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QUESTION 1

The nurse\\'s first action upon discovery of an electrical fire should be which of the following?

- A. Disconnect the electrical power if it can be performed safely.
- B. Smother the source with an object such as a blanket.
- C. Saturate the source with water or other readily available liquid.
- D. Activate the fire alarm immediately.

Correct Answer: A

If it is safe to do so, the nurse should disconnect electrical devices from the power source.

Smothering with a blanket is not indicated in an electrical fire and might serve to fuel the fire, just as water or other liquids might incite an explosion or flames. The fire alarm should be activated promptly, and this should be the next action after disconnecting the electrically powered equipment.

QUESTION 2

A thirty-seven-year-old female in room 307 has a diagnosis of acquired immune deficiency syndrome (AIDS).

Which of the following situations requires nurse intervention?

- A. A certified nursing assistant states, "The patient in 307 is not wearing gloves shaving her legs."
- B. A nursing assistant at the nursing station states, "The patient in 307 has a respiratory rate of 16."
- C. A nursing student in the cafeteria states, "Dr. Jones told the patient in room 307 that she was going to die."
- D. A certified nursing assistant states, "Dr. Jones hasn\\'t made rounds this morning."

Correct Answer: C

Patient confidentiality should be observed, especially in public places.

The nurse should tell the nursing student do not discuss confidential information in public.

QUESTION 3

In the United States, several definitions of death are currently being used.

The definition that uses apnea testing and pupillary responses to light is termed _____

- A. whole brain death
- B. heart-lung death

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C. circulatory death

D. higher brain death

Correct Answer: A

Most protocols require two separate clinical examinations, including induction of painful stimuli, papillary responses to light, oculovestibular testing, and apnea testing.

Choices "heart-lung death" and "higher brain death" have no specific test required.

Choice "circulatory death" is not a current definition of death in the United States.

QUESTION 4

An Rh-negative woman with previous sensitization has delivered an Rh-positive fetus.

Which of the following nursing actions should be included in the client\\'s care plan?

- A. emotional support to help the family deal with feelings of guilt about the infant\\'s condition
- B. administration of MICRhoGam to the woman within 72 hours of delivery
- C. administration of Rh-immune globulin to the newborn within 1 hour of delivery
- D. lab analysis of maternal Direct Coombs\\' test

Correct Answer: A

If a woman is sensitized to the Rh factor, it poses a threat to any Rh-positive fetus she delivers. The nurse needs to provide emotional support to help the family deal with the infant\\'s condition, which might involve a host of conditions that could lead to death or marked neurological damage. RhoGam is never given to a woman already sensitized. If not previously sensitized, MICRhoGam (a smaller dose of Rh immune globulin) is given after an abortion or ectopic pregnancy to prevent sensitization. If not sensitized, RhoGam is given to the woman within 72 hours of delivery. Rhimmune globulin is never given to the newborn. To determine if sensitization has occurred, an Indirect Coombs\\' is drawn on the mother to measure the number of Rh-positive antibodies.

QUESTION 5

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- A. highly similar to disseminated intravascular coagulation (DIC)
- B. caused by the over production of platelets
- C. a bleeding disorder that is characterized with too few platelets
- D. treated with immune system boosting medications

Correct Answer: C

Idiopathic thrombocytopenia purpura is bleeding disorder that is characterized with too few platelets, not the over



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production of platelets. Disseminated intravascular coagulation (DIC) is characterized with blood coagulation and not bleeding. The treatments of idiopathic thrombocytopenia purpura can include immune system depressants, not stimulants, prednisone, high-dose gamma globulin and anti RhD therapy.

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