be obtained if possible.

NEW QUESTION # 317

A terminally ill patient expresses that they are planning to end their life. As an ICU nurse, what is the MOST appropriate initial response?

- A. Express personal beliefs about euthanasia to the patient
- B. Initiate continuous 1:1 observation
- C. Advise the patient that it's a permanent solution to a temporary problem
- D. Schedule a consultation with a psychiatrist

Answer: B

Explanation:

Suicidal ideation will require that continuous 1:1 observation is initiated. Advising the patient that it's a permanent solution to a temporary problem will minimize the patient's feelings, is dismissive of the issue, and fails to maintain patient safety. Expressing personal beliefs about euthanasia to the patient is inappropriate as personal beliefs should be kept separate from professional practice. Scheduling a consultation with a psychiatrist is appropriate, but does not provide for the patient's immediate safety.

NEW QUESTION # 318

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