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NCLEX National Council Licensure Examination(NCLEX-RN) Sample Questions (Q816-Q821):

NEW QUESTION # 816

A 48-year-old client is in the surgical intensive care unit after having had three-vessel coronary artery bypass surgery yesterday. She is extubated, awake, alert and talking. She is receiving digitalis for atrial arrhythmias. This morning serum electrolytes were drawn. Which abnormality would require immediate intervention by the nurse after contacting the physician?

- A. Serum potassium is low. The nurse should administer KCl as ordered.
- B. Serum sodium is low. The nurse should change IV fluids to normal saline.
- C. Blood urea nitrogen is subnormal. The nurse should increase the protein in the client's diet as soon as possible.
- D. Serum osmolality is elevated indicating hemoconcentration. The nurse should increase IV fluid rate.

Answer: A

Explanation:

Explanation/Reference:

Explanation:

(A) An elevated serum osmolality poses no immediate danger and is not corrected rapidly. (B) A low serum sodium alone does not warrant changing IV fluids to normal saline. Other assessment parameters, such as hydration status, must be considered. (C) A low serum blood urea nitrogen is not necessarily indicative of protein deprivation. It may also be the result of overhydration. (D) A low serum potassium potentiates the effects of digitalis, predisposing the client to dangerous arrhythmias. It must be corrected immediately.

NEW QUESTION # 817

A 48-year-old male client is hospitalized with mild ascites, bruising, and jaundice. He has a 20-year history of alcohol abuse. The client is diagnosed with cirrhosis. His serum ammonia level is high, indicating hepatic encephalopathy. He has esophageal varices. Which of the following may cause the varices to rupture?

- A. Ingestion of antacids
- B. Walking briskly
- C. Ingestion of barbiturates
- **D. Lifting heavy objects**

Answer: D

Explanation:

Explanation

(A) Lifting heavy objects will increase intrathoracic pressure, thus placing the client at risk for rupturing esophageal varices. (B, C, D) This activity will not cause an increase in intrathoracic pressure.

NEW QUESTION # 818

The FHR pattern in a laboring client begins to show early decelerations. The nurse would best respond by:

- A. Administering O₂ at 8 L/min via face mask
- B. Changing the client to the left lateral position
- C. Notifying the physician
- **D. Continuing to monitor the FHR closely**

Answer: D

Explanation:

Explanation

(A) Early decelerations are reassuring and do not warrant notification of the physician. (B) Because early decelerations is a reassuring pattern, it would not be necessary to change the client's position. (C) Early decelerations warrant the continuation of close FHR monitoring to distinguish them from more ominous signs. (D) O₂ is not warranted in this situation, but it is warranted in situations involving variable and/or late decelerations.

NEW QUESTION # 819

A nasogastric (NG) tube inserted preoperatively is attached to low, intermittent suction. A client with an NG tube exhibits these symptoms: He is restless; serum electrolytes are Na 138, K 4.0, blood pH 7.53. This client is most likely experiencing:

- A. Metabolic acidosis
- B. Hyperkalemia
- **C. Metabolic alkalosis**
- D. Hyponatremia

Answer: C

Explanation:

(A) Sodium level is within normal limits. (B) Sodium level is within normal limits. (C) pH level is consistent with alkalosis. (D) With

an NG tube attached to low, intermittent suction, acids are removed and a client will develop metabolic alkalosis.

NEW QUESTION # 820

Which of the following statements relevant to a suicidal client is correct?

- A. A client who threatens suicide is just seeking attention and is not likely to attempt suicide.
- B. Nurses who care for a client who has attempted suicide should not make any reference to the word "suicide" in order to protect the client's ego.
- C. **The more specific a client's plan, the more likely he or she is to attempt suicide.**
- D. A client who is unsuccessful at a first suicide attempt is not likely to make future attempts.

Answer: C

Explanation:

Explanation/Reference:

Explanation:

(A) This is a high-risk factor for potential suicide. (B) A previous suicide attempt is a definite risk factor for subsequent attempts. (C) Every threat of suicide should be taken seriously. (D) The client should be asked directly about his or her intent to do bodily harm. The client is never hurt by direct, respectful questions.

NEW QUESTION # 821

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