

New CCRN-Adult Exam Simulator - CCRN-Adult Trustworthy Dumps



What's more, part of that Fast2test CCRN-Adult dumps now are free: <https://drive.google.com/open?id=1yT0-zClvRf5KXKgOf-97QQ0gzJEWcYal>

Fast2test real AACN CCRN-Adult Exam Dumps are ideal for applicants who are busy in their routines and want to do quick preparation for the AACN CCRN-Adult certification test. We guarantee that our actual CCRN (Adult) - Direct Care Eligibility Pathway (CCRN-Adult) questions will be enough for you to prepare successfully for the CCRN (Adult) - Direct Care Eligibility Pathway (CCRN-Adult) examination.

There is no doubt that if a person possesses the characteristic of high production in their workplace or school, it is inevitable that he or she will achieve in the CCRN-Adult exam success eventually. So will you. We have a lasting and sustainable cooperation with customers who are willing to purchase our CCRN-Adult Actual Exam. We try our best to renovate and update our CCRN-Adult study materials in order to help you fill the knowledge gap during your learning process, thus increasing your confidence and success rate in the CCRN-Adult exam.

>> New CCRN-Adult Exam Simulator <<

CCRN-Adult Trustworthy Dumps | Relevant CCRN-Adult Questions

Up to now, we have more than tens of thousands of customers around the world supporting our CCRN-Adult training prep. So our CCRN-Adult study materials are elemental materials you cannot miss. In your review duration, you can contact with our after-sales section if there are any problems with our CCRN-Adult Practice Braindumps. They will help you 24/7 all the time. These services assure your avoid any loss.

AACN CCRN-Adult Exam Syllabus Topics:

Topic	Details

Topic 1	• CLINICAL JUDGMENT: This section measures the skills of Critical Care Nurses and covers a wide range of medical conditions across various systems. It includes cardiovascular issues such as acute coronary syndrome, heart failure, and cardiomyopathies, demonstrating the need for in-depth knowledge in managing these critical conditions. The section also addresses respiratory emergencies like pulmonary embolism and ARDS, emphasizing the importance of understanding respiratory failure and chronic conditions.
Topic 3	• PROFESSIONAL CARING & ETHICAL PRACTICE: This section assesses the skills of Clinical Nurse Leaders in professional caring and ethical practice. It covers advocacy and moral agency, highlighting the importance of representing patients' interests in healthcare decisions. The section also addresses caring practices that promote patient-centered care and response to diversity, ensuring that care is tailored to individual needs.
Topic 5	• 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.

AACN CCRN (Adult) - Direct Care Eligibility Pathway Sample Questions (Q94-Q99):

NEW QUESTION # 94

The nurse is caring for a patient that goes into ventricular asystole, with no rate or rhythm present on the patient's ECG strip. Occasional P waves show on ECG.

All of the following interventions are recommended for the treatment of asystole EXCEPT:

- A. Atropine
- B. Cardiopulmonary Resuscitation (CPR)
- C. IV epinephrine
- **D. Vasopressin therapy**

Answer: D

Explanation:

Ventricular asystole is the absence of any ventricular rhythm. The nurse would expect to see an absent QRS complex, no pulse, and no cardiac output. P waves may be present if the sinus node is functioning.

If ventricular asystole is not treated immediately, the results are fatal.

Current recommended treatment for ventricular asystole includes:

- * Immediate CPR
- * IV epinephrine
- * Vasopressin therapy

Asystole has a very poor prognosis despite the best resuscitation efforts because it usually represents severe and extensive myocardial ischemia or underlying metabolic problems. Pacing and atropine are no longer recommendations for treatment.

NEW QUESTION # 95

Hallmarks of an acute asthma exacerbation include:

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

Answer: B

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 # 96

On which of the following patients would a bilateral pneumonectomy potentially be performed?

- A. A patient with lung cancer in lobes of both lungs
- **B. A patient who is brain-dead**
- C. A patient with pulmonary fibrosis
- D. A patient who is receiving Extracorporeal Membrane Oxygenation (ECMO)

Answer: B

Explanation:

A bilateral pneumonectomy is surgical removal of both lungs and would only be performed in patients who are legally dead and are organ donor candidates. The only patient described that meets this criteria is the patient who is brain-dead. This procedure would only be performed if the patient was an organ donor.

NEW QUESTION # 97

In your assessment for hypocalcemia, you would elicit Chvostek's sign by:

- A. rapping a finger above the supramandibular portion of the parotid gland and observing for twitching of the lower lip on the opposite side
- B. tapping a finger above the supramandibular portion of the parotid gland and observing for twitching of the lower lip on the same side
- **C. rapping a finger above the supramandibular portion of the parotid gland and observing for twitching of the upper lip on the same side**
- D. tapping a finger above the supramandibular portion of the parotid gland and observing for twitching of the upper lip on the opposite side

Answer: C

Explanation:

Chvostek's sign is a clinical sign of existing nerve hyperexcitability (tetany) seen in hypocalcemia.

Twitching of the upper lip in response to tapping of the facial nerve would indicate a positive Chvostek sign.

NEW QUESTION # 98

Of the following traumatic injuries, which should be treated as the FIRST priority?

- A. Hypovolemic shock
- B. Scalp laceration to forehead
- **C. Tension pneumothorax**
- D. Fractured femur

Answer: C

Explanation:

Any condition involving airway or breathing is assigned the highest priority in treating trauma. In this case, a tension pneumothorax (from injury to the lung parenchyma) may result in hemodynamic collapse and should be treated first, usually by insertion of a chest tube. In emergency situations, if a chest tube insertion is not an option, a needle decompression procedure would be appropriate. Although hypovolemic shock, a fractured femur, and a scalp injury all have the potential to be serious complications, the tension pneumothorax has the highest priority.

NEW QUESTION # 99

.....

For the buyers who want to buy CCRN-Adult Study Materials, some may have the concern of the security of website. We can tell

CCRN-Adult Trustworthy Dumps: <https://www.fast2test.com/CCRN-Adult-premium-file.html>

- P.S. Free 2025 AACN CCRN-Adult dumps are available on Google Drive shared by Fast2test: <https://drive.google.com/open?id=1yT0-zClvRf5KXKgOf-97QQ0gzJEWcYal>