

NCLEX-RN Latest Study Questions, Latest NCLEX-RN Test Format

NCLEX-RN Exam Outline

Content Categories	Percentage of Examination
I. Management of care	15%-21%
II. Safety and infection control	10%-16%
III. Health promotion and maintenance	6%-12%
IV. Psychosocial integrity	6%-12%
V. Basic care and comfort	6%-12%
VI. Pharmacological and parental therapies	13%-19%
VII. Reduction of risk potential	9%-15%
VIII. Physiological adaptation	11%-17%

Time limit: 5 hours

Total questions: 75-145 scored, 15 unscored

Question Format: Multiple-choice, multiple-response, hot spot, fill-in-the-blank, calculation, exhibit, audio, graphic, tables

Mometrix TEST PREPARATION

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NCLEX National Council Licensure Examination(NCLEX-RN) Sample Questions (Q166-Q171):

NEW QUESTION # 166

A male client receives 10 U of regular human insulin SC at 9:00 AM. The nurse would expect peak action from this injection to occur at:

- A. 12 noon
- B. 4:00 PM
- C. 10:30 AM
- D. 9:30 AM

Answer: A

Explanation:

Explanation/Reference:

Explanation:

(A) This is too early for peak action to occur. (B) This is too early for peak action to occur. (C) Regular insulin peak action occurs 2-4 hours after administration. (D) This is too late for peak action to occur.

NEW QUESTION # 167

A client is now pregnant for the second time. Her first child weighed 4536 g at delivery. The client's glucose tolerance test shows elevated blood sugar levels. Because she only shows signs of diabetes when she is pregnant, she is classified as having:

- A. Type I diabetes mellitus
- B. Gestational diabetes mellitus
- C. Insulin-dependent diabetes
- D. Type II diabetes mellitus

Answer: B

Explanation:

Explanation/Reference:

Explanation:

(A) Insulin-dependent diabetes mellitus, also known as type I diabetes, usually appears before the age of 30 years with an abrupt onset of symptoms requiring insulin for management. It is not related to onset during pregnancy. (B) Non-insulin-dependent diabetes (type II diabetes) usually appears in older adults. It has a slow onset and progression of symptoms. (C) This type of diabetes is the same as insulin-dependent diabetes. (D) Gestational diabetes mellitus has its onset of symptoms during pregnancy and usually disappears after delivery. These symptoms are usually mild and not life threatening, although they are associated with increased fetal morbidity and other fetal complications.

NEW QUESTION # 168

The nurse instructs a client on the difference between true labor and false labor. The nurse explains, "In true labor:

- A. The fetus does not descend."
- B. Uterine contractions will weaken with walking."
- C. Uterine contractions will strengthen with walking."
- D. The cervix does not dilate."

Answer: C

Explanation:

Section: Questions Set C

Explanation:

(A) Uterine contractions increase with activity. (B) Walking will increase the strength and regularity of uterine contractions in true labor. (C) Uterine contractions that are strong and regular facilitate cervical dilation. (D) Regular, strong uterine contractions, as in true labor, result in fetal descent.

NEW QUESTION # 169

A 25-year-old client believes she may be pregnant with her first child. She schedules an obstetric examination with the nurse practitioner to determine the status of her possible pregnancy. Her last menstrual period began May 20, and her estimated date of confinement using Nagele's rule is:

- A. January 3
- B. February 1
- C. March 27
- **D. February 27**

Answer: D

Explanation:

(A) March 27 is a miscalculation. (B) February 1 is a miscalculation. (C) February 27 is the correct answer. To calculate the estimated date of confinement using Nagele's rule, subtract 3 months from the date that the last menstrual cycle began and then add 7 days to the result. (D) January 3 is a miscalculation.

NEW QUESTION # 170

A 26-year-old female client presents at 10 weeks' gestation. She currently is a G3 1-0-1-1. Her mother and grandmother have heart disease. Her grandmother also has insulin-dependent diabetes. The client's previous delivery was a term female infant weighing 9 lb 13 oz. The client is 5 ft 6 inches tall and her current weight is 130 lb. Based on her history, she is at risk for developing diabetes in pregnancy. Which of the following factors places her at risk for gestational diabetes?

- **A. Previous birth of an infant weighing >9 lb**
- B. Maternal weight
- C. Family history of heart disease
- D. Age >25 years

Answer: A

Explanation:

Explanation/Reference:

Explanation:

(A) Maternal age older than 30 years is an identified risk factor for diabetes. Age younger than 30 years is insignificant for diabetes unless there is a familial history of diabetes. (B) The client's weight is appropriate for her height. Obesity or pregnancy weight >20% of the ideal weight is a contributing factor to the development of gestational diabetes. (C) The birth of an infant weighing >9 lb (4000 g) is an identified risk factor for gestational diabetes. (D) A familial history of heart disease is insignificant in the development of diabetes. However, a familial history of type II diabetes mellitus is identified as a risk factor in the development of diabetes during pregnancy.

NEW QUESTION # 171

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