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Practice Questions

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1. Which of the following is NOT an air-leak syndrome?

- A. Pneumopericardium
- B. Pneumothorax
- C. Pneumomediastinum
- D. Pneumocranium

2. Where should the chest drainage unit be placed?

- A. level with the patient's chest
- B. on the ground
- C. below the patient's chest
- D. above the patient's chest

3. A common cause of chronic respiratory failure is chronic obstructive pulmonary disease (COPD). What is the most common cause of COPD?

- A. Inhalation of toxic fumes
- B. Car accidents
- C. Muscular dystrophy
- D. Smoking

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4. Which of the following is NOT a potential cause of hypoventilation?

- A. Chronic mountain sickness
- B. Heroin overdose
- C. Stroke in the brainstem
- D. Hypercapnia (too much CO₂ in blood)



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5. COPD is a progressive disease; what does this mean about COPD?

- A. You will never know you have it until it has progressed too far to be treated
- B. It comes and goes in progressions over time
- C. It gets progressively better over time
- D. It get progressively worse over time

6. Which of the following is NOT a diagnostic test to determine pulmonary embolism?

- A. pulmonary arteriogram
- B. V/Q scan
- C. pulse oximetry
- D. CT scan

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**7. A patient has COPD.

What action is recommended to prevent an infection?**

- A. ABG
- B. flu and pneumococcal vaccination
- C. administer oxygen
- D. B-adrenergic agonist

8. In outpatient diabetic management, what is the best measure of a client's glycemic control?

- A. Hourly blood sugar
- B. Morning blood sugar
- C. HbA1c
- D. BUN/Cr

9. The most common cause of gastrointestinal bleed is:

- A. Trauma
- B. Alcohol intake
- C. Endoscopy procedures
- D. Peptic ulcer

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10. What is the average life of red blood cells in the body?

- A. 100 days
- B. 240 days
- C. 150 days
- D. 120 days

11. What is the most fast-acting pharmaceutical intervention in treating hypertensive crisis?

- A. Amlodipine
- B. Sodium nitroprusside
- C. Indapamide
- D. Captopril

12. You are providing preoperative care to a patient who has a history of congestive heart failure. Of the following, for which condition is this patient at elevated risk?

- A. dehydration
- B. thrombus formation
- C. myocardial infarction
- D. excessive bleeding

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13. An angiogram, fractional flow reserve, intravascular ultrasound, and optical coherence tomography are all types of _____ cardiac catheterizations.

- A. Exploratory
- B. Definitive
- C. Interventional
- D. Diagnostic

14. Which of the following is NOT a test to diagnose an arterial or venous occlusion?

- A. Angiography
- B. Ankle brachial index (ABI)
- C. Testing a blood sample for cholesterol
- D. Ultrasound



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15. What is TRUE about angina?

- A. A genetic heart failure.
- B. Any abnormalities in the heart of the patient.
- C. A reduced flow of the blood or low oxygen content.
- D. An excessive intake of alcohol.

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16. What are stroke or cerebrovascular accidents classified as?

- A. Only ischemic
- B. None of the answers is correct.
- C. Only hemorrhagic
- D. Ischemic and hemorrhagic

17. Which of the following statements regarding an ECG or electrocardiogram is FALSE?

- A. It is simple to use but the accuracy of the data is limited.
- B. It provides a graphic tracing of the electrical forces produced by the heart of a patient.
- C. The ECG is simple to interpret and simple to use.
- D. It is commonly used to diagnose patients with known or suspected cardiac disease.

18. Which of the following is NOT a suspected cause of aneurysms?

- A. Elevated calcium levels
- B. Smoking
- C. High blood pressure
- D. Drug use

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19. Which of the following common concerns requires vascular surgery?

- A. Dysfunctional cardiac valves require vascular surgery
- B. Concerns like aneurysms and occlusions require vascular surgery
- C. Heart failure and dysrhythmias require vascular surgery
- D. Congenital heart disease requires vascular surgery



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20. A 50-year-old patient makes an appointment after discovering a painless lump on her left breast during her monthly self exam. Based on what finding would the nurse suspect the lump could be cancerous?

- A. fluid leakage from the left nipple
- B. swollen lymph nodes under the left armpit
- C. a nonmobile mass with irregular edges
- D. a soft mass that moves around the area

21. If the volume of one of the intracranial constituents increases, a reciprocal decrease in the volume of one or both of the others must occur or ICP will increase. This is known as which of the following?

- A. herniation syndrome
- B. nondistensible hypothesis
- C. Monro-Kellie hypothesis
- D. cytotoxic hypothesis

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22. You are providing patient education to a patient who will undergo CABG. She asks when she will be allowed to resume her normal activities, which include regular exercise and working a full-time job. Which of the following reflects the recommendations for this patient?

- A. She should limit herself to light activity for the first 6 weeks after surgery.
- B. She should gradually increase activity as she feels ready.
- C. She can return to light activity within 4 weeks of the surgery.
- D. She may return to work in 3 months.

23. Dr. Edward from another hospital comes to seek the medical record of patient William. The duty nurse should ensure that:

- A. The doctor signs a release before providing medical records to another party
- B. She directly hands over the medical records since the person seeking this information is a doctor.
- C. The senior nurse signs a release before providing medical records to another party
- D. The patient signs a release before providing medical records to another party



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24. You are providing care to a patient who has been admitted for a hip replacement. She has a history of cardiovascular disease and has been taking warfarin. Which of the following is likely to be prescribed to decrease her risk of DVT after surgery?

- A. an IVC filter
- B. increased doses of warfarin
- C. bed rest
- D. low doses of another anticoagulant

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25. A patient is sedated. What precaution should be taken to prevent injury?

- A. ECG
- B. bed rails
- C. chemical paralysis
- D. beta blockers

26. When assessing a patient's limbs, if he receives a grade of 3, what does this mean?

- A. Full ROM against gravity and a moderate amount of resistance; slight weakness.
- B. Full range of motion when gravity is eliminated, severe weakness.
- C. Full ROM against gravity and resistance; normal muscle strength.
- D. Full ROM against gravity only, moderate muscle weakness.

27. Which of the following signs would be present in a patient who took too much bupropion?

- A. Diarrhea
- B. Absence of dizziness
- C. Loss of weight
- D. Seizure activity

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28. Medication that is to be administered once per day in the morning will be noted as which of the following?

- A. q.d.
- B. NPO
- C. q.a.m.
- D. PRN



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29. While checking the abducens nerve of the candidate, the nurse will ask the candidate to follow the finger from?

- A. 11 o'clock to 1 o'clock position
- B. 3 o'clock to 12 o'clock position
- C. 1 o'clock position to 11 o'clock position, clockwise
- D. 2 o'clock to 6 o'clock position

30. An Ethical Principle that relates to the distribution of limited resources of healthcare benefits to members of society is called:

- A. Justice
- B. Bioethics
- C. Empowering patients
- D. None of the above



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Answer Key & Explanations

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1. D — Pneumocranium

The four main types of air-leak syndromes include pneumothorax, pneumopericardium, pneumomediastinum, and pulmonary interstitial emphysema.

2. C — below the patient's chest

A patient with a pneumothorax may have a chest tube. The chest drainage unit needs to be placed below the patient's chest. This will prevent a backup.

3. D — Smoking

Smoking is the most common cause of COPD. COPD is a collection of conditions that impair the flow of air into and out of the lungs (such as emphysema and bronchitis).

4. D — Hypercapnia (too much CO₂ in blood)

Stroke in the brainstem, heroin overdose and chronic mountain sickness are all potential causes of hypoventilation. Hypocapnia (too little CO₂ in the blood) is another potential cause, but hypercapnia is actually the result of hypoventilation.

5. D — It get progressively worse over time

COPD is a progressive disease. This means that over time, it gets progressively worse.

6. C — pulse oximetry

Pulse oximetry is used to monitor oxygen saturation. The other answers are used to diagnose pulmonary embolism. Chest X-ray, ABG, and examination are also used to determine pulmonary embolism.

7. B — flu and pneumococcal vaccination

Patients with COPD are at risk of infections. The American Lung Association and American Thoracic Society both recommend patients be vaccinated.

8. C — HbA_{1c}

The best measure of long-term glycemic control is HbA_{1c}.
This gives an evaluation of a client's glycemic control for the past 3 months and is the best guide for future medication choices.
BUN/creatinine measures kidney function and would only reflect chronically poor glycemic control to the point of kidney damage.
Morning and hourly blood sugars are helpful, but do not reflect prolonged glycemic control.

9. D — Peptic ulcer

The most common cause of gastrointestinal bleed is peptic ulcer. A peptic ulcer, also known as *ulcus pepticum*, PUD or peptic ulcer disease, is an ulcer (defined as mucosal erosions equal to or greater than 0.5 cm) of an area of the gastrointestinal tract that is usually acidic and thus extremely painful.

10. D — 120 days

Hemoglobin, the oxygen carrier found in red blood cells, has a biconcave disc-like structure. RBCs typically



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stay for 120 days in the body before being eliminated in the spleen. Hemoglobin is also destroyed along with the red blood cells, and the heme portion is recycled or excreted from the body.

11. B — Sodium nitroprusside

Intravenous sodium nitroprusside is the first-line treatment for hypertensive crisis. It is a fast-acting drug. Clonidine, Captopril, Amlodipine, and Indapamide are anti-hypertensives. Other medications are also utilized if sodium nitroprusside is not available, although it will take a while before they start to work. Sodium nitroprusside gradually brings the blood pressure down to normal after initial treatment.

12. C — myocardial infarction

Patients with a history of cardiovascular problems, including congestive heart failure, are at higher risk for myocardial infarction during and post surgery. The stresses of surgery and anesthesia contribute to this risk.

13. D — Diagnostic

An angiogram, fractional flow reserve (FFR), intravascular ultrasound (IVUS), and optical coherence tomography (OTC) are all examples of a diagnostic cardiac catheterization. An angiogram shows blockages and narrow arteries using dye. A FFR measures the pressure of blood flow through arteries. An IVUS and OTC both measure blocked and narrowed arteries to diagnose coronary artery disease.

14. C — Testing a blood sample for cholesterol

Testing a blood sample for cholesterol is not a diagnostic test for arterial and venous occlusions. Cholesterol levels can help determine a person's risk for occlusions, but they are not used to diagnose occlusions.

15. C — A reduced flow of the blood or low oxygen content.

Patients with angina have low oxygen levels or a decreased blood flow.

16. D — Ischemic and hemorrhagic

Hemorrhagic and ischemic strokes are the two types of cerebrovascular accidents. Hemorrhagic strokes arise from the rupture of a blood vessel or an abnormal vascular structure, while ischemic strokes are those that are brought on by a disruption in the blood supply. Ischemia and hemorrhage account for 87% and 3% of strokes respectively.

17. C — The ECG is simple to interpret and simple to use.

Electrocardiograms, often known as ECGs, are frequently used as diagnostic tools to diagnose individuals with known or suspected cardiac disease. It offers a visual representation of the electrical forces generated by a patient's heart. Although the data is easy to use, it is difficult to interpret, and its accuracy is only limited.

18. A — Elevated calcium levels

Elevated calcium levels are not known to be a cause of aneurysms.

19. B — Concerns like aneurysms and occlusions require vascular surgery

Concerns like aneurysms and occlusions are common concerns that require vascular surgery.

20. C — a nonmobile mass with irregular edges

Tumors are typically hard and fixed in one place with edges that feel uneven or irregular. If the mass was able to move or soft to touch, this would suggest a fluid-filled cyst, which is benign. Nipple leakage or swollen lymph nodes are generally signs of an infection, not cancer.



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21. C — Monro-Kellie hypothesis

The Monro-Kellie hypothesis states that if the volume of one of the intracranial constituents increases, a reciprocal decrease in the volume of one or both of the others must occur or ICP will increase. This hypothesis is involved in the pathophysiology of increased intracranial pressure.

22. A — She should limit herself to light activity for the first 6 weeks after surgery.

CABG patients may engage in light activity such as light housekeeping for the first 6 weeks post-surgery. They may then return to work. Normal activity levels are usually resumed within 3 months of surgery.

23. D — The patient signs a release before providing medical records to another party

The nurse should ensure patient signs a release before providing medical records to another party.
Confidentiality is the obligation and ethical responsibility in a professional-patient relationship.
Nurses should ethically protect the information they possess concerning the patient and family.
The patient needs to sign a release before the duty nurse can give over his medical records to another doctor.

24. A — an IVC filter

An inferior vena cava (IVC) filter is used to lower the risk of deep vein thrombosis (DVT). The IVC filter is used in cases where anticoagulant therapy is not advised, such as in patients with increased risk for bleeding. This patient's warfarin use increases her risk for bleeding and makes it inadvisable to use other anticoagulants. She is at elevated risk of DVT due to her history of heart disease. Most doctors generally will not recommend an IVC filter if other options are available instead.

25. B — bed rails

Sedated patients are at risk of injuring themselves. Bed rails will keep patients from falling and injuring themselves.

26. D — Full ROM against gravity only, moderate muscle weakness.

The limb assessment of a conscious patient is given a grade according to the patient's strength. The grades are as follows: 5 - Full ROM against gravity and resistance; normal muscle strength. 4 - Full ROM against gravity and a moderate amount of resistance; slight weakness. 3 - Full ROM against gravity only, moderate muscle weakness. 2 - Full range of motion when gravity is eliminated, severe weakness. 1 - A weak muscle contraction is palpated, but no movement is noted, very severe weakness. 0 - Complete paralysis.

27. D — Seizure activity

Seizures would be a side effect of taking more than 450mg of bupropion daily. Constipation, weight gain, and dizziness are also common side effects of the medication.

28. C — q.a.m.

This abbreviation indicates that the medication should be given once a day before noon. Consult the medication order for the mode of administration.

29. C — 1 o'clock position to 11 o'clock position, clockwise

While checking the abducens nerve, the nurse will ask the candidate to follow the finger from the 1 o'clock to 11 o'clock position, in a clockwise direction.

30. A — Justice

An Ethical Principle that relates to the distribution of limited resources of healthcare benefits to members of society is called is justice.
Justice is the Ethical Principle that relates to the distribution of limited



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healthcare resources to society.

It means that the health care facilities should be distributed to all patients fairly and equally according to their needs.

Nurse should not be Patient bias and should make justice between two patients.



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