



Project NCLEX Keyword Review

All questions from: LaCharity, Kumagai, Bartz. *Prioritization, Delegation, and Assignment: Practice Questions for the NCLEX Examination*. Copyright: Mosby/Elsevier Available from the Publisher or online at [amazon.com](https://www.amazon.com)

1) A 23-year-old client comes to the outpatient clinic reporting increasing shortness of breath, diarrhea, abdominal pain, and epistaxis. Which action should you take first?

1. Assist the client to pinch the anterior nares firmly for 5 minutes.
2. Call an ambulance to take the client immediately to the hospital.
3. Ask the client about any recent travel to Asia or the Middle East.
4. Determine whether the client has had recommended immunizations.

2) For a cognitively impaired client who cannot accurately report pain, what is the first action that you should take?

1. Closely assess for nonverbal signs such as grimacing or rocking.
2. Obtain baseline behavioral indicators from family members.
3. Look at the MAR and chart to note the time of the last dose of analgesic and the client's response.
4. Give the maximum PRN dose within the minimum time frame for relief.

3) A patient with wheezing and coughing caused by an allergic reaction to penicillin is admitted to the emergency department. Which medication do you anticipate administering first?

1. Methylprednisolone 100mg IV
2. Cromolyn 20 mg via nebulizer
3. Albuterol 3 mL via nebulizer
4. Aminophylline 500 mg IV

4) A client with diabetic neuropathy reports a burning, electrical-type pain in the lower extremities that is worse at night and not responding to nonsteroidal anti-inflammatory drugs. Which medication will you advocate for first?

1. Gabapentin
2. Corticosteroids
3. Hydromorphone
4. Lorazepam

5) A patient with newly diagnosed acquired immunodeficiency syndrome (AIDS) has a negative result on a skin test for tuberculosis (TB). Which action will you anticipate taking next?

1. Obtain a chest radiograph and sputum smear.
2. Tell the patient that the TB test results are negative.
3. Teach the patient about the anti TB drug isoniazid.
4. Schedule TB testing again in 12 months.

6) You are administering vancomycin (Vancocin) 500 mg IV to a client with a MRSA wound infection when you notice that the client's neck and face are becoming flushed. Which action should you take next?

1. Discontinue the vancomycin infusion.
2. Slow the rate of the vancomycin infusion.
3. Obtain an order for an antihistamine.
4. Check the client's temperature.

7) While working in the pediatric clinic, you receive a telephone call from the parent of a 13-year-old who is receiving chemotherapy for leukemia. The patient's sibling has chickenpox (varicella). Which action will you anticipate taking next?

1. Administer varicella-zoster immune globulin to the patient.
2. Teach the parent about the correct use of acyclovir (Zovirax).
3. Educate the parent about contact and airborne precautions.
4. Prepare to admit the patient to a private room in the hospital.

8) Which information about a client who has meningococcal meningitis is the best indicator that you can discontinue droplet precautions?

1. Pupils are equal and reactive to light.
2. Appropriate antibiotics have been given for 24 hours.
3. Cough is productive of clear, non-purulent mucus.
4. Temperature is lower than 100° F (37.8° C).

9) A 6-year-old who received chemotherapy and had anorexia is now cheerfully eating peanut butter, yogurt, and applesauce. When the mother arrives, the child refuses to eat and throws the dish on the floor. What is your best response to this behavior?

1. Remind the child that foods tasted good today and will help the body to get strong.
2. Allow the mother and child time alone to review and control the behavior.
3. Ask the mother to leave until the child can finish eating and then invite her back.
4. Explain to the mother that the behavior could be a normal expression of anger.

10) A patient who has received a kidney transplant has been admitted to the medical unit with acute rejection and is receiving IV cyclosporine (Sandimmune) and methylprednisolone (Solu-Medrol). Which staff member is best to assign to care for this patient?

1. RN who floated to the medical unit from the coronary care unit for the day
2. RN with 3 years of experience in the operating room who is orienting to the medical unit
3. RN who has worked on the medical unit for 5 years and is working a double shift today
4. Newly graduated RN who needs experience with IV medication administration

11) You are providing care for a client with an acute hemorrhagic stroke. The client's spouse tells you that he has been reading a lot about strokes and asks why his wife has not received alteplase (Activase). What is your best response?

1. "Your wife was not admitted within the timeframe that alteplase is usually given."
2. "This drug is used primarily for clients who experience an acute heart attack."
3. "Alteplase dissolves clots and may cause more bleeding into your wife's brain."
4. "Your wife had gallbladder surgery just 6 months ago, and this prevents the use of alteplase."

12) You are caring for a patient with uterine cancer who is being treated with intracavitary radiation therapy. The UAP reports that the patient insisted on ambulating to the bathroom and now "something feels like it is coming out." What is the priority action?

1. Assess the UAP's knowledge; explain the rationale for strict bed rest.
2. Assess for dislodgment; use forceps to retrieve and a lead container to store as needed.
3. Assess the patient's knowledge of the treatment plan and her willingness to participate.
4. Notify the physician about the potential or confirmed dislodgment of the radiation implant.

13) What is the priority nursing diagnosis for a client experiencing a migraine headache?

1. Acute Pain related to biologic and chemical factors
2. Anxiety related to change in or threat to health status
3. Hopelessness related to deteriorating physiologic condition
4. Risk for Injury related to side effects of medical therapy

14) A 56-year-old patient comes to the walk-in clinic reporting scant rectal bleeding and intermittent diarrhea and constipation for the past several months. There is a history of polyps and a family history of colorectal cancer. While you are trying to teach about colonoscopy, the patient becomes angry and threatens to leave. What is the priority diagnosis?

1. Diarrhea/Constipation related to altered bowel patterns
2. Deficient Knowledge related to the disease process and diagnostic procedure
3. Risk for Deficient Fluid Volume related to rectal bleeding and diarrhea
4. Anxiety related to unknown outcomes and perceived threats to body integrity

15) While performing a breast examination on a 22-year-old client, you obtain the following data. Which finding is most important to communicate to the physician?

1. Both breasts have many nodules in the upper outer quadrants.
2. The client reports bilateral breast tenderness with palpation.
3. The breast on the right side is larger than the breast on the left side.
4. An irregularly shaped, nontender lump is palpable in the left breast.

16) The UAP reports to you, the RN, that a client with myasthenia gravis has an elevated temperature (102.2° F [39°C]) an increased heart rate (120 beats/min), and a rise in blood pressure (158/94 mm Hg) and was incontinent of urine and stool. What is your best first action at this time?

1. Administer an acetaminophen suppository
2. Notify the physician immediately.
3. Recheck vital signs in 1 hour.
4. Reschedule the client's physical therapy.

17) A client with a spinal cord injury (SCI) reports sudden severe throbbing headache that started a short time ago. Assessment of the client reveals increased blood pressure (168/94 mm Hg) and decreased heart rate (48 beats/min), diaphoresis, and flushing of the face and neck. What action should you take first?

1. Administer the ordered acetaminophen (Tylenol).
2. Check the Foley tubing for kinks or obstruction.
3. Adjust the temperature in the client's room.
4. Notify the physician about the change in status.

18) You are evaluating an HIV-positive patient who is receiving IV pentamidine (Pentam) as a treatment for Pneumocystis jiroveci (PCP) pneumonia. Which information is most important to communicate to the physician?

1. The patient is reporting pain at the site of the infusion.
2. The patient is not taking in an adequate amount of oral fluids.
3. Blood pressure is 104/76 mm Hg after pentamidine administration.
4. Blood glucose level is 55 mg/dL after medication administration.

19) A tearful parent brings a child to the ED after the child takes an unknown amount of children's chewable vitamins at an unknown time. The child is currently alert and asymptomatic. What information should be immediately reported to the physician?

1. The ingested children's chewable vitamins contain iron.
2. The child has been treated previously for ingestion of toxic substances.
3. The child has been treated several times before for accidental injuries.
4. The child was nauseated and vomited once at home.

20) When you are evaluating a client who has been taking prednisone (Deltasone) 30 mg daily to treat contact dermatitis, which finding is most important to report to the health care provider?

1. The blood glucose level is 136 mg/dL.
2. The client states, "I am eating all the time."
3. The client reports epigastric pain.
4. The blood pressure is 148/84 mm Hg.

21. An 18-year-old college student with an exacerbation of systemic lupus erythematosus (SLE) has been receiving prednisone 20 mg daily for 4 days. Which medical order should you question?

1. Discontinue prednisone after today's dose.
2. Give a "catch-up" dose of varicella vaccine.
3. Check the patient's C-reactive protein level.
4. Administer ibuprofen 800 mg PO.

22. You are checking medication orders that were received by telephone for a client with rheumatoid arthritis who was admitted with methotrexate toxicity. Which order is most important to clarify with the physician?

1. Administer chlorambucil 4 mg PO daily
2. Infuse normal saline at 250 mL/hr for 4 hours
3. Administer folic acid 2000 mcg PO daily
4. Give cyanocobalamin 10,000 mcg PO

23. These medications have been prescribed for a 9-year-old with deep partial and full-thickness burns. Which medication is most important to double-check with another licensed nurse before administration?

1. Silver sulfadiazine ointment
2. Famotidine 20 mg IV
3. Lorazepam 0.5 mg PO
4. Multivitamin (pediatric) 1 tablet PO

24. Mr. J. has a panic disorder and it appears that he is having some problems controlling his anxiety. Which symptoms concern you the most?

1. His heart rate is increased and he reports chest tightness.
2. He demonstrates tachypnea and carpopedal spasms.
3. He is pacing to and fro and pounding his fists together
4. He is muttering to himself and is easily startled

25. You are supervising a senior nursing student who is caring for a client with a right hemisphere stroke. Which action by the student nurse requires that you intervene?

1. Instructing the client to sit up straight, and the client responding with a puzzled expression
2. Moving the client's food tray to the right side of his over-bed table
3. Assisting the client with passive range-of-motion (ROM) exercises
4. Combing the hair on the left side of the client's head when the client always combs his hair on the right side

26. You are the preceptor for an RN who is undergoing orientation to the intensive care unit. The RN is providing care for a patient with ARDS who has just been intubated in preparation for mechanical ventilation. You observe the nurse perform all of these actions. For which action must you intervene immediately?

1. Assessing for bilateral breath sounds and symmetrical chest movement
2. Auscultating over the stomach to rule out esophageal intubation
3. Marking the tube 1 cm from where it touches the incisor tooth or nares
4. Ordering a chest radiograph to verify that tube placement is correct

27. You are working with a student nurse to care for an HIV-positive patient with severe esophagitis caused by *Candida albicans*. Which action by the student indicates that you need to intervene most quickly?

1. Putting on a mask and gown before entering the patient's room
2. Giving the patient a glass of water after administering the ordered oral nystatin suspension
3. Suggesting that the patient should order chile con carne or chicken soup for the next meal
4. Placing a "No Visitors" sign on the door of the patient's room

28) You are providing end-of-life-care for a patient with terminal liver cancer. The patient is weak and restless. Her skin is cool and mottled. Dyspnea develops and the patient appears anxious and frightened. What should you do?

1. Obtain an order for morphine elixir.
2. Alert the rapid response team and call the physician for orders.
3. Deliver breaths at 20/min with a bag-valve mask and prepare for intubation.
4. Sit quietly with the patient and offer emotional support and comfort