1. How many times should the medication record be compared with the label on the medication container before the medication is to be taken to the patient’s bedside?
   A. One time
   B. Two times
   C. Three times
   D. Four times

2. The reversal agent for Coumadin is:
   A. Protamine Sulfate
   B. Vitamin K
   C. Romazicon
   D. Narcan

3. In a court of law, the following statement related to medication documentation would be true: "If it was not documented, it was not done."
   A. True
   B. False

4. It is not necessary to give an explanation to the patient of the purpose of the medication being administered.
   A. True
   B. False

5. What do crackles auscultated during lung sound assessment signify?
   A. Pneumonia
   B. MI
   C. COPD
   D. Asthma

6. Hepatomegaly, peripheral edema, and jugular vein distention are clinical signs of right-sided heart failure.
   A. True
   B. False

7. Which of the following is appropriate for acute M.I. treatment?
   A. Morphine
   B. Oxygen
   C. Nitroglycerin
   D. All of the above

8. For a patient in P.E.A. (Pulseless electrical activity), which medication would be given first?
   A. Dopamine
   B. Lidocaine
   C. Amiodarone
   D. Epinephrine
9. The nurse checks on a 45-year-old female patient with Insulin-Dependent Diabetes Mellitus and finds her lying on the bed, pale, obtunded, and diaphoretic. Her heart rate is 136 beats-per-minute. What action should the nurse take first?

   A. Check blood glucose level with bedside device
   B. Administer an I.V. bolus of insulin
   C. Administer an I.V. bolus of 50% dextrose solution
   D. Administer an I.V. bolus of mannitol

10. Mr. Thomas is receiving Lasix by direct injection through the heplock. It is important for the nurse to know:

    A. The medication can be given in less than one min IV/P
    B. To check patient's pulse before administration and hold if HR > 100
    C. To maintain accurate I&O
    D. To monitor the patient's respiratory rate after the medication is given

11. The nurse should know that each patient may react to the same drug differently.

    A. True
    B. False

12. The physician orders the removal of an in-dwelling catheter on the second post-operative day for a patient with a prostatectomy. The patient complains of pain and dribbling of urine the first time he voids. The nurse should tell the patient that:

    A. Using warm compresses over the bladder will lessen the discomfort
    B. He will start perineal exercises in a few days to help relieve his symptoms
    C. If the symptoms don't improve, the catheter will have to be reinserted
    D. His complaints are common and will improve over the next few days

13. A post-operative patient has an order for Demerol (Meperidine) 75mg and Phenergan (Promethazine) 25mg IM every 3-4 hours as needed for pain. The combination of the two medications produces a/an:

    A. Agonist effect
    B. Synergistic effect
    C. Antagonist effect
    D. Excitatory effect

14. A patient with breast cancer is returned to the room following a right total mastectomy. The nurse should:

    A. Elevate the patient's right arm on pillows
    B. Place the patient's right arm in a dependent sling
    C. Keep the patient's right arm on the bed beside her
    D. Place the patient's right arm across her body

15. An elderly patient has a stage II pressure ulcer on her sacrum. During an assessment of the patient's skin, the nurse would expect to find:

    A. A deep crater with a nonpainful wound base
    B. A cratered area with a nonpainful wound base
    C. Nonblanchable redness with tenderness and pain
    D. A break in the skin with blisters, redness and induration
16. A patient with dementia is experiencing confusion late in the afternoon and before bedtime. The nurse is aware that the patient is experiencing what is known as:
   A. Chronic fatigue syndrome
   B. Normal aging
   C. Sundowning
   D. Delusions

17. The nurse is assessing the patient with a total knee replacement 2 hours post-operative. Which information requires notification of the physician?
   A. Bleeding on the dressing in 3cm in diameter
   B. The patient has a temperature of 100.6 °F
   C. The patient's hematocrit is 28%
   D. The urinary output has been 60 during the last 2 hours

18. A patient develops subcutaneous emphysema post-operatively following a laryngectomy. This is most readily detected by:
   A. Palpating crackles underneath the surface of the skin
   B. Auscultation of the lung fields
   C. Evaluating the blood gases
   D. Reviewing the chest x-ray

19. The nurse is caring for a patient who is about to undergo a lumbar puncture procedure. Planned care following the procedure should include:
   A. Having the patient lie in the supine position for 6 to 12 hours
   B. Encouraging the patient to ambulate every hour for 6 to 8 hours
   C. Maintaining the patient in the Trendelenburg's position for 4 hours
   D. Placing the patient in High-Fowler's position immediately after the procedure

20. Before irrigating a patient's nasogastric tube, the nurse must first:
   A. Assess breath sounds
   B. Instill 15 ml of normal saline
   C. Auscultate for bowel sounds
   D. Check the tube for proper placement

21. You are caring for a patient with dyspnea. Which position would provide the greatest respiratory capacity for this patient?
   A. Supine
   B. Prone
   C. Leaning forward, supporting the upper body on a table
   D. Reclining

22. Following a cardiac catheterization, your patient returns with a pressure dressing over the left groin. The patient is to remain flat in bed for 6 hours with the leg kept straight. These measures are necessary to prevent:
   A. Orthostatic hypotension
   B. Headache and disorientation
   C. Bleeding at the catheterization site
   D. Infiltration of radiopaque dye into the tissue
23. A patient admitted for surgery has pre-op orders for shaving and washing the surgical site. Skin preparation is ordered pre-operatively primarily to:
   A. Improve the visualization of surgical landmarks
   B. Reduce the amount of bacteria at the surgical site
   C. Promote the adherence of surgical tape
   D. Prevent a reaction to the adhesive on the tape

24. Which of these findings would indicate that a patient's IV has infiltrated and requires restarting?
   A. The flow of the fluid in the drip chamber has stopped
   B. Redness appears along the vein from the needle site upward
   C. Swelling is noted proximal to the insertion site
   D. A back flow of blood is in the IV tubing

25. A patient who is recovering from surgery is encouraged to move his/her legs. Contraction of the leg muscles can help prevent which of the following complications?
   A. Pleurisy
   B. Portal hypertension
   C. Hypostatic pneumonia
   D. Pulmonary emboli

26. Your patient is experiencing bradycardia. You would expect the pulse to be within which of the following ranges?
   A. 40-60 beats/minute
   B. 60-80 beats/minute
   C. 80-100 beats/minute
   D. 100-120 beats/minute

27. A patient is scheduled to have surgery for gall stones. Prior to surgery, the physician orders Vitamin K IM. What is the purpose of this pre-operative injection?
   A. To improve the clotting ability of the blood
   B. To promote connective tissue healing
   C. As an adjunct to other medications
   D. To aid in dissolving calculi

28. Which special precaution will the nurse take when caring for a patient with Hepatitis?
   A. Use gloves when removing the bed pan
   B. Wear a mask while in the room
   C. Prevent droplet spread of the infection
   D. Sterilize any equipment used in the patient's room

29. A patient has undergone abdominal surgery. To help decrease the possibility of developing hypostatic pneumonia, the nurse should take which of the following actions during the immediate post-operative period?
   A. Splint the patient's incisional area while he/she coughs and breathes deeply
   B. Encourage the patient to exhale through pursed lips
   C. Support the patient in an orthopneic position
   D. Encourage the patient to blow into an incentive spirometer four times daily
30. The most common complication the nurse would assess for a post-operative patient following a TURP is:
   A. Hemorrhage
   B. Pneumonia
   C. Thrombophlebitis
   D. Fluid imbalance

31. What is the number one therapeutic measure used to prevent post-operative phlebitis in the calves of post surgical patients?
   A. Obtaining a post-op order for antiembolitic stockings
   B. Maintain the knee gatch of the patient's bed in a slightly elevated position
   C. Support the patient's legs so that they are always above the heart
   D. Encourage frequent dorsiflexion throughout the first few post-op days

32. Which of the following signs or symptoms are possible indicators of Diabetes Mellitus?
   A. Oliguria and hyperthermia
   B. Diarrhea with clammy skin
   C. Tremors and tachycardia
   D. Fatigue and hunger

33. A benefit of using a PCA pump for pain management is:
   A. Patient does not need to be assessed for pain
   B. A constant level of pain control and ability to participate more in coughing and deep breathing exercises
   C. Patient is not at risk for falling
   D. It eliminates the need for any additional pain management

34. The nurse will be concerned about the metabolism of drugs in which of the following situations?
   A. Nick, 14 yrs old, scheduled for appendectomy
   B. Sara, 27 yrs old, recovering from back surgery
   C. Bill, 62 yrs old, admitted with cirrhosis of the liver and diabetes
   D. Mary, 62 yrs old, admitted with acute MI

35. If you suspect hypoglycemia in your patient, what should be your first intervention?
   A. Notify the pharmacist
   B. Notify the physician
   C. Get the patient's blood glucose using the blood glucose monitor
   D. Give the patient 8 oz. of coke

36. To minimize potential medication errors, we must ensure the following information is current and available. Which option gives the most relevant information to prevent medication errors?
   A. Allergies, marital status, weight
   B. Allergies, age, height, weight
   C. Height, weight
   D. Allergies, gender, age, marital status