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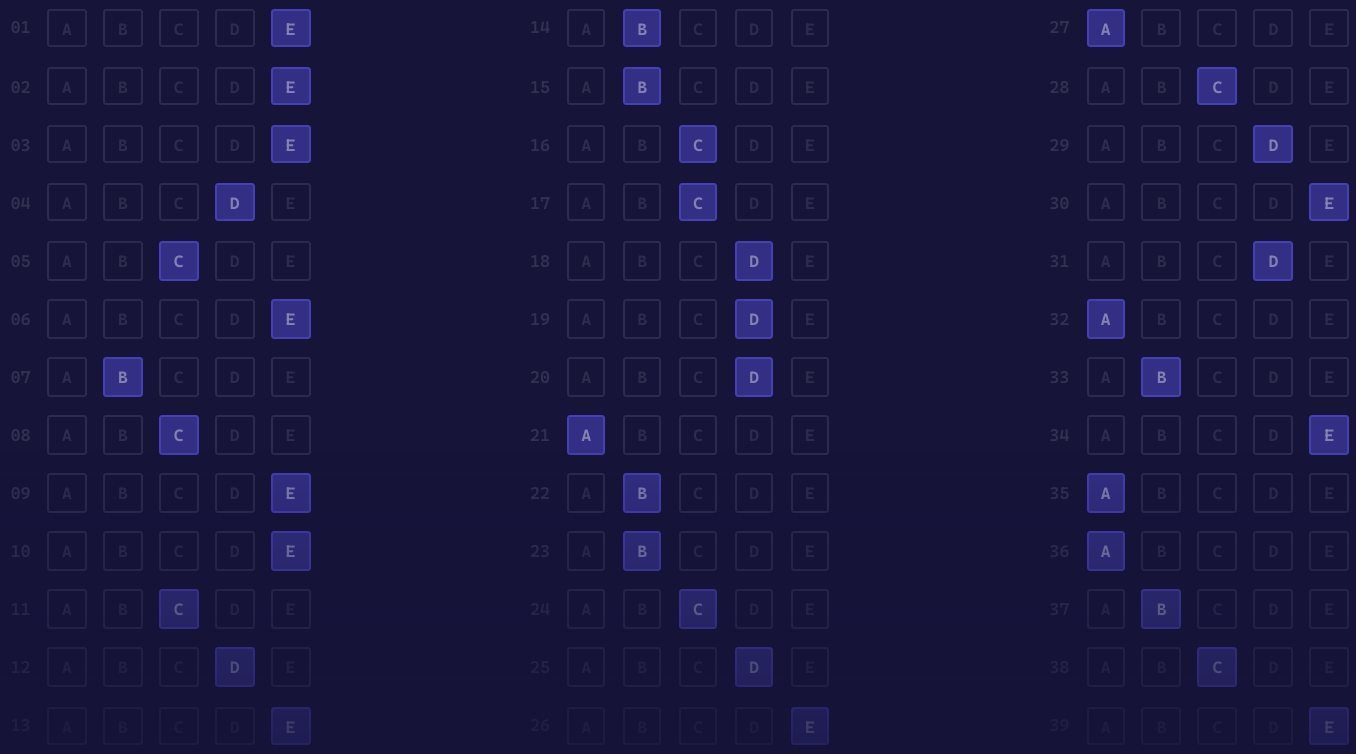

PRACTICE QUESTIONS

Elsevier Remotely Proctored Exams

RNBSN

Registered Nursing RN-BSN

EDITION	QUESTIONS	FORMAT
Demo	9	Limited Edition PDF

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Before you begin

What this is

9 practice questions for Elsevier Remotely Proctored Exams `RNBSN`, 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:

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- the question number
- the email address on your order

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QUESTION 1 MULTIPLE CHOICE

A nurse is preparing to implement a fall-prevention protocol on a medical-surgical unit. Which of the following actions BEST reflect the use of evidence-based practice (EBP)? (Choose two.)

A **Search current peer-reviewed journals for randomized controlled trials on fall-prevention interventions.**

B Continue using the unit's traditional fall-prevention methods because they have always been used.

C **Combine findings from the literature with the nurse's clinical expertise and the patient's preferences and values.**

D Wait for the hospital's chief executive officer to mandate a specific fall-prevention protocol before acting.

ANSWER **A · C**

WHY Evidence-based practice integrates the best available research evidence (e.g., peer-reviewed RCTs) with clinical expertise and patient values/preferences. Option A reflects locating the best research evidence, and option C reflects the classic three components of EBP. Continuing a tradition because it has always been used (B) is the opposite of EBP, and waiting for a CEO mandate (D) reflects top-down policy adoption, not EBP integration.

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QUESTION 2 MULTIPLE CHOICE

A registered nurse is documenting an entry in a patient's electronic health record. Which documentation actions are consistent with professional and legal standards? (Choose two.)

A **Recording facts objectively, using precise measurements and avoiding vague language such as 'appears comfortable'.**

B Entering the note under another nurse's login because the assigned nurse stepped away from the workstation.

C **Correcting a documentation error by drawing a single line through it, writing 'error,' initialing, and dating the correction.**

D Adding an entry two days after the event with the original date/time to make the record complete.

ANSWER **A · C**

WHY Accurate, factual documentation with precise measurements and proper error-correction (single line, labeled as an error, with initials and date) meets professional and legal documentation standards. Documenting under another nurse's login violates accountability (B), and back-dating entries misrepresents when care occurred and violates legal requirements (D).

QUESTION 3 SINGLE CHOICE

A nurse is caring for a newly admitted patient with pneumonia. After completing the initial assessment, what is the nurse's NEXT step in the nursing process?

A **Formulate a nursing diagnosis based on the assessment data.**

B Begin implementing interventions immediately to treat the dyspnea.

C Evaluate the outcomes of care delivered during the shift.

D Develop a discharge plan for the patient.

ANSWER **A**

WHY The nursing process follows the sequence: Assessment → Diagnosis → Planning → Implementation → Evaluation. After assessment, the next step is to analyze the data and formulate a nursing diagnosis. Implementing interventions, evaluating outcomes, and discharge planning all occur later in the process.

QUESTION 4 SINGLE CHOICE

A patient with a terminal illness tells the nurse, 'I don't want to be kept alive on machines. Please make sure my family honors my wishes.' Which ethical principle is the patient primarily invoking?

A Beneficence

B Autonomy

C Justice

D Nonmaleficence

ANSWER B

WHY Autonomy is the principle that recognizes a patient's right to make decisions about his or her own healthcare, including end-of-life decisions. Beneficence is doing good; justice is fairness in the distribution of resources; and nonmaleficence is the duty to do no harm. The patient expressing a personal choice about treatment reflects autonomy.

QUESTION 5 SINGLE CHOICE

A community health nurse is developing a teaching plan for an adult group about primary prevention of cardiovascular disease. Which intervention is the BEST example of primary prevention?

A Teaching adults how to recognize the warning signs of myocardial infarction.

B Initiating cardiac rehabilitation for patients who have had a myocardial infarction.

C Encouraging a healthy diet, regular exercise, and smoking cessation in healthy adults.

D Performing cardiac catheterization on patients with chest pain.

ANSWER C

WHY Primary prevention aims to prevent disease before it occurs by addressing risk factors in healthy individuals. Promoting healthy diet, exercise, and smoking cessation meets this goal. Recognizing warning signs is secondary prevention, rehabilitation is tertiary prevention, and cardiac catheterization is diagnostic/secondary/tertiary care.

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QUESTION 6 SINGLE CHOICE

A patient is upset after learning that a planned surgery will be postponed. Which response by the nurse BEST demonstrates therapeutic communication?

A 'Don't worry—these things always work out in the end.'

B 'Tell me how you feel about the surgery being postponed.'

C 'The surgeon knows best; you should trust the decision.'

D 'Why are you so upset? It's only a minor delay.'

ANSWER B

WHY Therapeutic communication uses open-ended statements that encourage the patient to express feelings. Option B invites the patient to share concerns. Option A is false reassurance; option C dismisses the patient's feelings; and option D uses 'why,' which can sound judgmental and discourage further expression.

QUESTION 7 SINGLE CHOICE

A nurse is preparing to administer medications to a patient. Which action is the MOST essential component of safe medication administration?

A Verifying the patient's identity using two identifiers before giving the medication.

B Documenting the medication before it is actually given to the patient.

C Asking a coworker to identify the medication by color on the unit.

D Administering all scheduled medications within the first hour of the shift.

ANSWER A

WHY Using two patient identifiers (such as name and date of birth) is a foundational safety step to ensure the right patient receives the right medication. Documenting before administration (B) violates the principle of documenting after the medication is given; identifying medication by color alone (C) is unsafe; and administering all medications in the first hour (D) ignores proper timing.

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QUESTION 8 SINGLE CHOICE

When evaluating the strength of evidence to guide nursing practice, which source provides the HIGHEST level of evidence?

A A single case study describing one patient's response to treatment.

B A narrative literature review summarizing expert opinion.

C **A systematic review or meta-analysis of randomized controlled trials.**

D A quality-improvement project at one hospital that lacked a control group.

ANSWER C

WHY Systematic reviews and meta-analyses of randomized controlled trials sit at the top of the evidence hierarchy because they synthesize multiple high-quality studies. Single case studies (A), narrative expert reviews (B), and uncontrolled quality-improvement projects (D) rank lower in evidence strength.

QUESTION 9 SINGLE CHOICE

A nurse is admitting a patient who speaks limited English. Which action BEST demonstrates culturally competent care?

A Asking a family member to interpret all medical information.

B **Using professional medical interpreter services for teaching and informed consent.**

C Speaking loudly and slowly so the patient can understand English better.

D Limiting communication to simple yes/no questions to avoid misinterpretation.

ANSWER B

WHY Professional medical interpreters are the standard for communicating with patients who have limited English proficiency, especially for teaching and informed consent. Using family members (A) can introduce bias and violate privacy; speaking loudly/slowly (C) does not address language differences and can be patronizing; and limiting to yes/no questions (D) restricts the patient's ability to fully participate in care.

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