



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

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### QUESTION 1

An elective saline abortion has been performed on a 3- week primigravida. Following the procedure, the nurse should be alert for which early side effect?

- A. Water satiety
- B. Thirst
- C. Edema
- D. Diabetes insipidus

Correct Answer: B

(A) If the client is experiencing water satiety, there is no more desire for water. (B) Absorption of saline into circulation rather than into amniotic sac increases serum sodium and desire for water. (C) Edema can be a late side effect caused by water intoxication. (D) Diabetes insipidus occurs as a result of deficient antidiuretic hormone.

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### QUESTION 2

A 56-year-old psychiatric inpatient has had recurring episodes of depression and chronic low self-esteem. She feels that her family does not want her around, experiences a sense of helplessness, and has a negative view of herself. To assist the client in focusing on her strengths and positive traits, a strategy used by the nurse would be to:

- A. Tell the client to attend all structured activities on the unit
- B. Encourage or direct client to attend activities that offer simple methods to attain success
- C. Increase the client's self-esteem by asking that she make all decisions regarding attendance in group activities
- D. Not allow any dependent behaviors by the client because she must learn independence and will have to ask for any assistance from staff

Correct Answer: B

(A)  
The nurse should encourage activities gradually, as client's energy level and tolerance for shared activities improve. (B) Activities that focus on strengths and accomplishments, with uncomplicated tasks, minimize failure and increase self-worth. (C) Asking a client to set a goal to make all decisions about attending group activities is unrealistic, and such decisions are not always under the client's control; this sets up the client for further failure and possibly decreased self-worth.

(D)

Encouragement toward independence does promote increased feelings of selfworth; however, clients may need assistance with decision making and problem solving for various situations and on an individual basis.

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### QUESTION 3



A client is experiencing mucosal cell damage secondary to chemotherapy. Because of mucosal ulcers, eating has become increasingly uncomfortable for her. Which of the following interventions would be most effective in getting her to eat?

- A. Local anesthetics or mouth washes applied to ulcers 30 minutes prior to meals
- B. A bland, moist, soft diet
- C. Staying with the client and providing distraction during meals
- D. Cleaning the mouth carefully with lemon glycerin swabs and milk of magnesia before meals

Correct Answer: B

(A) Local anesthetics do temporarily relieve the pain but leave an unpleasant taste and numb feeling that are not conducive to eating. (B) Such a diet is less irritating to the damaged mucosa and is easier for the child to tolerate. (C) This intervention is helpful if the child has only anorexia. It does not work if the type and texture of the food increase oral discomfort. (D) Lemon glycerin swabs and milk of magnesia dry the oral mucosa and should be avoided.

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#### QUESTION 4

In client teaching, the nurse should emphasize that fetal damage occurs more frequently with ingestion of drugs during:

- A. First trimester
- B. Second trimester
- C. Third trimester
- D. Every trimester

Correct Answer: A

(A) Organogenesis occurs in the first trimester. Fetus is most susceptible to malformation during this period. (B) Organogenesis has occurred by the second trimester. (C) Fetal development is complete by this time. (D) The dangerous period for fetal damage is the first trimester, not the entire pregnancy.

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#### QUESTION 5

Forty-eight hours after a thyroidectomy, a female client complains of numbness and tingling of the toes and fingers. The nurse notes upper arm and facial twitching. The nurse needs to:

- A. Report the findings to the physician
- B. Assist the client to do range of motion exercises
- C. Check the client's potassium level
- D. Administer the as-needed dose of phenytoin (Dilantin)

Correct Answer: A

(A) Muscular hyperactivity and parasthesias may indicate hypocalcemic tetany and require immediate administration of



calcium gluconate. Tetany can occur if the parathyroid glands were erroneously excised during surgery. (B) Range of motion exercises are not appropriate to presenting symptoms. (C) These characteristics are not usual signs of potassium imbalance, but of calcium imbalance. (D) Phenytoin is indicated for seizure activity mainly of neurological origin.

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