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## Question: 1

The nurse is caring for a client during the postoperative period following a thyroidectomy. In which of the following positions should the nurse place the client to reduce strain on the client's suture line?

- A. Supine.
- B. Semi-Fowler.
- C. Lateral.
- D. Prone.

**Answer: B**

Explanation:

The correct position for a client after a thyroidectomy to reduce strain on the suture line is the Semi-Fowler position. This position involves the client being semi-upright at an angle of about 30 to 45 degrees. This specific positioning is crucial post-thyroidectomy for several reasons:

First, the Semi-Fowler position helps in reducing tension and pulling on the neck area where the incision is located. After a thyroidectomy, the neck's incision site can be very sensitive and prone to stress from inappropriate movements or positions. Keeping the head elevated in the Semi-Fowler position decreases the gravitational pull and potential stress on the surgical site, thereby minimizing the risk of wound dehiscence (the reopening of the wound along the surgical incision).

Additionally, this position facilitates easier breathing. Postoperative swelling or the presence of a dressing around the neck might impede airflow if the client is in a flatter position, such as supine (lying flat on the back). The elevation of the head and chest in the Semi-Fowler position allows for better expansion of the chest and less mechanical obstruction to breathing, which is particularly important given the proximity of the thyroidectomy site to the trachea.

Another advantage of the Semi-Fowler position is that it aids in the reduction of swelling. Elevation can help minimize fluid accumulation in the neck and upper chest area, which can occur after surgery due to disrupted lymphatic drainage and local inflammation.

Moreover, in the Semi-Fowler position, it is easier for the nursing staff to monitor the surgical site for signs of bleeding, swelling, or infection. It also provides a comfortable angle for the client to rest while still allowing interaction with healthcare providers and family members.

Finally, the nurse should also provide support for the client's head and neck with pillows or specially designed cushions. This is essential to ensure that there is no unnecessary strain on the neck muscles and the incision site, as well as to maintain proper alignment of the spine and neck. In summary, positioning a client in the Semi-Fowler position post-thyroidectomy is a key nursing intervention that helps in reducing strain on the suture line, facilitates breathing, decreases swelling, and allows for better monitoring and comfort.

## Question: 2

The nurse is preparing to obtain a capillary blood specimen from a 22 year old pregnant female. Which of the following is an appropriate nursing intervention?

- A. clean the puncture site with an antiseptic swab
- B. instruct the client to apply as little pressure as possible to the puncture site on the skin
- C. select a puncture site that is close to the bone
- D. prick the finger with a needle by using a stabbing motion

**Answer: A**

Explanation:

The nurse is preparing to obtain a capillary blood specimen from a 22-year-old pregnant female. Which of the following is an appropriate nursing intervention?

The correct answer is: clean the puncture site with an antiseptic swab.

When obtaining a capillary blood specimen, it is critical to prepare the puncture site properly to ensure accurate test results and minimize the risk of infection. The process of preparing the site includes cleaning the area with an antiseptic swab. This step serves multiple purposes:

1. **Reduction of Microbial Contamination:** The skin naturally harbors bacteria and other microorganisms. By cleaning the site with an antiseptic solution, such as isopropyl alcohol or another disinfectant, the nurse reduces the risk of introducing these microbes into the bloodstream, which can prevent infection at the puncture site.
2. **Interference Prevention in Test Results:** Residues such as dirt or natural skin oils can interfere with the accuracy of tests performed on the blood sample. Cleaning ensures that the sample reflects the true blood composition without contamination.
3. **Promotion of Safety:** Allowing the antiseptic to dry before making the puncture is crucial. If the skin is punctured while the antiseptic (especially alcohol-based) is still wet, it can cause a stinging sensation and potentially alter the blood sample. Evaporation of the antiseptic also reduces the sensation of discomfort for the patient during the puncture.

In the case of a pregnant 22-year-old, ensuring the accuracy and safety of the procedure is even more significant, given that any infection or complication could affect not just the woman but also the unborn child. Therefore, following stringent aseptic techniques, including the use of an antiseptic swab, is a vital nursing intervention.

It is important to note that other options, such as using a stabbing motion to prick the finger or selecting a puncture site close to a bone, are not appropriate practices. A stabbing motion can cause unnecessary pain and damage to the tissues, while selecting a site close to the bone increases the risk of bone injury, especially in areas with less soft tissue padding.

In summary, the best practice for obtaining a capillary blood specimen involves cleaning the puncture site carefully with an antiseptic swab and ensuring that the area is dry before proceeding with the puncture. This method ensures patient safety, comfort, and the reliability of the test results.

### Question: 3

The PN working on a cardiac unit will encounter various cardiac dysrhythmias. Which of the following is a dysrhythmia that is characterized by multiple rapid impulses from many foci that depolarize in the atria in a disorganized manner and no P wave is observed?

- A. atrial fibrillation

- B. sinus tachycardia
- C. ventricular tachycardia
- D. ventricular fibrillation

**Answer: A**

Explanation:

Atrial fibrillation (AFib) is a common type of cardiac dysrhythmia encountered on cardiac units. It is characterized by a rapid and disorganized electrical activity in the atria, the upper chambers of the heart. This erratic electrical activity results in ineffective contractions of the atria and a highly irregular heartbeat.

In atrial fibrillation, the normal sequential electrical impulses generated by the sinoatrial node are overwhelmed by numerous other impulses that spontaneously arise in various parts of the atria. These multiple impulses lead to a chaotic, rapid, and irregular atrial activity often described as a "quiver" rather than an effective contraction. This disorganized atrial activity is visible on an electrocardiogram (ECG) as an absence of distinct P waves, which are normally seen when the atria contract in a regular rhythm. Instead, the ECG in AFib shows a series of irregular, low-amplitude oscillations known as fibrillatory waves.

The consequences of atrial fibrillation are significant because it affects the overall efficiency of the heart. Since the atria do not contract effectively, they fail to properly fill the ventricles with blood during each cardiac cycle. This can lead to a decrease in cardiac output, which is the volume of blood the heart pumps. Moreover, the rapid and irregular rhythm can lead to symptoms such as palpitations, dizziness, shortness of breath, or even heart failure in more severe cases.

Another serious complication of atrial fibrillation involves the risk of thrombus formation. Due to the atria's ineffective contractions, blood can pool and become stagnant, particularly in the atrial appendages. This stasis increases the risk of clot formation, which can travel from the heart to the brain, causing an ischemic stroke. This is why patients with atrial fibrillation often require anticoagulant medications to reduce the risk of stroke.

In contrast to other types of tachycardia, such as sinus tachycardia, ventricular tachycardia, and ventricular fibrillation, atrial fibrillation presents with a unique set of ECG characteristics and clinical implications. Sinus tachycardia is simply a faster-than-normal heart rate but with a regular rhythm, and normal P waves, PR intervals, and QRS complexes. Ventricular tachycardia originates in the ventricles and is characterized by a high heart rate with broad QRS complexes, often without preceding P waves. Ventricular fibrillation, on the other hand, is a severe form of cardiac rhythm disturbance that results in a chaotic, ineffective quivering of the ventricles without any discernible waves or complexes on ECG, leading to sudden cardiac death if not promptly treated.

Therefore, recognizing atrial fibrillation and differentiating it from other dysrhythmias is crucial for appropriate management, including rhythm control, rate control, and thromboprophylaxis, to improve patient outcomes and prevent complications.

### Question: 4

When the nurse is telling a client she will not be his caregiver after tomorrow, he begins to make sarcastic remarks and has an angry affect. The most appropriate interpretation of this behavior is that the client what?

- A. is displaying typical behavior that can occur during the termination phase

- B. requires further treatment and is not ready to be discharged
- C. needs to be referred to the psychiatrist as soon as possible
- D. needs to be admitted to a mental hospital

**Answer: A**

Explanation:

When analyzing the behavior of a client who reacts with sarcasm and anger upon learning that their caregiver will change, it is crucial to understand the emotional and psychological context surrounding the termination of a caregiver-client relationship. The client's reaction, characterized by sarcasm and an angry affect, can be interpreted as a typical response during the termination phase of the therapeutic relationship.

The termination phase refers to the final stages of a therapeutic relationship, where the therapy or care provision is concluding. This phase can evoke a range of emotions in clients, including anxiety, sadness, and anger. These reactions are common and can be understood as part of the process of adjusting to the upcoming change. The client's behavior might be an expression of discomfort with the transition or a way of coping with the perceived loss of a trusted support figure.

It is common for clients to exhibit what might be considered regressive behaviors during this phase.

These behaviors can include the return of earlier symptoms, expressions of anger, emotional withdrawal, and attempts to minimize the importance of the relationship with the caregiver. Such reactions do not necessarily indicate a deterioration in the client's mental health status or a need for intensified treatment or hospitalization. Instead, they are often a normal part of the emotional processing that occurs as clients prepare to end their relationship with their caregiver.

Understanding these behaviors as typical allows caregivers to approach the situation with empathy and support, providing reassurance and discussing the client's feelings and concerns about the transition. It is important for the caregiver to acknowledge the client's emotions and validate their feelings, helping them to navigate this challenging phase more effectively.

Therefore, the most appropriate interpretation of the client's behavior, in this case, is that he is displaying typical reactions that can occur during the termination phase of a caregiver-client relationship. This understanding helps in managing the situation without over-pathologizing the client's natural responses to the end of a therapeutic relationship. It also guides the caregiver in providing the appropriate emotional support and interventions to ease the client's transition.

### Question: 5

A nurse is caring for an infant born to a diabetic mother. The infant is receiving IV medication to manage blood glucose levels. Which of the following blood glucose levels would cause concern to the nurse?

- A. 45 mg/dL
- B. 50 mg/dL
- C. 35 mg/dL
- D. 57 mg/dL

**Answer: C**

Explanation:

In the scenario where a nurse is caring for an infant born to a diabetic mother, it is critical to closely monitor the infant's blood glucose levels, particularly because these infants are at a higher risk of developing hypoglycemia. Hypoglycemia refers to a condition where blood glucose levels fall below normal, which can be hazardous, particularly for newborns. For infants of diabetic mothers, maintaining a stable and appropriate blood glucose level is essential for preventing potential complications. Typically, the normal range for blood glucose in newborns should be between 45 mg/dL and 65 mg/dL. Blood glucose levels outside this range can be concerning. A level of 35 mg/dL, as mentioned in the question, is significantly lower than the normal range. This indicates hypoglycemia, which can lead to various symptoms such as jitteriness, respiratory distress, poor feeding, lethargy, and even seizures in severe cases. These symptoms are concerning and require immediate intervention. The nurse's primary concern with a blood glucose level of 35 mg/dL would be to promptly address this hypoglycemia. The intervention typically involves administering glucose, either orally or intravenously, to raise the blood glucose level back into the normal range. Continuous monitoring will be necessary to ensure that the glucose levels stabilize within the safe range and to prevent further drops. It's also important for the nurse to monitor for any signs of other complications related to the infant's condition and the mother's diabetes status during pregnancy. This comprehensive care approach helps in mitigating immediate risks and supports the overall health and development of the infant.

### Question: 6

The Mantoux test is a skin test for tuberculosis. After administering, it is read when?  
check all answers that apply

- A. 48 – 72 hours
- B. 24 hours
- C. one week
- D. 12 – 24 hours

**Answer: A**

Explanation:

The Mantoux test is given intradermally in the forearm. An induration of 10 mm indicates a positive reaction. It is read in 48 – 72 hours.

### Question: 7

You receive a p.r.n. order for medication for a patient. You understand that this means which of the following?  
check all answers that apply

- A. administer when necessary
- B. administer with meals
- C. administer before meals
- D. administer immediately

**Answer: A**

Explanation:

A p.r.n. order stands for pro re nata. It means that the medication is given on a "when necessary" basis.

### Question: 8

Which of the following is a requirement that medical researchers have adopted as a framework for evaluating the ethics of medical research studies?

check all answers that apply

- A. No informed consent.
- B. Value.
- C. Scientific validity.
- D. Fair subject selection.
- E. Favorable risk-benefit ratio.

**Answer: B,C,D,E**

Explanation:

Patients have rights when it comes to medical research. Medical researchers have adopted 7 requirements to provide a framework for evaluating the ethics of medical research studies. These requirements are: value, scientific validity, fair subject selection, favorable risk benefit ratio, independent review, informed consent, and respect for enrolled subjects.

### Question: 9

A client has asthma. The teaching plan for this client should include which of the following

- A. add carpet in all rooms of the house to reduce allergen triggers
- B. wash pillows and bed sheets once a month
- C. during exercise wear a mask that keeps in cool air
- D. change air filters regularly

**Answer: D**

Explanation:

The correct answer is "change air filters regularly." Educating an asthma client about maintaining a clean and allergen-reduced environment is crucial for managing their condition effectively. Regular changing of air filters in the home's heating, ventilation, and air conditioning (HVAC) systems is a strategic approach to minimize airborne allergens such as dust mites, pollen, and pet dander that can exacerbate asthma symptoms.

Air filters trap these particles and prevent them from circulating in the air. Over time, filters can become clogged with trapped particles, which reduces their efficiency and allows more allergens to remain in the air. This can lead to increased asthma flare-ups and discomfort for the client. Hence, replacing air filters at recommended intervals ensures that air quality is maintained at a level conducive to the health of an asthma sufferer.

Other strategies within an asthma management teaching plan might include minimizing the use of carpets in the house, as carpets can trap allergens more readily than hardwood or tile floors. Contrary to adding carpets, removing them can reduce the accumulation of dust mites, pet hair, and other particles that can trigger asthma attacks.

Moreover, the nurse might advise washing pillows and bed sheets in hot water at least every two weeks, rather than once a month. This is because hot water is more effective at killing dust mites and removing the allergens they produce. Covering mattresses and pillows with allergen-proof covers can also help in reducing exposure to these triggers.

For clients with exercise-induced asthma, the recommendation to wear a mask during exercise might be misstated as keeping in cool air, when in fact, wearing a mask that warms the air before inhalation can prevent cold air-induced bronchoconstriction. This is particularly important when exercising outdoors in cold weather.

In summary, changing air filters regularly is a key component of environmental control that can significantly reduce asthma symptoms and improve quality of life for those living with asthma. This measure, combined with other preventive strategies, forms a comprehensive approach to asthma management.

### Question: 10

The nurse is teaching her coworker about the stages of grief. What stages are associated with either "This can't be happening." or "Why is this happening?"  
check all answers that apply

- A. Denial.
- B. Anger.
- C. Bargaining.
- D. Depression.
- E. Acceptance.

**Answer: A,B**

Explanation:

Grief is a normal response to loss. It has 5 basic stages. The stages are: denial, anger, bargaining, depression, and acceptance. Denial is related to thinking this cannot be happening. Anger is related to thinking why is this happening.

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