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NCLEX-RN Part 1 Study Guide

When getting down to 2 answers, pick the assessment answer over intervention except in an emergency or distress situation. Assessment (Assess, Collect, Auscultate, Monitor, Palpate)

If one answer has an absolute discard it; these suggest a false response and imply there are no exceptions. Absolute (always, all, everyone, never, none, only, every, must)

If you can only do one thing to help this patient pick the most important intervention

Choose the answer that includes all the others in it; all other choices fall under it "Umbrella effect"

If 2 of the answers are the exact opposite one is probably the answer

Do not delegate what you can EAT or PACET Plan, Assess (primary/initial), Collaborate (with RT, OT, PT, ECT), Evaluate (for trends), Teach

IV meds and unstable patients Cannot be delegated to an Unlicensed Assistive Personnel

LPN/LVP cannot handle blood

Antidote for Coumadin overdose (bleeding, black tarry stool, vomiting blood, vision or speech changes, severe headache) Vitamin K

Antidote for Heparin overdose (vomiting, hives, trouble breathing, swelling of face, lips, tongue, or feeling like you might pass out) Protamine Sulfate

Antidote for Magnesium Sulfate (Mg So4) overdose (difficulty breathing, muscle weakness, mental confusion) Calcium Gluconate (Ca Glu)

Antidote for Acetaminophen overdose (abdominal pain, yellowing of the skin and eyes, irritability) Mucomyst (Acetylcysteine)

Antidote for TPA (Alteplase) overdose (chest tightness, severe stomach pain) Amicar (Aminocaproic acid)

Lactulose toxicity (severe or ongoing diarrhea) Ammonia

Acetaminophen toxicity (does not manifest for 24 - 48 hours: right upper quadrant abdominal pain or tenderness, oliguria) n-Acetylcysteine

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Passing the NCLEX-RN exam is essential for aspiring nurses to become licensed nurses in the United States. NCLEX-RN exam is designed to ensure that nurses have the necessary knowledge and skills to provide safe and effective patient care. The NCLEX-RN Exam is recognized by all U.S. state and territorial nursing boards, and passing NCLEX-RN exam is a requirement for obtaining a nursing license in any state in the U.S.

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The NCLEX-RN® exam is the licensing exam for entry-level nurses. This exam covers the required knowledge, skills, and attitudes to become a licensed registered nurse in the United States. The NCLEX-RN® exam is taken by nurses who are preparing to be licensed as registered nurses. It is taken after graduation from an approved nursing program. Students must have been accepted by an approved school. NCLEX certification is the pathway to the NCSBN Board Certification in Nursing. Confident Nursing (CN) certification is the pathway to the Certified Nurse Aide (CNA) credential. Nurse assesses (NARN), and the CNA credential is the pathway to the Certified Nursing Assistant (CNA) credential. Arterial puncture is the pathway to the Registered Respiratory Therapist (RRT). The exam is designed to test your knowledge of the basic concepts of nursing as they apply to nursing practice. **NCLEX-RN Dumps** is study the required knowledge, skills, and attitudes for the NCLEX-RN® exam. Exam files are made available on the NCSBN website, which is a free service to all who wish to take the exam. Exam sources are included in each file.

NCLEX National Council Licensure Examination (NCLEX-RN) Sample Questions (Q656-Q661):

NEW QUESTION # 656

A client takes warfarin (Coumadin) 15 mg po daily. To evaluate the medication's effectiveness, the nurse should monitor the:

- A. Fibrin split products
- **B. prothrombin time (PT)**
- C. PTT-C
- D. partial thromboplastin time (PTT)

Answer: B

Explanation:

(A) PT evaluates adequacy of extrinsic clotting pathway. Adequacy of warfarin therapy is monitored by PT. (B) PTT evaluates adequacy of intrinsic clotting pathway. Adequacy of heparin therapy is monitored by PTT. (C) There is no such laboratory test. (D) Fibrin split products indicate fibrinolysis. This is a screening test for disseminated intravascular coagulation. Heparin therapy may increase fibrin split products.

NEW QUESTION # 657

The primary reason for sending a burn client home with a pressure garment, such as a Jobst garment, is that the garment:

- A. Assists with ambulation
- **B. Decreases hypertrophic scar formation**
- C. Covers burn scars and decreases the psychological impact during recovery
- D. Increases venous return and cardiac output by normalizing fluid status

Answer: B

Explanation:

Explanation/Reference:

Explanation:

(A) Tubular support, such as that received with a Jobst garment, applies tension of 10-20 mm Hg. This amount of uniform pressure is necessary to prevent or reduce hypertrophic scarring. Clients typically wear a pressure garment for 6-12 months during the recovery phase of their care. (B) Pressure garments have no ambulatory assistive properties. (C) Pressure garments can worsen the psychological impact of burn injury, especially if worn on the face. (D) Pressure garments do not normalize fluid status.

NEW QUESTION # 658

When giving discharge instructions to a 24-year-old client who had a short-arm cast applied for a fractured right ulna, the nurse recognizes the importance of telling him that the drying time for a plaster of Paris cast is approximately:

- A. 30 minutes
- B. 12-24 hours
- **C. 24-72 hours**

- D. 1-4 hours

Answer: C

Explanation:

Explanation/Reference:

Explanation:

(A) Synthetic cast materials harden in 3-15 minutes. Weight bearing is permitted in 15-30 minutes. Drying time for plaster of Paris is about 24-72 hours. (B, C) Plaster of Paris cast materials are heavier than synthetic materials and require a drying time of 24-72 hours. Synthetic materials dry within 30 minutes. (D) Plaster of Paris cast materials are heavier than synthetic materials and require a longer period to set and dry. Even though setting time (hardening) is only 3-15 minutes, the drying time for plaster of Paris is 24-72 hours. This depends on the size and thickness of the cast, exposure to air, and humidity in the air.

NEW QUESTION # 659

A 30-year-old client has been admitted to the psychiatric service with the diagnosis of schizophrenia. He tells the nurse that when the woman he had been dating broke up with him, the CIA had replaced her with an identical twin. The client is experiencing:

- A. Paranoid delusions
- B. Grandiose delusions
- C. Visual hallucinations
- D. Auditory hallucinations

Answer: A

Explanation:

(A) There are no indications that the client's thoughts reflect special powers or talents characteristic of grandiosity. (B) The client's thought content is fixed, false, persecutory, and suspicious in nature, which is characteristic of paranoid delusions. (C, D) The client is not demonstrating a sensory experience.

NEW QUESTION # 660

An infant weighing 15 lb has just been treated for severe diarrhea in the hospital. Discharge instructions by the nurse will include maintenance fluid requirements for the pediatric client. Which of the following values best indicates the nurse's understanding of normal fluid requirements for this infant?

- A. 330 mL/day
- B. 240 mL/day
- C. 960 mL/day
- D. 680 mL/day

Answer: D

Explanation:

Explanation

(A, C, D) These answers are incorrect. (B) Normal fluid requirement for this pediatric client is based on the fact that 0-10 kg of weight equals 100 mL/kg per day. This infant weighs 15 pounds (6.8 kg). Thus, 100 mL X 6.8 = 680 mL/day.

NEW QUESTION # 661

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