ATI PN COMPREHENSIVE PREDICTOR EXAM

Version-1

- 1. A nurse is caring for a client who is at 33 weeks of gestation following an amniocentesis. The nurse should monitor the client for which of the following complications?
 - a. Vomiting
 - b. Hypertension
 - c. Epigastric pain
 - d. Contractions
- 2. A nurse is providing teaching to an older adult client about methods to promote nighttime sleep. Which of the following instructions should the nurse include?
 - a. Stay in bed at least 1 hr if unable to fall asleep
 - b. Take a 1 hr nap during the day
 - c. Perform exercises prior to bedtime
 - d. Eat a light snack before bedtime
- 3. A nurse on a telemetry unit is caring for a client who becomes unconscious and whose monitor displays ventricular tachycardia. Which of the following actions should the nurse take first after determining the client does not have a palpable pulse?
 - a. Assess heart sounds
 - b. Defibrillate
 - c. Establish IV access
 - d. Administer epinephrine
- 4. A nurse is admitting a client who 1 week postpartum and reports excessive vaginal bleeding. The nurse does not speak the same language as the client. The client's partner and 10-year-old child are accompanying her. Which of the following actions should the nurse take to gather the client's admission data?
 - a. Have the client's child translate
 - b. Allow the client's partner to translate
 - c. Request a female interpreter through the facility
 - d. Ask a nursing student who speaks the same language as the client to translate
- 5. A nurse is caring for a client who is febrile (High fever). To reduce the client's fever, the nurse applies a cooling blanket. Which of the following findings indicates the client is having an adverse reaction to the cooling?
 - a. Flushing
 - b. Tachycardia
 - c. Restlessness
 - d. Shivering (Hypothermic)
- 6. A nurse is caring for a client who has deep-vein-thrombosis of the left lower extremity. Which of the following actions should the nurse take? (Exhibit)

- a. Position the client with the affected extremity lower than the heart
- b. Withhold heparin IV infusion PTT- 30-40 seconds; x2 if on heparin
- c. Administer acetaminophen
- d. Massage the affected extremity every 4 hr
- 8. A nurse is reviewing assessment data from several clients. For which of the following clients should the nurse recommend referral to a dietitian?
 - a. An older adult client who has a BMI of 24(18.5-24.9)
 - b. A client who has a nonhealing leg ulcer (diet isn't good)
 - c. An older adult client who has presbyopia (age related far-sightness)
 - d. A client who has an albumin level of 3.7 g/dL (normal 3.4-5.4)
- 9. A nurse is providing discharge teaching to a client who has a chronic kidney disease and is receiving hemodialysis. Which of the following instructions should the nurse include in the teaching?
 - a. Eat 1 g/kg of protein per day
 - b. Take magnesium hydroxide for indigestion
 - c. Drink at least 3 L of fluid daily-
 - d. Consume foods high in potassium- restrict
- 10. A nurse is caring for a client who is receiving intermittent enteral tube feedings. Which of the following places the client at risk for aspiration?
 - a. Sitting in a high-Fowler's position during the feeding
 - b. A history of gastroesophageal reflux disease
 - c. Receiving a high osmolarity formula
 - d. A residual of 65 mL 1 hr postprandial?
- 11. ?A nurse is providing prenatal teaching to a client who is at 12 weeks of gestation. The nurse should tell the client that she will undergo which of the following screening tests at 16 weeks of gestation?
 - a. Chorionic villus sampling- as early as 8 weeks
 - b. Cervical cultures for chlamydia- 1st appointment.
 - c. Nonstress test -28 weeks
 - d. Maternal serum alpha-fetoprotein- 16 to 18 weeks
- 12. A nurse is caring for a client who is on bed rest. The nurse should recognize that which of the following findings is a complication of immobility?
 - a. Decreased serum calcium levels- increased serum calcium
 - b. Increased blood pressure- hypotension
 - c. Swollen area on calf
 - d. Urinary frequency-

- 13. A nurse in acute care mental health facility is participating in a medication-education group. The leader of the group uses a laissez-faire leadership style. Which of the following actions should the nurse expect from the leader during the session?
 - a. The leader encourages group members to remain silent until questions are called for
 - b. The leader lecture about medication adverse effects to the group members
 - c. The leader allows the group to discuss whatever they would like to regarding their medications
 - d. The leader has group members vote on what they would like to learn about during the session
- 14. A nurse is providing teaching about digoxin administration to the parents of a toddler who has heart failure. Which of the following statements should the nurse include in the teaching?
 - a. "You can add the medication to a half-cup of your child's favorite juice."
 - b. "Repeat the dose if your child vomits within 1 hour after taking medication." X
 - c. "Limit your child's potassium intake while she is taking this medication."
 - d. "Have your child drink a small glass of water after swallowing the medication."
- 15. A nurse is providing teaching to a client who has a depressive disorder and a new prescription for phenelzine. Which of the following foods should the nurse instruct the client to avoid?
 - a. Grapefruit
 - b. Spinach
 - c. Cottage cheese- cream cheese ok.
 - d. Smoked salmon

TYRAMINE!

16. A nurse is planning care for a client who has COPD and weighs 99 lb. The provider has prescribed a diet of a 1.5 g protein/kg/day. How many grams of protein per day should the nurse include in the client's dietary plan? (Round to the nearest whole number)

a. <mark>68</mark>

- 17. A nurse is planning care for a client who has bipolar disorder and is experiencing mania. Which of the following interventions should the nurse include in the plan?
 - a. Encourage the client to spend time in the day room
 - b. Withdraw the client's TV privileges if he does not attend group therapy
 - c. Encourage the client to take frequent rest periods
 - d. Place the client in seclusion when he exhibits signs of anxiety
- 18. A parish nurse is leading a support group for clients whose family members have committed suicide. Which of the following strategies should the nurse plan to use during the group session?
 - a. Initiate a discussion with clients about ways to cope with changes in family dynamics
 - b. Encourage clients to establish a timeline for their own grieving process
 - c. Discourage clients from sharing negative aspects of their relationship with the deceased persons
 - d. Assist clients in identifying ways suicide could have been prevented
- 19. A nurse manager observes two staff nurses reviewing the computer records of a client who is not under their care. Which of the following actions should the nurse manager take first?
 - a. Instruct the nurses to close the client's computer record

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