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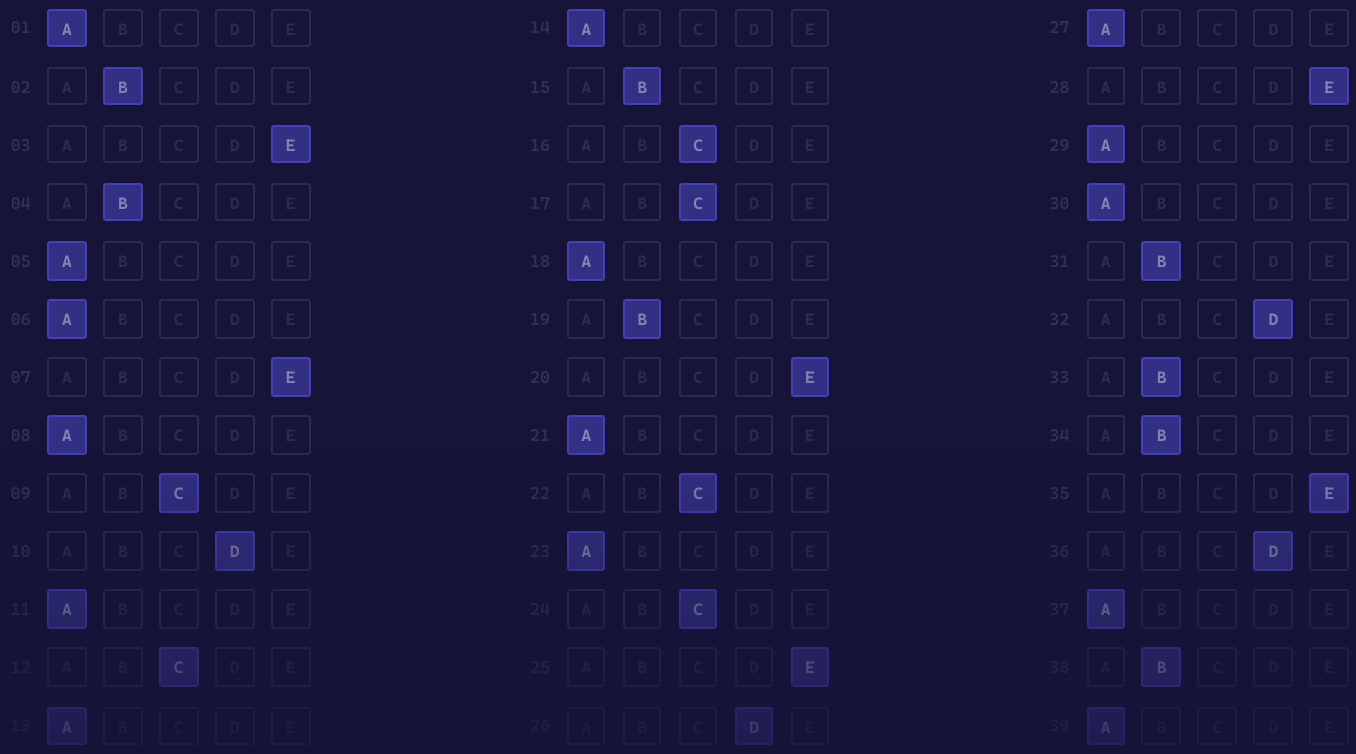

PRACTICE QUESTIONS

Elsevier Remotely Proctored Exams

RNGER

Registered Nursing Gerontology

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 `RNGER`, 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, `RNGER`
- the question number
- the email address on your order

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

QUESTION 1 SINGLE CHOICE

Which age-related change in the cardiovascular system is most likely to be observed in an otherwise healthy older adult?

A Increased resting heart rate due to enhanced sinoatrial node automaticity

B Decreased ventricular wall thickness leading to reduced stroke volume

C **Increased arterial stiffness resulting in elevated systolic blood pressure**

D Increased maximal cardiac output during strenuous exercise

ANSWER C

WHY Aging causes stiffening of the large arteries due to collagen cross-linking and elastin loss, which commonly produces isolated systolic hypertension in older adults. Resting heart rate does not typically rise, ventricular walls tend to hypertrophy rather than thin, and maximal cardiac output actually declines with age.

QUESTION 2 SINGLE CHOICE

According to current U.S. recommendations for adults aged 65 years and older, which immunization schedule is correct?

A A single lifetime dose of pneumococcal polysaccharide vaccine (PPSV23) only

B **Annual influenza vaccine, a single dose of PCV20, and a two-dose series of shingles (RZV) vaccine**

C Tetanus-diphtheria (Td) booster every 5 years with no other routine immunizations

D Annual influenza vaccine only, because other vaccines are contraindicated after age 65

ANSWER B

WHY Current recommendations include annual influenza vaccination, pneumococcal vaccination (either PCV20 alone or PCV15 followed by PPSV23), and the recombinant zoster vaccine (RZV) given as a two-dose series in adults 50 and older, with most now being administered by age 65. Td is given every 10 years, and there is no contraindication to the other vaccines solely based on age.

QUESTION 3 SINGLE CHOICE

An 82-year-old hospitalized patient suddenly becomes disoriented, agitated, and is picking at the bedclothes two days after surgery. Which condition is the nurse's priority assessment focus?

A Alzheimer-type dementia

B Delirium

C Major depressive disorder

D Vascular dementia

ANSWER B

WHY Acute onset of confusion, fluctuating awareness, and inattention developing over hours to days in a hospitalized older adult is classic for delirium, a medical emergency. Dementia has a slow, insidious onset, and depression presents with sadness and anhedonia rather than acute disorientation.

QUESTION 4 SINGLE CHOICE

The nurse is reviewing medications for an older adult using the Beers Criteria. What is the primary purpose of this tool?

A To identify the most cost-effective generic alternatives for older adults

B To identify potentially inappropriate medications for older adults due to age-related pharmacokinetic and pharmacodynamic changes

C To calculate creatinine clearance for adjusting medication doses

D To determine Medicare reimbursement eligibility for prescriptions

ANSWER B

WHY The Beers Criteria, developed by the American Geriatrics Society, list medications that are potentially inappropriate for older adults because of age-related changes in metabolism, increased sensitivity, and higher risk of adverse effects. They are a safety screening tool, not a cost, renal, or reimbursement tool.

QUESTION 5 SINGLE CHOICE

Which intervention has the strongest evidence for reducing falls in community-dwelling older adults?

A Routine use of physical restraints in long-term care

B Bedrest to conserve energy and prevent injury

C **Multifactorial intervention that includes exercise, particularly balance and strength training**

D Daily sedative-hypnotic medication to ensure adequate sleep

ANSWER C

WHY Multifactorial fall prevention that includes exercise (especially balance, gait, and strength training), home safety evaluation, medication review, and vision correction has the strongest evidence. Restraints and bedrest actually increase fall risk and complications, and sedatives increase fall risk through impaired balance and cognition.

QUESTION 6 SINGLE CHOICE

Which nonpharmacologic intervention is most appropriate as a first-line strategy for chronic musculoskeletal pain in an older adult?

A High-dose opioid therapy initiated immediately for severe pain

B **Application of heat, exercise, and cognitive-behavioral techniques**

C Total bedrest until pain resolves

D Use of alcohol at bedtime for its sedative effect

ANSWER B

WHY First-line nonpharmacologic management of chronic musculoskeletal pain in older adults includes physical therapy, exercise, heat or cold application, and cognitive-behavioral approaches. Opioids carry significant risks in older adults, bedrest leads to deconditioning, and alcohol use worsens pain and increases fall risk.

QUESTION 7 SINGLE CHOICE

An older adult with end-stage heart failure has a do-not-resuscitate (DNR) order but wishes aggressive treatment of symptoms. Which care model best aligns with the patient's wishes?

A Hospice care, because the patient has a terminal diagnosis

B Curative care only, because the patient is not yet enrolled in hospice

C Palliative care provided concurrently with disease-directed therapy

D Withdrawal of all treatments and provision of comfort measures only

ANSWER C

WHY Palliative care is appropriate at any stage of serious illness and can be delivered alongside curative or disease-directed therapies, focusing on symptom management and quality of life. Hospice is reserved for patients who have elected to forgo curative treatment and have a prognosis of six months or less.

QUESTION 8 SINGLE CHOICE

Which clinical feature most reliably distinguishes delirium from dementia in an older adult?

A Presence of memory impairment

B Acute onset with fluctuating level of consciousness and inattention

C Gradual decline in language abilities over years

D History of depression in the past

ANSWER B

WHY Delirium is characterized by an acute onset (hours to days), fluctuating course, and disturbance of attention and awareness, often with an identifiable physiologic cause. Dementia presents with a gradual, progressive decline. Memory impairment can occur in both, and a history of depression relates more to depressive pseudodementia.

QUESTION 9 MULTIPLE CHOICE

Which medications are listed on the Beers Criteria as potentially inappropriate for older adults? (Choose two.)

A **Diphenhydramine used as a sleep aid**

B Acetaminophen for mild osteoarthritis pain

C **Long-acting benzodiazepines such as diazepam**

D Topical lidocaine for localized neuropathic pain

ANSWER **A** · **C**

WHY First-generation antihistamines such as diphenhydramine and long-acting benzodiazepines such as diazepam are on the Beers Criteria because of anticholinergic effects, sedation, and increased risk of falls, fractures, and cognitive impairment in older adults. Acetaminophen at appropriate doses and topical lidocaine are generally considered safe in older adults.