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Nursing

MSNCB

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Question: 64

Two hours ago the client had a left thoracotomy with a lobe resection. The sanguineous drainage in the chest tube collection chamber is 325 mL. The nurse recognizes that this is:

- A. Normal chest tube drainage
- B. Indicative of a pneumothorax
- C. Chyle drainage
- D. A sign of hemorrhage

Answer: D

Sanguineous drainage of greater than 100 mL/hr in the client who is in the immediate postoperative period following a thoracotomy indicates hemorrhage. The physician should be notified immediately. Normal chest tube drainage should be less than 100 mL/hr. A pneumothorax occurs when there is air between the visceral and the parietal pleura, which causes compression of the lung and results in acute respiratory distress. Chyle drainage is a milky color that results from disruption of the lymphatic drainage system.

Question: 65

65. In a client with right lung pneumonia, the nurse should encourage which position to facilitate optimal oxygenation?

- A. Prone position
- B. Supine position with head elevated at 30 degrees
- C. Positioned with the right side dependent
- D. Positioned with the left side dependent

Answer: D

Positioned with the left side dependent. With unilateral lung disease, the example to remember is "good lung down." Since ventilation and perfusion are gravity dependent, enhancing ventilation and perfusion to healthy lung tissue and alveoli will enhance oxygenation. Supine positioning would provide near equal ventilation and perfusion to both lungs. In the diseased lung, excess fluid and fibrosis inhibit gas exchange at the pulmonary capillary membrane, thereby diminishing oxygenation.

Question: 66

What is a normal tidal volume for a client on a ventilator?

A. 5-7 ml/kg

B. 7-9 ml/kg

C. 9-11 ml/kg

D. 11-13 ml/kg

Answer: B

Normal tidal volume is 7-9 ml/kg or about 500 ml for an average-sized man (approximately 75 kg).

Question: 67

- 67. A client with a left leg fracture is to be taught the three-point gait before discharge. Which instruction should the nurse give to this client?
- A. "your right crutch, swing the left foot forward, advance the left crutch, and then bring the right foot forward."
- B. "Move your right crutch and left foot forward together, and then swing the right foot and left crutch in one movement."
- C. "While partially bearing weight on your left leg, advance both crutches and then bring your right leg forward."
- D. "Using one movement, advance your left foot and both crutches and then bring right leg forward."

Answer: D

In the three-point gait, both crutches and the affected "badâ" leg and foot move together, with the unaffected "good" • leg and foot following. Choices A and B are incorrect because the crutches are moved simultaneously, not independently. Choice C is incorrect because the client should not bear weight on the fractured leg when using the three-point gait.

Question: 68

- 68. Which assessment finding by the nurse has the most serious implication for a 70-year-old client with emphysema?
- A. Increased anterior-posterior diameter of the chest
- B. Bilateral crackles throughout the lung fields
- C. Pursed-lip breathing
- D. Circumoral cyanosis

Answer: B

Bilateral crackles throughout the lung fields indicate excessive pulmonary fluid requiring acute intervention. Increased anterior-posterior diameter of the chest, pursed-lip breathing, and circumoral cyanosis are chronic findings in clients with emphysema. They do not indicate acute changes in the client's condition.

Question: 69

The nurse is encouraging a client who has undergone an amputation to immediately fit a prosthesis. The advantage for this immediate action is:

- A. Ability to ambulate sooner
- B. Less chance of phantom limb sensation
- C. Dressing changes are not necessary
- D. Better fit of the prosthesis

Answer: A

When the prosthesis is in place immediately following surgery, the client can stand up several hours postoperatively and walk the next day. The operative site is closed to outside contamination and benefits from improved circulation due to ambulation.

Question: 70

Mr. Sanchez visited a clinic for his timely medical check-up and brought with him his hematology result. He informed the nurse that his physician is trying to assess him for polycythemia vera. The laboratory findings for a client with polycythemia vera include major and minor criteria. What is the major or defining hematological finding?

- A. Leukocytosis >12,000/mm3
- B. Thrombocytosis >400,000/mm3
- C. RBC count >6 million/mm3
- D. Elevated leukocyte alkaline phosphatase

Answer: C

Polycythemia vera is a chronic myeloproliferative disorder characterized mainly by erythrocytosis (increased RBC mass). Hemoglobin and hematocrit will be elevated. Choices A, B, and D are also laboratory findings, but they are considered minor criteria in this condition.



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