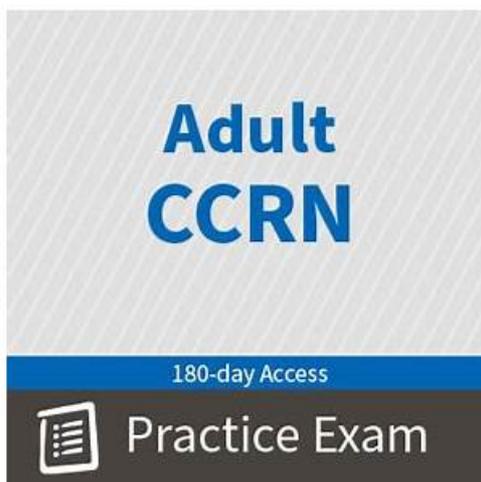


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AACN CCRN-Adult Exam Syllabus Topics:

| Topic | Details |
|---------|--|
| Topic 1 | <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 2 | <ul style="list-style-type: none">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. |

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AACN CCRN (Adult) - Direct Care Eligibility Pathway Sample Questions (Q325-Q330):

NEW QUESTION # 325

Which of the following statements accurately describes an ADVANTAGE of using Positive End-Expiratory Pressure (PEEP) in ventilatory support?

- A. It increases Functional Residual Capacity (FRC)
- B. It increases cardiac output
- C. It decreases the risk of barotrauma
- D. It increases cerebral blood flow

Answer: A

Explanation:

Positive End-Expiratory Pressure (PEEP) is used in conjunction with any of the ventilator modes to stabilize alveolar lung volume and improve oxygenation. The use of positive pressure to airways during expiration may keep alveoli open and prevent early closure during exhalation. Most patients who have diffuse lung disease, regardless of the etiology, have a decrease in Functional Residual Capacity (FRC), due to the collapse of alveoli. This decreases the surface area for alveolar gas exchange.

If alveolar "recruitment" is not needed and excessive PEEP is applied, it may result in an increase of intrathoracic pressure, which can decrease cardiac output by decreasing preload. This effect may also decrease cerebral blood flow. Use of PEEP may increase the risk of barotrauma due to higher mean and peak airway pressures during ventilation.

NEW QUESTION # 326

Which of the following statements made by a new nurse about ethical principles indicates that they understand the purpose of ethical principles?

- A. Ethical principles differ by state, and are defined by each state's nursing practice law.
- B. Ethical principles represent an ideal that is often not practical in real life.
- C. Ethical principles are absolute rules that must be followed all the time.
- D. Ethical principles provide ethical guidance for nursing practice, but are not absolute.

Answer: D

Explanation:

Ethical principles do provide ethical guidance for nursing practice, but they may conflict with each other and they are not absolute. There will be times when one ethical principle will need to be prioritized over others. It is incorrect to say that ethical principles represent an ideal that is often not practical in real life, as ethical principles should guide all aspects of nursing care. It is impossible to adhere to all ethical principles in every situation, as there will be conflicts between the principles at times. Ethical principles are built on moral, not legal, concepts and should be consistent regardless of the state in which a nurse is practicing.

NEW QUESTION # 327

Hallmarks of an acute asthma exacerbation include:

- A. wheezing and decrease in mucosal edema
- B. decreased mucus production and bronchospasm
- C. bronchospasm and increased mucus production
- D. decrease in mucosal edema and bronchospasm

Answer: C

Explanation:

Asthma exacerbations are primarily due to uncontrolled airway inflammation due to a mediator release from mast cells of histamine, leukotrienes, and prostaglandins that contract the smooth muscle. This pathology results in severe bronchospasm and increased mucus production present during severe asthma exacerbations. Increased mucosal edema causes inflammation. Symptoms include a

progressive increase in shortness of breath, coughing, wheezing, and decrease in expiratory airflow.

NEW QUESTION # 328

In the patient with status asthmaticus (acute severe asthma), which of the following is MOST helpful in reducing anxiety?

- A. Encouraging the patient to walk around the unit and practice guided imagery to avoid panic
- B. Educating the patient to breathe into a paper bag to control hyperventilation
- C. Encouraging many deep breaths at once to improve oxygenation and ventilation
- D. Teaching diaphragmatic breathing to slow the rate and increase the depth of respirations

Answer: D

Explanation:

Managing the patient in acute respiratory failure (such as with status asthmaticus) involves improving oxygenation and ventilation, treating the underlying cause, reducing anxiety, and preventing and managing complications. To effectively reduce anxiety, the patient should be taught diaphragmatic breathing to slow the rate and increase the depth of respirations, as this assists in reversing the negative effects of hypocapnia (resulting from hyperventilation).

It is important to reassure the patient, but also not to encourage too much oxygen expenditure through hyperventilation and activity. Breathing into a paper bag is not recommended because breathing more CO₂ will worsen the asthma exacerbation.

NEW QUESTION # 329

The critical nurse is creating a care plan for a patient who was admitted in septic shock. When formulating a care plan for this patient, which of the following approaches is BEST?

- A. The care plan should collaboratively involve multiple disciplines
- B. The care plan must be approved by the unit's manager
- C. The care plan should be reviewed by multiple clinicians who are not involved in the patient's care for an outside perspective
- D. The care plan should be focused and discipline-specific

Answer: A

Explanation:

Care plans should be developed collaboratively with other disciplines to enhance the continuity of care and have multidisciplinary inputs that result in more comprehensive treatment. A good care plan should not be specific to one discipline. Having a care plan reviewed by multiple clinicians who are unfamiliar with the patient is unlikely to be helpful, although outside consultation may be indicated in some situations. The manager of a unit is not required to approve care plans.

NEW QUESTION # 330

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