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QUESTION 1
Which of the following procedures is necessary to establish a definitive diagnosis of breast cancer?

A. Diaphanography
B. Mammography
C. Thermography
D. Breast tissue biopsy

Answer: D
Explanation:
(A) Diaphanography, also known as transillumination, is a painless, noninvasive imaging technique that involves shining a light source through the breast tissue to visualize the interior. It must be used inconjunction with a mammogram and physical examination.
(B) Mammography is a useful tool for screening but is not considered a means of diagnosing breast cancers.
(C) Thermography is a pictorial representation of heat patterns on the surface of the breast. Breast cancers appear as a "hot spot" owing to their higher metabolic rate.
(D) Biopsy either by needle aspiration or by surgical incision is the primary diagnostic technique for confirming the presence of cancer cells.

QUESTION 2
The nurse should know that according to current thinking, the most important prognostic factor for a client with breast cancer is:

A. Tumor size
B. Axillary node status
C. Client's previous history of disease
D. Client's level of estrogen-progesterone receptor assays

Answer: B
Explanation:
(A) Although tumor size is a factor in classification of cancer growth, it is not an indicator of lymph node spread.
(B) Axillary node status is the most important indicator for predicting how far the cancer has spread. If the lymph nodes are positive for cancer cells, the prognosis is poorer.
(C) The client's previous history of cancer puts her at an increased risk for breast cancer recurrence, especially if the cancer occurred in the other breast. It does not predict prognosis, however.
(D) The estrogen-progesterone assay test is used to identify present tumors being fedfrom an estrogen site within the body. Some breast cancers grow rapidly as long as there is an estrogen supply such as from the ovaries. The estrogen-progesterone assay test does not indicate the prognosis.

QUESTION 3
When teaching a sex education class, the nurse identifies the most common STDs in the United States as:

A. Chlamydia
B. Herpes genitalis
C. Syphilis
D. Gonorrhea

Answer: A
Explanation:
(A) Chlamydia trachomatis infection is the most common STD in the United States. The Centers for Disease Control and Prevention recommend screening of all high-risk women, such as adolescents and women with multiple sex partners.
(B) Herpes simplex genitalia is estimated to be found in 5-20 million people in the United States and is rising in occurrence yearly.
(C) Syphilis is a chronic infection caused by Treponema pallidum. Over the last several years the number of people infected has begun to increase.
(D) Gonorrhea is a bacterial infection caused by the organism Neisseria gonorrhoeae. Although gonorrhea is common, chlamydia is still the most common STD.

QUESTION 4
A 30-year-old male client is admitted to the psychiatric unit with a diagnosis of bipolar disorder. For the last 2 months, his family describes him as being "on the move," sleeping 3-4 hours nightly, spending lots of money, and losing approximately 10 lb.
During the initial assessment with the client, the nurse would expect him to exhibit which of the following?

A. Short, polite responses to interview questions
B. Introspection related to his present situation
C. Exaggerated self-importance
D. Feelings of helplessness and hopelessness

Answer: C
Explanation:
(A) During the manic phase of bipolar disorder, clients have short attention spans and may be abusive toward authority figures.
(B) Introspection requires focusing and concentration; clients with mania experience flight of ideas, which prevents concentration.
(C) Grandiosity and an inflated sense of self-worth are characteristic of this disorder.
(D) Feelings of helplessness and hopelessness are symptoms of the depressive stage of bipolar disorder.

QUESTION 5
Nursing care for the substance abuse client experiencing alcohol withdrawal delirium includes:

A. Maintaining seizure precautions
B. Restricting fluid intake
C. Increasing sensory stimuli
D. Applying ankle and wrist restraints

Answer: A
Explanation:
(A) These clients are at high risk for seizures during the 1st week after cessation of alcohol intake.
(B) Fluid intake should be increased to prevent dehydration.
(C) Environmental stimuli should be decreased to prevent precipitation of seizures.
(D) Application of restraints may cause the client to increase his or her physical activity and may eventually lead to exhaustion.

QUESTION 6
A psychotic client who believes that he is God and rules all the universe is experiencing which type of delusion?

A. Somatic
B. Grandiose
C. Persecutory
D. Nihilistic

Answer: B
Explanation:
(A) These delusions are related to the belief that an individual has an incurable illness.
(B) These delusions are related to feelings of self-importance and uniqueness.
(C) These delusions are related to feelings of being conspired against.
(D) These delusions are related to denial of self-existence.

QUESTION 7
A client confides to the nurse that he tasted poison in his evening meal.
This would be an example of what type of hallucination?

A. Auditory
B. Gustatory
C. Olfactory
D. Visceral

Answer: B
Explanation:
(A) Auditory hallucinations involve sensory perceptions of hearing.
(B) Gustatory hallucinations involve sensory perceptions of taste.
(C) Olfactory hallucinations involve sensory perceptions of smell.
(D) Visceral hallucinations involve sensory perceptions of sensation.

QUESTION 8
A schizophrenic client has made sexual overtures toward her physician on numerous occasions. During lunch, the client tells the nurse, "My doctor is in love with me and wants to marry me." This client is using which of the following defense mechanisms?

A. Displacement
B. Projection
C. Reaction formation
D. Suppression

Answer: B
Explanation:
(A) Displacement involves transferring feelings to a more acceptable object.
(B) Projection involves attributing one's thoughts or feelings to another person.
(C) Reaction formation involves transforming an unacceptable impulse into the opposite behavior.
(D) Suppression involves the intentional exclusion of unpleasant thoughts or experiences.

QUESTION 9
Hypoxia is the primary problem related to near-drowning victims. The first organ that sustains

irreversible damage after submersion in water is the:

A. Kidney (urinary system)
B. Brain (nervous system)
C. Heart (circulatory system)
D. Lungs (respiratory system)

Answer: B
Explanation:
(A) The kidney can survive after 30 minutes of water submersion.
(B) The cerebral neurons sustain irreversible damage after 4-6 minutes of water submersion.
(C) The heart can survive up to 30 minutes of water submersion.
(D) The lungs can survive up to 30 minutes of water submersion.

QUESTION 10
One of the most dramatic and serious complications associated with bacterial meningitis is Waterhouse- Friderichsen syndrome, which is:

A. Peripheral circulatory collapse
B. Syndrome of inappropriate antidiuretic hormone
C. Cerebral edema resulting in hydrocephalus
D. Auditory nerve damage resulting in permanent hearing loss

Answer: A
Explanation:
(A) Waterhouse-Friderichsen syndrome is peripheral circulatory collapse, which may result in extensive and diffuse intravascular coagulation and thrombocytopenia resulting in death.
(B) Syndrome of inappropriate antidiuretic hormone is a complication of meningitis, but it is not Waterhouse-Friderichsen syndrome.
(C) Cerebral edema resulting in hydrocephalus is a complication of meningitis, but it is not Waterhouse-Friderichsen syndrome.
(D) Auditory nerve damage resulting in permanent hearing loss is a complication of meningitis, but it is not Waterhouse- Friderichsen syndrome.

QUESTION 11
An 8-year-old child comes to the physician's office complaining of swelling and pain in the knees. His mother says, "The swelling occurred for no reason, and it keeps getting worse." The initial diagnosis is Lyme disease.
When talking to the mother and child, questions related to which of the following would be important to include in the initial history?

A. A decreased urinary output and flank pain
B. A fever of over 103F occurring over the last 2-3 weeks
C. Rashes covering the palms of the hands and the soles of the feet
D. Headaches, malaise, or sore throat

Answer: D
Explanation:
(A) Urinary tract symptoms are not commonly associated with Lyme disease.
(B) A fever of 103F is not characteristic of Lyme disease.
(C) The rash that is associated with Lyme diseasedoes not appear on the palms of the hands and the soles of the feet.

(D) Classic symptoms of Lyme disease include headache, malaise, fatigue, anorexia, stiff neck, generalized lymphadenopathy, splenomegaly, conjunctivitis, sore throat, abdominal pain, and cough.

QUESTION 12
The most commonly known vectors of Lyme disease are:

A. Mites
B. Fleas
C. Ticks
D. Mosquitoes

Answer: C
Explanation:
(A) Mites are not the common vector of Lyme disease.
(B) Fleas are not the common vector of Lyme disease.
(C) Ticks are the common vector of Lyme disease.
(D) Mosquitoes are not the common vector of Lyme disease.

QUESTION 13
A laboratory technique specific for diagnosing Lyme disease is:

A. Polymerase chain reaction
B. Heterophil antibody test
C. Decreased serum calcium level
D. Increased serum potassium level

Answer: A
Explanation:
(A) Polymerase chain reaction is the laboratory technique specific for Lyme disease.
(B) Heterophil antibody test is used to diagnose mononucleosis.
(C) Lyme disease does not decrease the serum calcium level.
(D) Lyme disease does not increase the serum potassium level.

QUESTION 14
The nurse would expect to include which of the following when planning the management of the client with Lyme disease?

A. Complete bed rest for 6-8 weeks
B. Tetracycline treatment
C. IV amphotericin B
D. High-protein diet with limited fluids

Answer: B
Explanation:
(A) The client is not placed on complete bed rest for 6 weeks.
(B) Tetracycline is the treatment of choice for children with Lyme disease who are over the age of 9.
(C) IV amphotericin B is the treatment for histoplasmosis.
(D) The client is not restricted to a high-protein diet with limited fluids.

QUESTION 15
A 3-year-old child is hospitalized with burns covering her trunk and lower extremities. Which of the following would the nurse use to assess adequacy of fluid resuscitation in the burned child?

A. Blood pressure
B. Serum potassium level
C. Urine output
D. Pulse rate

Answer: C
Explanation:
(A) Blood pressure can remain normotensive even in a state of hypovolemia.
(B) Serum potassium is not reliable for determining adequacy of fluid resuscitation.
(C) Urine output, alteration in sensorium, and capillary refill are the most reliable indicators for assessing adequacy of fluid resuscitation.
(D) Pulse rate may vary for many reasons and is not a reliable indicator for assessing adequacy of fluid resuscitation.

QUESTION 16
Proper positioning for the child who is in Bryant's traction is:

A. Both hips flexed at a 90-degree angle with the knees extended and the buttocks elevated off the bed
B. Both legs extended, and the hips are not flexed
C. The affected leg extended with slight hip flexion
D. Both hips and knees maintained at a 90-degree flexion angle, and the back flat on the bed

Answer: A
Explanation:
(A) The child's weight supplies the countertraction for Bryant's traction; the buttocks are slightly elevated off the bed, and the hips are flexed at a 90-degree angle. Both legs are suspended by skin traction.
(B) The child in Buck's extension traction maintains the legs extended and parallel to the bed.
(C) The child in Russell traction maintains hip flexion of the affected leg at the prescribed angle with the leg extended.
(D) The child in "90-90" traction maintains both hips and knees at a 90-degree flexion angle and the back is flat on the bed.

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