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QUESTION 1

A client is 2 hours post ventriculoperitoneal shunt placement. How should the nurse position the client?

- A. Head of bed elevated 30 degrees on nonoperative side
- B. Head of bed elevated 30 degrees on operative side
- C. Bed flat on operative side
- D. Bed flat on nonoperative side

Correct Answer: D

(A) Elevation of head on nonoperative side would be the position for the late postoperative period. (B) Positioning on operative side puts pressure on the suture lines and on the shunt valve. Elevation of head in immediate postoperative period may cause rapid reduction of cerebrospinal fluid. (C) Placement on operative side puts pressure on the suture lines and shunt valve. (D) Flat position on nonoperative side in the immediate postoperative period prevents pressure on shunt valve and rapid reduction in cerebrospinal fluid.

QUESTION 2

At her monthly prenatal visit, a client reports experiencing heartburn. Which nursing measure should be included in her plan of care to help alleviate it?

- A. Restrict fluid intake.
- B. Use Alka-Seltzer as necessary.
- C. Eat small, frequent bland meals.
- D. Lie down after eating.

Correct Answer: C

(A) At least eight glasses of fluid per day are encouraged to help dilute stomach contents, thereby decreasing irritation. (B) Alka Seltzer contains aspirin, which is irritating to gastric mucosa, and therefore should be avoided. (C) Small, frequent bland meals help to decrease gastric pressure and to prevent reflux. (D) Lying down after meals may cause gastric reflux and prevents optimal gastric emptying.

QUESTION 3

An 83-year-old client has been hospitalized following a fall in his home. He has developed a possible fecal impaction. Which of the following assessment findings would be most indicative of a fecal impaction?

- A. Boardlike, rigid abdomen
- B. Loss of the urge to defecate
- C. Liquid stool



D. Abdominal pain

Correct Answer: C

(A) A boardlike, rigid abdomen would point to a perforated bowel, not a fecal impaction. (B) When a client is fecally impacted, a common symptom is the urge to defecate but the inability to do so. (C) When an impaction is present, only liquid stool will be able to pass around the impacted site. (D) Abdominal pain without distention is not a sign of a fecal impaction.

QUESTION 4

A 52-year-old client is scheduled for a small-bowel resection in the morning. In conjunction with other preoperative preparation, the nurse is teaching her diaphragmatic breathing exercises. She will teach the client to:

- A. Inhale slowly and deeply through the nose until the lungs are fully expanded, hold the breath a couple of seconds, and then exhale slowly through the mouth. Repeat 2? more times to complete the series every 1? hours while awake
- B. Purse the lips and take quick, short breaths approximately 18?0 times/min
- C. Take a large gulp of air into the mouth, hold it for 10?5 seconds, and then expel it through the nose. Repeat 4? times to complete the series
- D. Inhale as deeply as possible and then immediately exhale as deeply as possible at a rate of approximately 20?4 times/min

Correct Answer: A

(A) This is the correct method of teaching diaphragmatic breathing, which allows full lung expansion to increase oxygenation, prevent atelectasis, and move secretions up and out of the lungs to decrease risk of pneumonia. (B) Quick, short breaths do not allow for full lung expansion and movement of secretions up and out of the lungs. Quick, short breaths may lead to O₂ depletion, hyperventilation, and hypoxia. (C) Expelling breaths through the nose does not allow for full lung expansion and the use of diaphragmatic muscles to assist in moving secretions up and out of the lungs. (D) Inhaling and exhaling at a rate of 20?4 times/min does not allow time for full lung expansion to increase oxygenation. This would most likely lead to O₂ depletion and hypoxia.

QUESTION 5

The doctor has ordered a restricted fluid intake for a 2- year-old child with a head injury. Normal fluid intake for a child of 2 years is:

- A. 900 mL/24 hr
- B. 1300 mL/24 hr
- C. 1600 mL/24 hr
- D. 2000 mL/24 hr

Correct Answer: C

(A, B, D) These values are incorrect. Normal intake for a child of 2 years is about 1600 mL in 24 hours. (C) This value is correct. Normal intake for a child of 2 years is about 1600 mL in 24 hours.



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