



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

National Council Licensure Examination(NCLEX-PN)

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### QUESTION 1

Which cardiac arrhythmia can be either acquired or congenital and can spontaneously disappear on its own or lead to ventricular fibrillation?

- A. Wenckebach
- B. Premature arterial contractions
- C. Torsades de pointes
- D. Premature ventricular contractions

Correct Answer: C

Torsades de pointes, a polymorphic ventricular tachycardia, can be either congenital or acquired; at times, it can spontaneously terminate but it frequently leads to ventricular fibrillation. In some cases, cardiac death can occur with the first episode.

All of the other cardiac arrhythmias, or dysrhythmias, are acquired and not congenital.

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### QUESTION 2

A client comes to the clinic for assessment of his physical status and guidelines for starting a weight-reduction diet. The client's weight is 216 pounds and his height is 66 inches.

The nurse identifies the BMI (body mass index) as \_\_\_\_\_.

- A. within normal limits, so a weight-reduction diet is unnecessary
- B. lower than normal, so education about nutrient-dense foods is needed
- C. indicating obesity because the BMI is 35
- D. indicating overweight status because the BMI is 27

Correct Answer: C

Obesity is defined by a BMI of 30 or more with no co-morbid conditions. It is calculated by utilizing a chart or nomogram that plots height and weight.

This client's BMI is 35, indicating obesity.

Goals of diet therapy are aimed at decreasing weight and increasing activity to healthy levels based on a client's BMI, activity status, and energy requirements.

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### QUESTION 3



Which of the following actions should a nurse take first for a client who has just vomited 300 cc of bright red blood?

- A. Document the vomiting.
- B. Increase the IV fluids.
- C. Get a complete blood count.
- D. Check the blood pressure.

Correct Answer: D

The blood pressure should be checked first for a client who has just vomited 300 cc of bright red blood, to determine whether the client is hypotensive.

The other actions can be taken later.

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#### QUESTION 4

A gunshot wound victim has been brought to your unit. He has chosen to be marked as confidential due to safety concerns.

Which of these actions would be inappropriate for you to do as the nurse?

- A. Tell the patient's mother he is okay when she calls to ask about him being on the unit.
- B. Keep the patient's name/information out of public areas such as the nurses' station.
- C. Remove the patient from confidential status when he asks to be removed.
- D. Deny that the patient is on the unit when visitors come or call.

Correct Answer: A

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#### QUESTION 5

A stool culture reveals Shigella.

What corollary should the nurse recognize regarding this bacterial infection?

- A. People who have been in contact with the client need to be tested.
- B. Shigella is an airborne infection.
- C. Shigella is a bacteria sometimes found in stagnant water.
- D. The nurse should wear a one-way breathing apparatus when giving client care.

Correct Answer: C

Shigella is a bacteria sometimes found in stagnant water.



Transmission of Shigella is typically oral-fecal, so good hand washing and the use of gloves are the best means of prevention when caring for a client with Shigella.

The bacteria can be found in food and water contaminated by fecal material.

Incidences of Shigella are reportable in many states.

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