



QCHP Nurse Exam Prep Qatar

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Practice Questions

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1. Which part of the pancreas is MOST frequently affected by carcinoma?

- A. Tail
- B. Body
- C. Head
- D. Islets of Langerhans

2. A temporary QCHP nursing license is valid for a maximum of:

- A. 6 months (non-renewable)
- B. 1 year
- C. 2 years
- D. 3 years

3. Which blood type is the universal RECIPIENT for red blood cells?

- A. O negative
- B. O positive
- C. A positive
- D. AB positive

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4. A patient with liver cirrhosis develops confusion, asterixis, and foetor hepaticus. The nurse anticipates treatment with:

- A. IV corticosteroids
- B. Lactulose and rifaximin
- C. High-protein diet
- D. Furosemide bolus



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5. The nurse is caring for a patient with a new colostomy. Which observation from the patient indicates effective teaching?

- A. I will change my bag every day whether it needs it or not.
- B. I will empty the bag when it is one-third full.
- C. I should not shower with my ostomy.
- D. I need to avoid all physical activity.

6. A patient in Qatar is unconscious and requires emergency surgery. No family member is available. How should consent be handled?

- A. Delay surgery until family can be contacted
- B. Obtain consent from the nearest roommate
- C. Proceed only after police authorization
- D. Proceed with implied consent for life-saving emergency care and document thoroughly

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7. Which is the correct method for removing personal protective equipment to prevent self-contamination?

- A. Mask first then gloves then gown last
- B. Gloves first then gown then mask or respirator last
- C. Gown first then mask then gloves
- D. All PPE removed simultaneously

8. The Alma-Ata Declaration on Primary Health Care was adopted in:

- A. 1970
- B. 1975
- C. 1978
- D. 1980

9. The nurse is collecting a urine specimen for culture from a patient with an indwelling catheter. Which technique is correct?

- A. Disconnect the catheter from the drainage tubing to collect urine
- B. Clamp tubing then aspirate urine from the sampling port using sterile technique
- C. Collect urine from the drainage bag
- D. Use a clean catch midstream technique



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10. A patient with chronic obstructive pulmonary disease develops respiratory acidosis. What compensatory change does the nurse expect?

- A. Decreased bicarbonate
- B. Increased bicarbonate retention by the kidneys
- C. Decreased respiratory rate
- D. Increased respiratory rate

11. A postpartum patient is breastfeeding and asks about contraception. Which method is least appropriate?

- A. Progestin-only pill
- B. Combined oral contraceptive pill
- C. Condom use
- D. Lactational amenorrhea method

12. Which position is correct for inserting a urinary catheter in a female patient?

- A. Prone position
- B. Dorsal recumbent (lithotomy) position
- C. Left lateral position
- D. Fowler's position

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13. Which is the CORRECT sequence for donning (putting on) PPE?

- A. Mask → Gown → Gloves → Goggles
- B. Gown → Mask → Goggles → Gloves
- C. Gloves → Gown → Mask → Goggles
- D. Goggles → Gloves → Gown → Mask

14. A patient in the emergency department has a suspected opioid overdose and is unresponsive. The nurse's first action is:

- A. Administer naloxone 2 mg IV push
- B. Establish airway and support breathing while naloxone is prepared
- C. Call family for drug history
- D. Perform a full head-to-toe assessment



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15. Which nursing intervention prevents aspiration in a patient receiving enteral tube feeding?

- A. Elevate head of bed 30–45° during and for 30–60 min after feeding
- B. Place patient in supine position during feeding
- C. Administer feeding rapidly to reduce duration
- D. Clamp the tube between feedings

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16. Which of the following is part of the nurse's LEGAL scope of practice in Qatar?

- A. Administering medications on physician orders
- B. Diagnosing medical conditions
- C. Prescribing controlled substances
- D. Ordering laboratory investigations independently

17. Which nursing intervention is most important for a patient with increased risk of falls in a hospital?

- A. Keep bed in lowest position with brakes locked and call light within reach
- B. Restrain the patient to prevent getting up alone
- C. Administer sedatives to keep the patient calm
- D. Keep the room dark at night

18. A patient in the immediate post-operative period has a urine output of 20 mL/hour for 2 consecutive hours. The nurse's PRIORITY action is:

- A. Document and recheck in 1 hour
- B. Notify the surgeon and increase IV fluid rate as ordered
- C. Encourage oral fluids
- D. Administer furosemide per protocol

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19. Which antidote is used to reverse heparin toxicity?

- A. Vitamin K
- B. Protamine sulfate
- C. Naloxone
- D. Flumazenil



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20. Which nursing action best prevents aspiration in a patient receiving nasogastric tube feedings?

- A. Positioning flat during feeding
- B. Elevating the head of bed to at least 30-45 degrees
- C. Checking tube placement weekly
- D. Administering feedings rapidly

21. The nurse is caring for a patient in DKA who has a serum potassium of 3.0 mEq/L. The nurse expects:

- A. IV regular insulin without potassium replacement
- B. Hold insulin until potassium is replaced to 3.5 mEq/L or higher
- C. Administer sodium bicarbonate
- D. Administer calcium gluconate

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22. The nurse is caring for a patient receiving chemotherapy who develops a WBC count of 1800 cells per microliter. The priority intervention is:

- A. Administer G-CSF as ordered and place in reverse isolation
- B. Restrict the patient to bed rest
- C. Encourage visitors to boost morale
- D. Administer prophylactic platelets

23. A mother asks about breastfeeding. Which statement by the nurse is CORRECT?

- A. Formula is nutritionally superior to breast milk
- B. Breastfeeding should be limited to 10 minutes per side
- C. Colostrum has no nutritional value and should be discarded
- D. Breastfeeding provides immunological protection via antibodies in milk

24. Under Qatar regulations, the maximum number of consecutive Prometric exam attempts allowed for a nurse is:

- A. 2
- B. 3
- C. 5
- D. Unlimited



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25. A nurse is caring for a patient with Meniere's disease during an acute attack. Which intervention is priority?

- A. Encourage ambulation
- B. Assist the patient to a safe position and reduce environmental stimulation
- C. Administer corticosteroids
- D. Apply warm compresses to the affected ear

26. Which national emergency number would a nurse working in Qatar use for emergency medical services?

- A. 999
- B. 911
- C. 112
- D. 998

27. Which nursing assessment is most important when a patient receives the first dose of an ACE inhibitor?

- A. Monitor serum glucose for 24 hours
- B. Monitor blood pressure and assess for angioedema
- C. Monitor urine output for 8 hours
- D. Assess serum calcium

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28. A patient receives morphine 4 mg IV. Fifteen minutes later respirations are 8/min and SpO₂ is 88%. The nurse's priority action is to:

- A. Administer oxygen via non-rebreather
- B. Administer naloxone as ordered
- C. Reposition the patient
- D. Notify the physician



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29. A patient with Alzheimer's disease becomes agitated and tries to remove their IV line. Which is the most appropriate nursing action?

- A. Apply wrist restraints immediately
- B. Identify and address the cause of agitation and use de-escalation techniques
- C. Administer a sedative without physician order
- D. Ignore the behavior and continue assessment

30. Dipsomania is defined as:

- A. Alternating manic and depressive attacks
- B. Compulsive, uncontrollable urge to drink alcohol
- C. Excessive talkative manic state
- D. Increased psychomotor activity



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Answer Key & Explanations

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1. C — Head

Approximately 60–70% of pancreatic cancers arise in the head of the pancreas, often causing obstructive jaundice.

2. A — 6 months (non-renewable)

The QCHP temporary license is valid for 6 months and is non-renewable. Nurses must complete the full licensing process before it expires.

3. D — AB positive

AB positive individuals have all ABO and Rh antigens, so they produce no ABO antibodies — they can receive any red blood cell type.

4. B — Lactulose and rifaximin

Hepatic encephalopathy is treated with lactulose to reduce ammonia absorption and rifaximin to reduce ammonia-producing gut bacteria.

5. B — I will empty the bag when it is one-third full.

Emptying when one-third full prevents leakage from excessive weight. Bags typically need changing every 3-5 days unless leaking.

6. D — Proceed with implied consent for life-saving emergency care and document thoroughly

In Qatar and internationally, implied consent operates in emergencies where a patient is unconscious — life-saving treatment proceeds and is thoroughly documented.

7. B — Gloves first then gown then mask or respirator last

CDC sequence: gloves most contaminated first, then gown, then hand hygiene, then face shield, then mask. This prevents transfer of pathogens to mucous membranes.

8. C — 1978

The Declaration of Alma-Ata was adopted at the International Conference on Primary Health Care in Alma-Ata, USSR, in 1978.

9. B — Clamp tubing then aspirate urine from the sampling port using sterile technique

Aspirating from the designated sampling port after clamping for 20-30 minutes with sterile syringe technique prevents introduction of organisms from the bag.

10. B — Increased bicarbonate retention by the kidneys

In chronic respiratory acidosis the kidneys compensate by retaining bicarbonate so HCO_3^- rises above 26 mEq/L to normalize pH.

11. B — Combined oral contraceptive pill

Combined oral contraceptives containing estrogen decrease milk supply and are not recommended in the first 6 weeks postpartum for breastfeeding mothers.



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12. B — Dorsal recumbent (lithotomy) position

The dorsal recumbent or lithotomy position provides optimal visualization of the female perineum for urinary catheter insertion.

13. B — Gown → Mask → Goggles → Gloves

CDC order for donning PPE: Gown first, then mask/respirator, then goggles/face shield, then gloves last.

14. B — Establish airway and support breathing while naloxone is prepared

Airway and breathing are always the first priority (ABC approach); naloxone is prepared and administered rapidly but only after airway is established.

15. A — Elevate head of bed 30–45° during and for 30–60 min after feeding

Semi-upright positioning (30–45°) uses gravity to prevent gastric reflux and aspiration of tube feeding into the lungs.

16. A — Administering medications on physician orders

In Qatar, nurses legally administer drugs per physician orders. Diagnosing, prescribing, and independently ordering tests are outside the RN scope of practice.

17. A — Keep bed in lowest position with brakes locked and call light within reach

Fall prevention: bed in lowest position, brakes locked, call light accessible, non-slip footwear, frequent toileting, and bed alarm use are evidence-based strategies.

18. B — Notify the surgeon and increase IV fluid rate as ordered

Oliguria (<30 mL/hr) in the post-operative period indicates inadequate renal perfusion — immediate physician notification is essential to prevent acute kidney injury.

19. B — Protamine sulfate

Protamine sulfate binds heparin (1 mg neutralises ~100 units heparin) and is the specific antidote for heparin overdose.

20. B — Elevating the head of bed to at least 30-45 degrees

HOB elevation of at least 30-45 degrees during and 30-60 min after feedings is the primary aspiration prevention measure.

21. B — Hold insulin until potassium is replaced to 3.5 mEq/L or higher

In DKA insulin drives potassium into cells worsening hypokalemia. Potassium must be at least 3.5 mEq/L before insulin is given safely to avoid fatal hypokalemia.

22. A — Administer G-CSF as ordered and place in reverse isolation

Neutropenia requires reverse protective isolation and G-CSF such as filgrastim to stimulate WBC production and prevent life-threatening infections.

23. D — Breastfeeding provides immunological protection via antibodies in milk

Breast milk, especially colostrum, contains IgA antibodies, lactoferrin, and other immune factors that protect the newborn from infections.

24. C — 5

QCHP regulations limit candidates to a maximum of 5 consecutive exam attempts. After 5 failures, additional eligibility review is required.



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25. B — Assist the patient to a safe position and reduce environmental stimulation

During Meniere's attack, vertigo causes severe dizziness and fall risk; safety positioning and reducing stimulation such as noise and light are the priority interventions.

26. A — 999

In Qatar, 999 is the emergency services number covering police, fire, and ambulance. Nurses should direct patients/visitors to call 999 for emergencies.

27. B — Monitor blood pressure and assess for angioedema

ACE inhibitors can cause first-dose hypotension and angioedema which is swelling of the lips, tongue, or throat and is a life-threatening complication requiring immediate intervention.

28. B — Administer naloxone as ordered

Naloxone reverses opioid-induced respiratory depression; this is a medical emergency requiring immediate reversal.

29. B — Identify and address the cause of agitation and use de-escalation techniques

Non-pharmacological de-escalation including identifying triggers such as pain, fear, or need for toileting is the first-line approach; restraints increase agitation and risk of injury.

30. B — Compulsive, uncontrollable urge to drink alcohol

Dipsomania is a compulsive craving for alcohol occurring in periodic episodes, a type of substance use disorder.



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