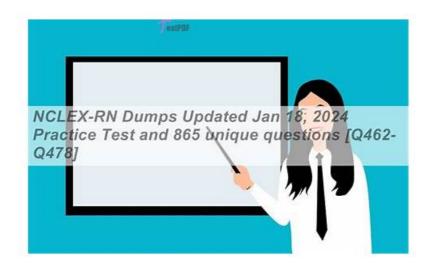
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NCLEX-RN exam is a high-stakes exam, meaning that passing NCLEX-RN exam is necessary for individuals to become licensed and work as RNs. NCLEX-RN exam is also designed to ensure that individuals who pass the exam have the necessary knowledge and skills to provide safe and effective patient care. NCLEX-RN exam is taken by nursing graduates from all over the United States, and passing the exam is necessary to become licensed in any state.

Preparing for the NCLEX-RN exam can be a daunting task, but there are many resources available to help test-takers succeed. Many nursing schools offer review courses and study materials, and there are also numerous online resources, books, and practice exams available. It is important for test-takers to develop a study plan and stick to it, as well as to practice good test-taking strategies like time management and process of elimination. With the right preparation and study habits, many nurses have successfully passed the NCLEX-RN Exam and gone on to have successful careers in nursing.

In order to be eligible to take the NCLEX-RN exam, individuals must have completed an accredited nursing program and meet the requirements for licensure in their state or territory. This typically includes passing a background check and providing proof of graduation from an accredited nursing program.

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NCLEX National Council Licensure Examination(NCLEX-RN) Sample Questions (Q336-Q341):

NEW QUESTION #336

Except for initial explosiveness on admission, a client diagnosed with schizophrenia stays in her room. She continues to believe other people are out to get her. A nursing intervention basic to improving withdrawn behavior is:

A. Assigning her to occupational therapy

- B. Helping her to make friends
- C. Facilitating communication
- D. Having her sit with the nurses while they chart

Answer: C

Explanation:

Explanation/Reference:

Explanation:

- (A) The nurse does not make this assignment. (B) One-to-one observation is not appropriate. It does not focus on the client or encourage communication. (C) The client is too suspicious to accomplish this goal.
- (D) The withdrawn individual must learn to communicate on a one-to-one level before moving on to more threatening situations.

NEW QUESTION #337

A 2-year-old boy is in the hospital outpatient department for observation after falling out of his crib and hitting his head. The nurse calls the physician to report:

- A. Pulse increased from 96 to 102
- B. Evidence of perineal irritation
- C. Pulse fell from 102 to 96
- D. Temperature rose to 102 F rectally

Answer: D

Explanation:

Explanation

(A) Perineal irritation needs to be addressed, but it is probably not necessary to call the physician. (B) This fall in pulse rate remains within normal limits and is probably insignificant. It is important to monitor for continued change. (C) This rise in pulse rate is probably not significant, but it is important to monitor for continued change. (D) This temperature is above normal limits and needs medical investigation. It may or may not be related to the head injury.

NEW OUESTION #338

A client was not using his seat belt when involved in a car accident. He fractured ribs 5, 6, and 7 on the left and developed a left pneumothorax. Assessment findings include:

- A. Rhonchi and frothy sputum
- B. Crackles and paradoxical chest wall movement
- C. Wheezing and dry cough
- D. Decreased breath sounds on the left and chest pain with movement

Answer: D

Explanation:

Section: Questions Set C

Explanation:

(A) Crackles are caused by air moving through moisture in the small airways and occur with pulmonary edema.

Paradoxical chest wall movement occurs with flail chest when a segment of the thorax moves outward on inspiration and inward on expiration. (B) Decreased breath sounds occur when a lung is collapsed or partially collapsed. Chest pain with movement occurs with rib fractures. (C) Rhonchi are caused by air moving through large fluid-filled airways. Frothy sputum may occur with pulmonary edema. (D) Wheezing is caused by fluid in large airways already narrowed by mucus or bronchospasm. Dry cough could indicate a cardiac problem.

NEW QUESTION #339

The pediatrician has diagnosed tinea capitis in an 8- year-old girl and has placed her on oral griseofulvin. The nurse should emphasize which of these instructions to the mother and/or child?

- A. May discontinue medication when the child experiences symptomatic relief.
- B. Discontinue drug therapy if food tastes funny.

- C. Observe for headaches, dizziness, and anorexia.
- D. Administer oral griseofulvin on an empty stomach for best results.

Answer: C

Explanation:

Explanation/Reference:

Explanation:

(A) Giving the drug with or after meals may allay gastrointestinal discomfort. Giving the drug with a fatty meal (ice cream or milk) increases absorption rate. (B) Griseofulvin may alter taste sensations and thereby decrease the appetite. Monitoring of food intake is important, and inadequate nutrient intake should be reported to the physician. (C) The child may experience symptomatic relief after 48-96 hours of therapy. It is important to stress continuing the drug therapy to prevent relapse (usually about 6 weeks). (D) The incidence of side effects is low; however, headaches are common. Nausea, vomiting, diarrhea, and anorexia may occur. Dizziness, although uncommon, should be reported to the physician.

NEW QUESTION #340

The nurse notes hyperventilation in a client with a thermal injury. She recognizes that this may be a reaction to which of the following medications if applied in large amounts?

- A. Mafenide acetate
- B. Neosporin sulfate
- C. Povidone-iodine
- D. Silver sulfadiazine

Answer: A

Explanation:

Section: Questions Set A

Explanation:

(A) The side effects of neomycin sulfate include rash, urticaria, nephrotoxicity, and ototoxicity. (B) The side effects of mafenide acetate include bone marrow suppression, hemolytic anemia, eosinophilia, and metabolic acidosis. The hyperventilation is a compensatory response to the metabolic acidosis. (C) The side effects of silver sulfadiazine include rash, itching, leukopenia, and decreased renal function. (D) The primary side effect of povidone-iodine is decreased renal function.

NEW QUESTION #341

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