



# NCLEX-PN<sup>Q&As</sup>

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### QUESTION 1

The LPN is taking care of a female patient scheduled to go for an MRI later today. Which of these would require further action from the nurse?

- A. The patient ate juice and a bagel 5 hours ago.
- B. The patient has a hemoglobin level of 11.8.
- C. The patient has a cochlear implant.
- D. The patient has a broken leg.

Correct Answer: C

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### QUESTION 2

A pregnant client has congenital heart disease.

The nurse should expect to see which alterations in this client's diet during pregnancy?

- A. reduced calories and reduced fat
- B. caffeine and sodium restrictions
- C. decreased protein and increased complex carbohydrates
- D. fluid restriction and reduced calories

Correct Answer: B

Caffeine might increase heart rate that is already stressed due to pregnancy. Sodium can cause fluid retention. Both might need to be restricted. The other choices are incorrect because calories, fat, and protein are not usually decreased due to the risk of nutrient deficiencies.

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### QUESTION 3

The home health nurse has made a visit to an 85-year-old female client's home who has recently had surgery to replace her left knee. The client has been discharged from a rehab facility and has been able to walk on her own. The nurse assesses the need for teaching related to fall prevention.

What should the nurse include in this teaching plan?

- A. The client should remove all scatter rugs from the floor and minimize clutter.
- B. The client should not get up and move around the house.
- C. The client does not need to install a raised toilet and grab bar because she is able to walk on her own.
- D. The client should wear a robe and socks while walking in the house.



Correct Answer: A

Rugs and clutter are a primary cause of falls in the home and should be eliminated if possible to decrease the risk of a fall. The elderly and those with gait issues are at an increased risk for a fall at home. The client should have a raised toilet seat and grab bars available in the bathroom to aid in movement in this potential slippery area of the home. Some clients find it difficult to rise up and down from the toilet and to get in and out of the shower. These items are all important in maintaining safety in the home. The client should not limit her movement within the home unless ordered by the physician. This decreases the ability of the client to perform activities of daily living and hinders the client's return to a normal lifestyle after surgery. The client should not wear baggy clothing such as long robes, and the client should not wear socks on slippery floors. These items can cause the client to trip, slip, or fall.

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#### QUESTION 4

A high school nurse observes a 14-year-old female rubbing her scalp excessively in the gym. The most appropriate course of action for the nurse to do is \_\_\_\_\_.

- A. Request a private evaluation of the female's scalp from her parents.
- B. Contact the female's parents about the observations.
- C. Observe the hairline and scalp for possible signs of lice.
- D. Contact the student's physician.

Correct Answer: C

Observation of the student's hair is the next step.

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#### QUESTION 5

Which cultural group has the highest incidence of inflammatory bowel disease (IBD)?

- A. Asians B. Caucasians
- C. Hispanics
- D. African Americans

Correct Answer: B

Caucasians have the highest incidence of inflammatory bowel disease (IBD).

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