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PRACTICE QUESTIONS

Elsevier Remotely Proctored Exams

PNCTT

Practical Nursing Critical Thinking Test

EDITION

Demo

QUESTIONS

9

FORMAT

Limited Edition PDF

Before you begin

What this is

9 practice questions for Elsevier Remotely Proctored Exams **PNCTT**, each with its answer key and an explanation. Answer a question before you read its key — the explanation is worth more once you have committed.

If something looks wrong

Send us three things and we will check it:

- the exam code, **PNCTT**
- the question number
- the email address on your order

Write to **support@mometrix.net**. We reply within one business day.

QUESTION 1

SINGLE CHOICE

A client with heart failure has a weight gain of 2.7 kg (6 lb) over 3 days and reports increased shortness of breath. The practical nurse (PN) reviews the most recent vital signs and medication administration record before contacting the registered nurse (RN). Which step of the nursing process does this action represent?

- ☒ **A** Assessment
- ☐ B Diagnosis
- ☐ C Planning
- ☐ D Evaluation

ANSWER A

WHY Gathering data from the client's history, vital signs, and medication record to identify changes constitutes assessment, the first step of the nursing process. The PN is collecting information rather than forming a nursing diagnosis, developing a plan, or evaluating the outcomes of an intervention.

QUESTION 2

SINGLE CHOICE

A client on the medical-surgical unit suddenly reports severe chest pain and becomes diaphoretic and short of breath. Which action should the PN take first?

- ☐ A Obtain a 12-lead electrocardiogram as ordered
- ☒ **B Notify the registered nurse and call for help**
- ☐ C Administer the prescribed nitroglycerin sublingual tablet
- ☐ D Document the event in the client's medical record

ANSWER B

WHY When a client develops new signs and symptoms suggestive of a life-threatening event such as acute coronary syndrome, the PN must first notify the RN and call for help so that the team can respond and additional assessment can be performed. Administering medication, obtaining an ECG, and documentation follow once help has been summoned and the client is stabilized.

QUESTION 3 SINGLE CHOICE

When preparing to administer a medication, the PN compares the medication label with the medication administration record (MAR) three times. When does the third check occur?

- ☐ A When removing the medication from the storage area
- ☐ B When the medication is poured or prepared
- ☒ C At the client's bedside before administering the medication
- ☐ D After documenting the medication in the client's chart

ANSWER C

WHY The three checks of medication administration occur when the medication is removed from the storage area, when it is poured or prepared, and at the client's bedside just before it is administered to the client. Performing the final check at the bedside with the MAR verifies the right medication, dose, route, client, and time and is the last safety step before giving the drug.

QUESTION 4 SINGLE CHOICE

A client receiving intravenous heparin has a partial thromboplastin time (aPTT) of 95 seconds. The therapeutic range for heparin therapy is 60 to 80 seconds. Which interpretation by the PN is correct?

- ☐ A The result is subtherapeutic, and a dose increase is needed
- ☐ B The result is within the therapeutic range
- ☒ C The result is supratherapeutic, and the client is at increased risk for bleeding
- ☐ D The result indicates heparin resistance

ANSWER C

WHY An aPTT of 95 seconds exceeds the therapeutic range of 60 to 80 seconds for heparin therapy, indicating a supratherapeutic level and a significantly increased risk for bleeding. The PN must recognize this finding and promptly notify the RN, who will contact the provider for a possible dose adjustment.

QUESTION 5

SINGLE CHOICE

A client newly diagnosed with type 2 diabetes states, 'I just know I'm going to end up on insulin like my mother did.' Which response by the PN uses the therapeutic communication technique of reflection?

- ☐ A Don't worry, you and your mother are different people.
- ☐ B Tell me more about your concerns regarding insulin therapy.
- ☒ C It sounds like you're worried that you will have a similar experience to your mother.
- ☐ D Many people with diabetes control their blood sugar with diet and exercise.

ANSWER C

WHY Reflection involves restating or paraphrasing what the client has expressed to encourage further exploration of feelings. The response that mirrors the client's concern about sharing the same outcome as her mother is a classic example of reflection. Reassurance, closed-ended questioning, and giving information do not demonstrate reflection.

QUESTION 6

SINGLE CHOICE

A client has been placed on contact precautions because of a wound infection with methicillin-resistant *Staphylococcus aureus* (MRSA). Which action by the PN is correct?

- ☐ A Wear a surgical mask when entering the client's room
- ☐ B Don clean gloves before entering the client's room and remove them before leaving
- ☐ C Wear a gown and gloves only when performing direct wound care
- ☒ D Wear a gown and gloves for all interactions that may involve contact with the client or the client's environment

ANSWER D

WHY Contact precautions require the use of both gown and gloves for any interaction in which the staff member may come into contact with the client or items in the client's environment, because MRSA is transmitted by direct and indirect contact. A surgical mask is not required for standard contact precautions, and gloves alone or only during wound care are insufficient.

QUESTION 7

SINGLE CHOICE

A client tells the PN, 'Please don't tell my family about my cancer diagnosis. I want to keep it private for now.' Which response by the PN reflects respect for client confidentiality?

- ☐ A I have to share this information with your family so they can support you.
- ☒ B I will keep this information confidential and document your request in your chart.
- ☐ C Don't worry, your family already knows about your diagnosis.
- ☐ D I cannot promise to keep anything from your family.

ANSWER B

WHY The client has a right to confidentiality of personal health information, and the PN must respect that right unless disclosure is required by law or the safety of the client or others is at risk. The correct response acknowledges the client's request, agrees to maintain confidentiality, and indicates that the request will be documented. The other options either reveal the information inappropriately or fail to commit to confidentiality.

QUESTION 8

TRUE FALSE

The PN should verify the identity of a client by checking two identifiers, such as name and date of birth, before administering any medication.

- ☒ A True
- ☐ B False

ANSWER A

WHY True. Using at least two client identifiers (commonly name and date of birth, or name and medical record number) is a standard safety requirement before medication administration to ensure the right client receives the right medication. The identifiers must match the information on the medication administration record.

QUESTION 9

MULTIPLE CHOICE

An adult postoperative client is being monitored by the PN. Which findings indicate possible hypovolemic shock and require immediate notification of the registered nurse? (Choose two.)

- ☒ **A** Heart rate of 128 beats per minute
- ☐ **B** Blood pressure of 110/70 mm Hg
- ☒ **C** Cool, clammy skin with weak peripheral pulses
- ☐ **D** Urine output of 60 mL per hour
- ☐ **E** Restlessness and anxiety with decreased level of consciousness

ANSWER A - C

WHY Tachycardia (heart rate of 128 bpm) and cool, clammy skin with weak peripheral pulses are classic signs of hypovolemic shock resulting from decreased circulating volume and compensatory sympathetic activation. Restlessness, anxiety, and a decreased level of consciousness also reflect cerebral hypoperfusion and would warrant notification, but only two answers are requested. A blood pressure of 110/70 mm Hg and a urine output of 60 mL per hour are within normal limits for an adult and do not, by themselves, indicate shock.