

ATI RN Medical-Surgical
Proctored Exam - 100 NGN
Questions & Detailed Answers
2024/2025 | ATI Med-Surg
Exam 100 exam

A nurse in the PACU is assessing a client who is postoperative following general anesthesia. Which of the following findings is the priority to address?

- a. vomiting upon arousal
- b. decreased body temperature
- c. indistinct, rambling speech
- d. piloerection of the skin - --ANSWER---a. vomiting upon arousal

A nurse is caring for a client who has hypervolemia. Which of the following is an expected assessment finding?

- a. bradycardia
- b. hypotension
- c. loss of skin turgor
- d. weight gain - --ANSWER---d. weight gain

A nurse is teaching about measures to prevent recurring urinary tract infections with a female client. Which of the following information should the nurse include in the teaching? Select all that apply

- a. take a warm bubble bath daily
- b. void every 6 hours during the day
- c. drink low-fructose cranberry juice
- d. wipe the perineal area from front to back after urinating
- e. drink 3L of fluids daily - --ANSWER---c. drink low-fructose cranberry juice
- d. wipe the perineal area from front to back after urinating
- e. drink 3L of fluids daily

A nurse is caring for a client following a cardiac catheterization who has hives and urticaria following administration of IV contrast dye. Which of the following medications should the nurse plan to administer?

- a. spironolactone
- b. desmopressin
- c. metoclopramide
- d. diphenhydramine - --ANSWER---d. diphenhydramine

A home care nurse is planning to use nonpharmacological pain relief measures for an older adult client who has severe chronic back pain. Which of the following guidelines should the nurse use?

- a. discontinue opioids before trying nonpharmacological methods of pain relief.
- b. use imagery with clients who have difficulty with focus and concentration
- c. distraction changes the client's perception of pain, but does not affect the cause.
- d. pain relief from the use of heat and cold continues for several hours after removal of the stimulus - --ANSWER---c. distraction changes the client's perception of pain, but does not affect the cause.

A nurse is caring for a female client who is receiving TPN without fat emulsion. Which of the following findings should the nurse report?

- a. crackles in the bilateral lung bases
- b. weight gain of 1.3 kg (3lb) over the past 7 days
- c. triglyceride 110 mg/dl
- d. bowel sounds absent in lower quadrants - --ANSWER---a. crackles in the bilateral lung bases

A nurse is caring for a client who has cervical cancer and is receiving brachytherapy. Which of the following actions should the nurse take?

- a. keep the soiled bed linens in the client's room
- b. instruct visitors to remain 3 feet from the client
- c. discard the radioactive device in the client's trash can
- d. limit time for visitors to 2 hour per day - --ANSWER---a. keep the soiled bed linens in the client's room

What would you do for wound Evisceration (removal of internal organs) , Emergency management? - --ANSWER---Saline cover wound

A nurse in an emergency department is preparing to perform ocular irrigation for a client. Which of the following actions should the nurse plan to take?

- a. Assess the client's visual acuity prior to irrigation
- b. Have the client turn their head toward the unaffected eye
- c. Hold the irrigator syringe 3.81 cm (1.5in) above the eye
- d. Perform the irrigation with sterile water for irrigation - --ANSWER---d. perform the irrigation with sterile water for irrigation

A nurse is preparing to administer lactated ringer's via continuous IV infusion at 200 ml/hr. The IV tubing has a drop factor of 10 drops / mL. How many gtt/min should the nurse set the IV pump to administer? Round to the nearest whole number - --ANSWER---33 gtt/min

A nurse is providing discharge teaching to a client who has a new prescription for sublingual nitroglycerin. Which of the following client statements indicates an understanding of the teaching?

- a. I can keep my medications for 1 year before replacing it.
- b. I should lie down when I take this medication
- c. I should discontinue this medication if I develop a headache.
- d. I can take up to 5 tablets in 15 minutes before seeking medical attention - --ANSWER---b. I should lie down when I take this medication

M/S c. 31/p. 201 "Stop activity and rest. Heachace is a common AE of this medication, change positions slowly"

A nurse is providing discharge teaching to an older adult following a left total hip arthroplasty. Which of the following instructions should the nurse include in the teaching?

- a. clean the incision daily with hydrogen peroxid
- b. you can cross your legs and the ankles when sitting down
- c. you should use an incentive spirometer every 8 hours
- d. install a raised toilet in your bathroom - --ANSWER---d. install a raised toilet in your bathroom

M/S c. 68/ p. 455 "Follow position restrictions to avoid dislocation, use elevated seating and a raised toilet seat"

A nurse is planning care for a client following a cardiac catheterization. Which of the following actions should the nurse take?

- a. keep the client on bed rest for 24 hours
- b. limit the client's fluid intake to 1L per day.
- c. maintain the client's affected extremity in extension
- d. change the client's dressing every 8 hours. - --ANSWER---c. maintain the client's affected extremity in extension

M/S c. 27/p. 173 "Maintain bed rest in supine position with extremity straight for prescribed time"

A nurse is caring for a client who has a lower extremity fracture and a prescription for crutches. Which of the following client statements indicates the client is adapting to their role change?

- a. I will need to have my partner take over shopping for groceries and cooking the meal for us
- b. These crutches make it impossible to care for my child
- c. I feel bad that I have to ask my partner to keep the house clean
- d. it's going to be difficult to tell my parents I can't take them to their appointment. - --ANSWER---a. I will need to have my partner take over shopping for groceries and cooking the meal for us

A nurse is caring for a client who has gastroenteritis. Which of the following assessment findings should the nurse recognize as an indication that the client is experiencing dehydration?

- a. pitting, dependent edema
- b. distended jugular veins