

# **ATI Cardiovascular Targeted Exam EXAM LATEST WITH ACTUAL QUESTIONS AND CORRECT VERIFIED ANSWERS ALREADY GRADED A+ 100% GUARANTEED PASS!**

A nurse is providing discharge teaching for a client who has a prescription for the transdermal nitroglycerin patch. Which of the following instructions should the nurse include in the teaching?

- Apply the new patch to the same site as the previous patch
- Place the patch on an area of skin away from skin folds and joints
- Keep the patch on 24 hr per day
- Replace the patch at the onset of angina - ✓✓ANSWER✓✓>>Place the patch on an area of skin away from skin folds and joints

A nurse in an emergency room is assessing a client who has a bradycardia. Which of the following findings should the nurse monitor for?

- Confusion
- Friction rub
- Hypertension
- Dry skin - ✓✓ANSWER✓✓>>Confusion

Bradycardia can cause decreased systemic perfusion, which can lead to confusion.

A nurse is admitting a client who has a leg ulcer and a history of diabetes mellitus. The nurse should use which of the following focused assessments to help differentiate between an arterial ulcer and a venous stasis ulcer?

- Explore the client's family history of peripheral vascular disease
- Note the presence or absence of pain at the ulcer site
- Inquire about the presence or absence of claudication
- Ask if the client has had a recent infection - ✓✓ANSWER✓✓>>Inquire about the presence or absence of claudication

Clients who have arterial ulcers experience claudication, but those who have venous ulcers do not.

A nurse is caring for a client following insertion of a permanent pacemaker. Which of the following client statements indicates a potential complication of the insertion procedure?

- "I can't get rid of these hiccups."
- "I feel dizzy when I stand."
- "My incision site stings."
- "I have a headache." - ✓✓ANSWER✓✓>>"I can't get rid of these hiccups."

Hiccups can indicate that the pacemaker is stimulating the chest wall or diaphragm, which can occur as a result of a lead wire perforation.

A nurse is assessing a client who has pulmonary edema related to heart failure. Which of the following findings indicates effective treatment of the client's condition?

- Absence of adventitious breath sounds
- Presence of a nonproductive cough
- Decrease in respiratory rate at rest
- SaO<sub>2</sub> 86% on room air - ✓✓ANSWER✓✓>>Absence of adventitious breath sounds

Adventitious breath sounds occur when there is fluid in the lungs. The absence of adventitious breath sounds indicates that the pulmonary edema is resolving.

A nurse is caring for a client who is receiving heparin therapy and develops hematuria. Which of the following actions should the nurse take if the client's aPTT is 96 seconds?

- Increase the heparin infusion flow rate by 2 mL/hr
- Continue to monitor the heparin infusion as prescribed
- Request a prothrombin time (PT)
- Stop the heparin infusion - ✓✓ANSWER✓✓>>Stop the heparin infusion.

The nurse should identify that the client's aPTT is above the critical value and the client is displaying manifestations of bleeding. Therefore, the nurse should discontinue the heparin infusion immediately and notify the provider to reduce the risk of client injury.

A nurse is caring for a postoperative client 1 hr following an aortic aneurysm repair. Which of the following findings can indicate shock and should be reported to the provider?

- Serosanguineous drainage on dressing
  - Severe pain with coughing
  - Urine output of 20 mL/hr
  - Increase in temperature from 36.8 C (98.2 F) to 37.5C (99.5 F) -
- ✓✓ANSWER✓✓>>Urine output of 20 mL/hr

Urine output less than 30 mL/hr is a manifestation of shock. Urine output is decreased due to a compensatory decreased blood flow to the kidneys, hypovolemia, or graft thrombosis or rupture.

A nurse is teaching a client who is starting to take an ACE inhibitor to treat hypertension. The nurse should instruct the client to notify his provider if he experiences which of the following adverse effects of this medication?

- Tendon pain
- Persistent cough
- Frequent urination
- Constipation - ✓✓ANSWER✓✓>>Persistent cough

A persistent cough is an adverse effect of ACE inhibitors. The client should report this finding to the provider and discontinue the medication.

A nurse is caring for a client who has endocarditis. Which of the following findings should the nurse recognize as a potential complication?

- Ventricular depolarization
- Guillain-Barre syndrome
- Myelodysplastic syndrome
- Valvular disease - ✓✓ANSWER✓✓>>Valvular disease

Valvular disease or damage often occurs as a result of inflammation or infection of the endocardium.

A nurse is caring for a client who had an onset of chest pain 24 hr ago. The nurse should recognize that an increase in which of the following is diagnostic of a myocardial infarction (MI)?

- Myoglobin
- C-reactive protein
- Creatine kinase- MB
- Homocysteine - ✓✓ANSWER✓✓>>Creatine kinase-MB

MY ANSWER

Creatine kinase-MB is the isoenzyme specific to the myocardium. Elevated creatine kinase-MB indicates myocardial muscle injury.

A nurse in an emergency department is caring for a client who had an anterior myocardial infarction. The client's history reveals she is 1 week postoperative following an open cholecystectomy. The nurse should recognize that which of the following interventions is contraindicated?

- Administering IV morphine sulfate
- Administering oxygen at 2 L/min via nasal cannula
- Helping the client to the bedside commode
- Assisting with thrombolytic therapy - ✓✓ANSWER✓✓>>Assisting with thrombolytic therapy

The nurse should recognize that major surgery within the previous 3 weeks is a contraindication for thrombolytic therapy.

A nurse is providing health teaching for a group of clients. Which of the following clients is at risk for developing peripheral arterial disease?

- A client who has hypothyroidism
- A client who has diabetes mellitus
- A client whose daily caloric intake consists of 25% fat
- A client who consumes two 12-oz bottles of beer a day - ✓✓ANSWER✓✓>>A client who has diabetes mellitus

Diabetes mellitus places the client at risk for microvascular damage and progressive peripheral arterial disease.

A nurse is providing teaching for a client who is 2 days postoperative following a heart transplant. Which of the following statements should the nurse include in the teaching?

- "You might no longer be able to feel chest pain."
- "Your level of activity intolerance will not change."
- "After 6 months, you will no longer need to restrict your sodium intake."
- "You will be able to stop taking immunosuppressants after 12 months." - ✓✓ANSWER✓✓>>"You might no longer be able to feel chest pain."

Heart transplant clients usually are no longer able to feel chest pain due to the denervation of the heart.

A nurse is caring for a client who was admitted for treatment of left-sided heart failure with intravenous loop diuretics and digitalis therapy. The client is experiencing weakness and an irregular heart rate. Which of the following actions should the nurse take first?

- Obtain client's current weight
- Review serum electrolyte values
- Determine the time of the last digoxin dose