بِسَمِ ٱللهِ ٱلرَّحْمَنِ ٱلرَّحِيمِ **FUNDAMENTALS OF NURSING** لجنة التمريض- الفكرة التي تحيا على نبض قلوبكم

I. For each of the following questions, circle the best answer:-

- **1.** Nursing practice involves four general areas. Which of the following areas is not considered part of the scope of nursing?
 - a. Care of the dying.
 - b. Preventing illness.
 - c. Assisting the physician.
 - d. Promoting health & wellness.
- 2. According to Benner's stages of nursing expertise, anurse with three to five years of experience who has developed a holistic understanding of the client is at which stage?
- a. Proficient practitioner
- b. Advanced beginner.
- c. Novice.
- d. Competent practitioner.
- **3.** Florence Nightingale, the first nurse theorist, stressed which of the following theories?
 - a. A therapeutic relation ship exists between nurses and clients.
 - b. A nurse enters into a personal relationship with a client when a felt need is present.
 - c. The nurse is concerned with both well and ill individuals.
 - d. The nurse uses environmental health factors to assist the client in recovery.

4. Which of the following clients is legally allowed to give informed consent?

- a. An unconscious client.
- b. A client who is sedated.
- c. A 14-year-old client who requires surgery for his broken arm.
- d. A client who can't read.

5. Which of the following health care services is classified as tertiary?

- a. A cute care.
- b. Health promotion.
- c. Immunization.
- d. Care of the dying.
- 6. A home care nurse is working with anon compliant diabetic client who often neglects to take her insulin, After three weeks, the client states, " I bought a

glucometer, and starting tomorrow, I'm going to check my blood sugar and take my insulin every morning" Which stage of health behavior change does this statement represent?

- a. Action stage.
- b. Preparation stage.
- c. Maintenance stage.
- d. Contemplative stage.

7. A cute illness is characterized by:

a. Physical limitations and discomfort that gradually increase over time.

- b. An extended duration.
- c. Occasional remission.
- d. Sever symptoms of relatively short duration.
- 8. During the assessment interview the client tells the nurse, "I have pain in my chest when I breath". What type of data is this?
- a. Subjective data.
- b. Patient focused data.
- c. Objective data.
- d. Overt data.
- **9.** A client is diagnosed with fluid overload and receives a diuretic medication. The nurse measures hourly intake and output. What type of assessment is the nurse performing?
- a. Time lapsed assessment.
- b. Initial assessment.
- c. Emergency assessment.
- d. Problem focused assessment.
- 10. During health assessment interview the nurse asks the client "How do you feel this agency can help you? What type of question is this?
 - a. Open-ended.
 - b. Directed.
 - c. Closed.
 - d. None directed.
- 11. A nurse assigns the nursing diagnosis Ineffective Breathing Pattern to a client with respiratory disease. What type of nursing diagnosis is this.
 - a. Possible nursing diagnosis.
 - b. Syndrome diagnosis.
 - c. Risk nursing diagnosis.
 - d. Actual diagnosis.
- 12. A nurse receives an order to insert an indwelling catheter in a client if he is unable to void. The previous shift reports that the client did not void in the past 12hours.

What is the most important step for the nurse to take just before inserting the catheters.

- a. Determine if help will be needed during the procedure.
- b. Ask family members to leave the room.
- c. Reassess the client for a change in condition.
- d. Gather supplies.

13. The nurse reviews the laboratory results in the charts. This is part of

- a. Collecting objective data.
- b. Collecting subjective data.
- c. Initiating a care plan.
- d. Validating data.

14. Which goal is appropriate for the following diagnosis: Ineffective airway clearance related to immobilisation.

- a. the client will be turned.
- b. The client deep breathes and coughs.
- c. The nurse will a uscultate the client's breath sounds.
- d. The client will be evaluated for productive cough.

15. Which of the following criteria should be respected when identifying an appropriate goal?

- a. the goal must be measurable.
- b. The goal must include a deadline.
- c. The goal is determined with the client.
- d. All of the above.

16. The nurse administers an analgesic to the client. This is an example of.

a. Implementing dependant-nursing interventions.

- b. Implementing independent nursing interventions.
- c. Implementing collaborative nursing interventions.
- d. None of the above.

17. What is the focus of primary care?

- a. Early detection and routine care as well as prevention.
- b. Using only these resources that are necessary for adequate basic care.
- c. Treatment of all client's with a minimum health insurance.
- d. Treatment of clients in a hospital setting.

18. Child immunization, support groups for adolescent parents, and chlorinated water are examples of which of the four levels of health care?

a. Health promotion.

- b. Disease and injury prevention.
- c. Rehabilitation.
- d. None of the above.

19. What is the process by which persons are permitted to offer professional nursing skills to the public?

- a. accreditation.
- b. Licensure or registration.

- c. Completing an accredited nursing program.
- d. Becoming a member of a professional association.

20. Assessing includes which of the following activities.

a. Communicating, writing, listening, organizing.

- b. Collecting, organizing, validating, documenting.
- c. Talking, writing, organizing, evaluating.
- d. Communicating, listening, collecting, documenting.

21. Which of the following is a description of a useful goal or desired outcome?

- a. They begin with "The nurse will.." and are realistic, measurable and considered important by the client.
- b. They begin with "the nurse will.." and are measurable & realistic.
- c. They begin with "the client will.." and are measurable & realistic.
- d. They begin with "the client will.." and include the medical diagnosis.

22. Evaluation statements include the:

- a. Data from physical & mental assessments.
- b. Client's health beliefs and priorities.
- c. Effect of the setting on the quality of care.
- d. Client's responses to interventions.

23. Mr. S is 70 years old admitted as case of sever diarrhea since 2 day. Lab result revealed serum osmolality = 400 mOsm/L. BUN= 35 mg/dl. PCV = 60%. BP=90/50 mmHg.

Q23, Q24, Q25, are regarding Mr. S case

The proper nursing diagnosis for Mr. S is:

- a. FUE RT increase fluid intake AMB increased serum osmolality and BUN.
- b. Polential for hypotentsion RT Fluid Volume deficit.
- c. FVD RT body fluid loss AMB Lab result.
- d. High risk for FVD RT fluid volume loss AMB diarrhea.

24. The best medical management for Mr. S is:

- a. Administer loop diaretics.
- b. Administer lactated ringer's solution I.V.
- c. Administer 3% Nacl (Saline) I.V.
- d. D₅ W 5% I.V.0

25. The doctor ordered for other laboratory investigation. Which fo the following laboratory findings is consistant with Mr. S case.

- a. Hyperkalemia.
- b. Hypoklemia.
- c. Decreased serum creatinin.
- d. Decreased unin specific gravity.
- 26. A patient with serum no level 160mEg/L. Which of the following solutions the nurse will choose it for this patient.
 - a. Nacl 0.9% I.V
 - b. Nacl 5% I.V.
 - c. Nacl 0.45% I.V.
 - d. 5% Dextrose in normal saline.

27. Nursing intervention for a patient with serum Na 120mEq/L includes all the following Except:

- a. Assessing for symptoms of nausea & vomiting.
- b. Monitor neurological status.
- c. Encourage foods with high Na content.
- d. Encourage the intake of distaled water.

28. Mr. Y is admitted to the hospital as a case of FUE. The nurse expected that mr. Y might have:

- a. Shortness of breath, crackles, distended neck veins.
- b. Increased weight, increased urin output, decreased.
- c. Decreased urin output, tachy cardia, hypotension.
- d. Flattened neck veins, increase weight, increased B.P.

29. The following ECG is consistent with

- a. Serum K level 4mEq/l.
- b. Serum K level 2mEq/l.
- c. Sever metabolic alkalosis.
- d. Sever metabolic acidosis.

30. The nurse knows that Mr. K who's PH less than 7.35, PaCO₂ greater than 45mmHg, and has HCO₃ less than 18mEq/l. Mr. K may has:

- a. Respiratory acidosis.
- b. Respiratory alkalosis.
- c. Combined respiratory and metabolic acidosis.
- d. Metabolic acidosis.

31. Mr. N has the following ABG's values, Hco₃: 20mEq/l. PaCo₂: 30mmHg. PH: 7.48. The nurse expect to find the following for Mr. N.

- a. Decreased respiratory rate, and increased O_z Saturation.
- b. Decreased respiratory rate, and increased O_z Saturation.
- c. Decreased 5erum K level, and decreased respiratory rate.
- d. Non of the above.
- 32. Mr. F was admitted to the hospital complain of depression. Decreased recent memory, and hallucination. When the nurse takes this B.P she notes an adduction of his thumb, flexion of the wrist and metacarpo phlalangeal joints, and extension of interpholaugeal joints with fingers together. The nurse expect that Mr. F has.
- a. Hypocalcemia.
- b. Hypercalcemia.
- c. Hyponatremia.
- d. Hypornalremia.