

#1

Question 2 of 3

< 2 GO >

Based on the American Society for Pain Management Nursing recommendations for “As needed” (PRN) range prescriptions for opioid analgesics, for which prescriptions, does the nurse need to seek clarification from the health care provider? **Select all that apply.**

Rationale

Answer Options

- 1 Ms. A is a 35-year old female admitted for an acute episode of cholelithiasis. Prescribed: Morphine 1 to 15 mg IV every 2 hours PRN pain
- 2 Mr. B is a 75-year old male who had hip surgery yesterday. He has chronic obstructive pulmonary disease. Prescribed: Morphine 2 to 3 mg IV every 2 hours PRN pain
- 3 Mr. C is a 55-year old male with acute pancreatitis. He has a history of alcohol and substance abuse. Prescribed: Morphine 1 to 3 mg IV every 4 hours PRN pain
- 4 Mrs. D is an 83-year old female with an ankle fracture. She has dementia and is unable to maintain elevation of the ankle. Prescribed: Meperidine 25 to 50 mg PO PRN pain
- 5 Mr. E is a 46-year old male admitted for bacterial meningitis. He reports severe headaches. Prescribed: Codeine 15 mg PO 1-2 tablets every 4 to 6 hours PRN pain
- 6 Mr. F is a 25-year old male. He has extensive abrasions on the left side of the body sustained in a motorcycle accident. No other obvious trauma detected in the emergency department. Prescribed: Oxycodone 9 mg PO every 12 hours; Hydrocodone with acetaminophen 5/325 PO 1 to 2 tablets every 4 to 6 hours PRN pain; acetaminophen 500 mg 2 tablets PO every 6 to 8 hours PRN pain
- 7 Ms. G is a 57-year old female who had a hysterectomy yesterday for uterine prolapse. She is opioid naive and has no preexisting health conditions other than prolapse of the uterus. Prescribed: Fentanyl 50 to 100 mcg IV every 2 hours PRN for severe pain
- 8 Mr. H is a 68-year old male; he has pain associated with postherpetic neuralgia. Prescribed: Morphine 2 to 3 mg IV every 4 hours PRN pain

#2

Question 1 of 3

< 1 GO >

The nursing supervisor has advised the charge nurse that there is a new admission who needs a private room. The charge nurse must review the conditions and statuses of patients who are currently on the unit to determine who could be moved and placed the same room.

Which two cancer patients could be cohorted?.

Rationale

Answer Options

- 1 Patient A has a neutrophil count of $1000/\text{mm}^3$ ($1 \times 10^9/\text{L}$)
- 2 Patient B underwent debulking of a tumor to relieve pressure
- 3 Patient C just underwent a bone marrow transplantation
- 4 Patient D had a laminectomy for spinal cord compression
- 5 Patient E is undergoing brachytherapy for prostate cancer
- 6 Patient F has terminal cancer and is receiving end-of-life care
- 7 Patient G is approaching the nadir associated with the chemotherapy treatment

#3

The nurse is admitting a 72-year-old patient from the health care provider's office to the medical/surgical unit. The patient was alert until recently and has become confused. Over the past 36 hours the patient developed signs and symptoms of fluid overload.

Vital Signs:

Pulse 112 beats/min

Respiration 34 breaths/min

Blood Pressure 168/94 mmHg

On admission assessment which manifestations would the RN expect to assess?

Select all that apply.

Rationale

- 1 Increased heart rate
- 2 Weak, thready pulse
- 3 Alert and oriented
- 4 Pitting edema of lower extremities
- 5 Deep respirations
- 6 Distended neck veins
- 7 Bilateral rhonchi
- 8 Hyperactive bowel sounds
- 9 Weight loss
- 10 Pale, cool skin

#4

The nurse is caring for a 55-year-old female patient with chronic obstructive pulmonary disease (COPD) and hypertension. She has no known allergies. Albuterol and Symbicort inhalers are prescribed for COPD. Hydrochlorothiazide (HCTZ) and lisinopril are prescribed for hypertension.

Vital Signs:

Pulse 68 beats/min

Respiration 32 breaths/min

Blood Pressure 164/90 mmHg

Oxygen Saturation 90%

Which of the following statements made by the patient are important with regard to her COPD? **Select all that apply.**

Rationale

- 1 I get short of breath when I walk more than 2 blocks.
- 2 My father died a year ago and I still grieve for having lost him.
- 3 I'm afraid that I'll need home oxygen soon and I still smoke 5 to 6 cigarettes a day.
- 4 I've had a cough for about 4 weeks now.
- 5 I use my inhalers just twice a day.
- 6 I rest better at night when I sleep in my recliner chair.
- 7 I often have to get up to urinate during the day and night.
- 8 I sometimes feel my heart race after I take my medicines.

#5

The nurse is caring for a female patient with coronary artery disease and hypertension. She has no known allergies and takes lisinopril for hypertension.

Vital signs:

Temperature 36.6°C (98°F)

Pulse 82 beats/min

Blood Pressure 134/90 mmHg

Respirations 18 breaths/min

Oxygen Saturation 97%.

Which of the statements made by the patient are significant when considering a problem with perfusion? **Select all that apply**

Rationale

1

I get short of breath when I vacuum.

2

I sleep better since I started to use two pillows.

3

I had to buy new shoes because my old ones were getting too tight.

4

Many people in my family have pernicious anemia.

5

I feel lightheaded when I get up in the morning.

6

I have been so tired lately I worry I may be depressed.

7

I only smoke three cigarettes a day.

8

I recently developed a nonproductive cough.

9

When I get anxious, I can't seem to catch my breath.