

2. A nursing student is studying nutritional problems and learns that kwashiorkor is distinguished from marasmus with which finding?

- a. Deficit of calories
- b. Lack of all nutrients
- c. Specific lack of protein**
- d. Unknown cause of malnutrition

ANS: C

3. A nurse is reviewing laboratory values for several clients. Which value causes the nurse to conduct nutritional assessments as a priority?

- a. Albumin: 3.5 g/dL
- b. Cholesterol: 142 mg/dL**
- c. Hemoglobin: 9.8 mg/dL
- d. Prealbumin: 28 mg/dL

ANS: B

4. A client is receiving bolus feedings through a Dobhoff tube. What action by the nurse is most important?

- a. Auscultate lung sounds after each feeding.
- b. Check tube placement before each feeding.**
- c. Check tube placement every 8 hours.
- d. Weigh the client daily on the same scale.

ANS: B

5. A client having a tube feeding begins vomiting. What action by the nurse is most appropriate?

- a. Administer an antiemetic.
- b. Check the client's gastric residual.
- c. Hold the feeding until the nausea subsides.**
- d. Reduce the rate of the tube feeding by half.

ANS: C

6. A nurse is caring for a client receiving enteral feedings through a Dobhoff tube. What action by the nurse is best to prevent hyperosmolarity?

- a. Administer free-water boluses.**
- b. Change the client's formula.
- c. Dilute the client's formula.
- d. Slow the rate of infusion.

ANS: A

7. A nurse is caring for four clients receiving enteral tube feedings. Which client should the nurse see first?

- a. Client with a blood glucose level of 138 mg/dL
- b. Client with foul-smelling diarrhea
- c. Client with a potassium level of 2.6 mEq/L**
- d. Client with a sodium level of 138 mEq/L

ANS: C

8. A nurse and a registered dietitian are assessing clients for partial parenteral nutrition (PPN). For which client would the nurse suggest another route of providing nutrition?

- a. Client with congestive heart failure**
- b. Older client with dementia
- c. Client who has multiorgan failure
- d. Client who is post gastric resection

ANS: A

9. A client is receiving total parenteral nutrition (TPN). On assessment, the nurse notes the client's pulse is 128 beats/min, blood pressure is 98/56 mm Hg, and skin turgor is dry. What action should the nurse perform next?

- a. Assess the 24-hour fluid balance.**
- b. Assess the client's oral cavity.
- c. Prepare to hang a normal saline bolus.
- d. Turn up the infusion rate of the TPN.

ANS: A

20. A client is receiving total parenteral nutrition (TPN). What action by the nurse is most important?

- a. Assessing blood glucose as directed
- b. Changing the IV dressing each day
- c. Checking the TPN with another nurse
- d. Performing appropriate hand hygiene**

ANS: D

1. The nurse understands that malnutrition can occur in hospitalized clients for several reasons. Which are possible reasons for this to occur? (Select all that apply.)

- a. Cultural food preferences**
- b. Family bringing snacks
- c. Increased need for nutrition**
- d. Need for NPO status**
- e. Staff shortages**

ANS: A, C, D, E

2. A nurse has delegated feeding a client to an unlicensed assistive personnel (UAP). What actions does the nurse include in the directions to the UAP? (Select all that apply.)

- a. Allow 30 minutes for eating so food doesn't get spoiled.
- b. Assess the clients mouth while providing premeal oral care.
- c. Ensure warm and cold items stay at appropriate temperatures.**
- d. Remove bedpans, soiled linens, and other unpleasant items.**
- e. Sit with the client, making the atmosphere more relaxed.**

ANS: C, D, E

4. A clients small-bore feeding tube has become occluded after the nurse administered medications. What actions by the nurse are best? (Select all that apply.)

- a. Attempt to dissolve the clog by instilling a cola product.
- b. Determine if any of the medications come in liquid form.**
- c. Flush the tube before and after administering medications.**
- d. Mix all medications in the formula and use a feeding pump.
- e. Try to flush the tube with 30 mL of water and gentle pressure.**

ANS: B, C, E

5. When working with older adults to promote good nutrition, what actions by the nurse are most appropriate? (Select all that apply.)

- a. Allow uninterrupted time for eating.**
- b. Assess dentures for appropriate fit.**
- c. Ensure the client has glasses on when eating.**
- d. Provide salty foods that the client can taste.
- e. Serve high-calorie, high-protein snacks.**

ANS: A, B, C, E

Pancreatitis

5. A nurse plans care for a client with acute pancreatitis. Which intervention should the nurse include in this clients plan of care to reduce discomfort?

- a. Administer morphine sulfate intravenously every 4 hours as needed.
- b. Maintain nothing by mouth (NPO) and administer intravenous fluids.**
- c. Provide small, frequent feedings with no concentrated sweets.
- d. Place the client in semi-Fowlers position with the head of bed elevated.

6. After teaching a client who is prescribed pancreatic enzyme replacement therapy, the nurse assesses the clients understanding. Which statement made by the client indicates a need for additional teaching?

- a. The capsules can be opened and the powder sprinkled on applesauce if needed.
- b. I will wipe my lips carefully after I drink the enzyme preparation.
- c. The best time to take the enzymes is immediately after I have a meal or a snack.**
- d. I will not mix the enzyme powder with food or liquids that contain protein.

7. A nurse assesses a client who is recovering from an open Whipple procedure. Which action should the nurse perform first?

- a. Assess the clients endotracheal tube with 40% FiO2.**
- b. Insert an indwelling Foley catheter to gravity drainage.
- c. Place the clients nasogastric tube to low intermittent suction.
- d. Start lactated Ringers solution through an intravenous catheter.

8. A nurse cares for a client with end-stage pancreatic cancer. The client asks, Why is this happening to me? How should the nurse respond?

- a. I dont know. I wish I had an answer for you, but I dont.**
- b. Its important to keep a positive attitude for your family right now.
- c. Scientists have not determined why cancer develops in certain people.
- d. I think that this is a trial so you can become a better person because of it.

9. A nurse prepares to assess the emotional state of a client with end-stage pancreatic cancer. Which action should the nurse take first?

- a. Bring the client to a quiet room for privacy.
- b. Pull up a chair and sit next to the clients bed.
- c. Determine whether the client feels like talking about his or her feelings.**
- d. Review the health care providers notes about the prognosis for the client.

10. A nurse assesses clients at a community health center. Which client is at highest risk for pancreatic cancer?

- a. A 32-year-old with hypothyroidism
- b. A 44-year-old with cholelithiasis
- c. A 50-year-old who has the BRCA2 gene mutation**
- d. A 68-year-old who is of African-American ethnicity

13. A nurse cares for a client with acute pancreatitis. The client states, I am hungry. How should the nurse reply?

- a. Is your stomach rumbling or do you have bowel sounds?
- b. I need to check your gag reflex before you can eat.
- c. Have you passed any flatus or moved your bowels?**
- d. You will not be able to eat until the pain subsides.

14. A nurse prepares to discharge a client with chronic pancreatitis. Which question should the nurse ask to ensure safety upon discharge?

- a. Do you have a one- or two-story home?**
- b. Can you check your own pulse rate?
- c. Do you have any alcohol in your home?
- d. Can you prepare your own meals?

15. A nurse assesses clients on the medical-surgical unit. Which client should the nurse identify as at high risk for pancreatic cancer?

- a. A 26-year-old with a body mass index of 21
- b. A 33-year-old who frequently eats sushi
- c. A 48-year-old who often drinks wine
- d. A 66-year-old who smokes cigarettes**

16. A nurse assesses a client who is recovering from a Whipple procedure. Which assessment finding alerts the nurse to urgently contact the health care provider?

- a. Drainage from a fistula**
- b. Absent bowel sounds
- c. Pain at the incision site
- d. Nasogastric (NG) tube drainage

17. A nurse cares for a client who is recovering from an open Whipple procedure. Which action should the nurse take?

- a. Clamp the nasogastric tube.
- b. Place the client in semi-Fowlers position.**

- c. Assess vital signs once every shift.
- d. Provide oral rehydration.

1. A nurse assesses a client who is recovering from a Whipple procedure. Which clinical manifestations alert the nurse to a complication from this procedure? (Select all that apply.)

- a. Clay-colored stools
- b. Substernal chest pain**
- c. Shortness of breath**
- d. Lack of bowel sounds or flatus**
- e. Urine output of 20 mL/6 hr**

3. A nurse teaches a client who is recovering from acute pancreatitis. Which statements should the nurse include in this client's teaching? (Select all that apply.)

- a. Take a 20-minute walk at least 5 days each week.
- b. Attend local Alcoholics Anonymous (AA) meetings weekly.**
- c. Choose whole grains rather than foods with simple sugars.
- d. Use cooking spray when you cook rather than margarine or butter.**
- e. Stay away from milk and dairy products that contain lactose.
- f. We can talk to your doctor about a prescription for nicotine patches.**

5. A nurse plans care for a client who has acute pancreatitis and is prescribed nothing by mouth (NPO). With which health care team members should the nurse collaborate to provide appropriate nutrition to this client? (Select all that apply.)

- a. Registered dietitian**
- b. Nursing assistant
- c. Clinical pharmacist**
- d. Certified herbalist
- e. Health care provider**

6. A nurse collaborates with an unlicensed assistive personnel (UAP) to provide care for a client who is in the healing phase of acute pancreatitis. Which statements focused on nutritional requirements should the nurse include when delegating care for this client? (Select all that apply.)

- a. Do not allow the client to eat between meals.
- b. Make sure the client receives a protein shake.**
- c. Do not allow caffeine-containing beverages.**
- d. Make sure the foods are bland with little spice.**
- e. Do not allow high-carbohydrate food items.

7. A nurse cares for a client with pancreatic cancer who is prescribed implanted radioactive iodine seeds. Which actions should the nurse take when caring for this client? (Select all that apply.)

- a. Dispose of dirty linen in a red biohazard bag.
- b. Place the client in a private room.**
- c. Wear a lead apron when providing client care.**
- d. Bundle care to minimize exposure to the client.**
- e. Initiate Transmission-Based Precautions.

A nurse is preparing a presentation for new graduates about pancreatitis. After attending the seminar, which statement by a graduate nurse indicates the need for additional instruction?

- 1. "Pancreatitis is typically idiopathic."**
 - 2. "There is only one single test finding that will diagnose pancreatitis."
 - 3. "An indication of pancreatitis is an elevation in serum amylase during the first 3 to 5 days."
 - 4. "Necrotizing pancreatitis is a commonly occurring complication."**
 - 5. The risk of hypovolemic shock is very high with this disorder.
- Correct Answer: 1,4

A patient with symptoms consistent with pancreatitis reports feeling ill for the past week. Which diagnostic test will provide the most definitive diagnosis of pancreatitis?

- 1. Erythrocyte sedimentation rate
- 2. Serum lipase**

3. Serum amylase
4. Complete blood count

Correct Answer: 2

The nurse is caring for a patient with severe pancreatitis. Which intravenous fluid would the nurse anticipate providing to this patient?

1. D5W
2. Lactated Ringer's
3. D₅ 1/2 NS

4. 0.9% NS

Correct Answer: 4

A patient with severe acute pancreatitis has received aggressive fluid replacement therapy. Which assessment finding indicates management of this disorder has been effective?

1. Oxygen desaturation
2. Elevated heart rate
- 3. Decreasing hematocrit**
4. Reduced blood pressure

Correct Answer: 3

A patient with severe acute pancreatitis has the following vital signs after fluid resuscitation: BP 84/53 mm Hg and HR 61 bpm. What would the nurse consider as next steps of care for this patient?

- 1. Assess for hypovolemic shock.**
2. Prepare to administer diuretics.
3. Question if an antihypertensive would be indicated.
4. Prepare to administer potassium chloride.

Correct Answer: 1

A patient with acute pancreatitis is concerned about becoming addicted to the morphine prescribed for pain management. What response by the nurse is appropriate?

1. "You must only take the medication when the pain is intolerable."
2. "You may want to consider Demerol to manage your pain because it is less strong."
- 3. "Addiction during this period of acute pain is not likely."**
4. "Addiction is a very real concern and should be considered when requesting medication."

Correct Answer: 3

A patient with acute pancreatitis asks for something to eat. Which response by the nurse is most appropriate?

1. "Your physician will likely allow you to eat when the vomiting has subsided."
2. "You will be able to have a liquid diet within a week."
- 3. "Once your pain is in control and if your bowels are functioning normally, you will likely be able to begin a soft diet."**
4. "During this time, you will have to get your nutrition from tube feedings."

Correct Answer: 3

The nurse is instructing a patient with acute pancreatitis on recommended dietary changes. Which statement by the patient indicates teaching has been effective?

1. "I am going to have to increase the protein in my diet to at least 75% of my intake."
- 2. "The largest component in my diet will be carbohydrates."**
3. "It is important that fiber account for 40% of my diet during this acute period."
4. "I am going to need to cut fats totally out of my diet to protect my pancreas during my recovery."

Correct Answer: 2

The nurse is reviewing the laboratory values for a patient newly diagnosed with acute pancreatitis. Which values would the nurse expect to be elevated?

- 1. Amylase and lipase**
2. Hemoglobin
3. Platelets
4. Prothrombin time

Correct Answer: 1

The nurse, completing the assessment of a patient with acute pancreatitis, would expect that the patient has a history of:

1. Alcohol abuse

2. CHF

3. Diabetes

4. Asthma

Correct Answer: 1

During pre-operative care, a patient asks the nurse "Why are they removing my gallbladder? I thought I had pancreatitis." What is the best response for the nurse to make?

1. "Only the surgeon can answer that question."

2. "You don't need to worry about the surgery. The surgeons know what they are doing."

3. "One common cause of acute pancreatitis is stones in your gallbladder."

4. "You said that you had gallbladder problems when you were admitted. The two are not connected."

Correct Answer: 3

The nurse is assessing the effectiveness of pain management with morphine sulfate through a PCA pump in a patient with acute pancreatitis. Besides the patient's verbal response to the pain scale, what objective assessment findings indicate that the patient's pain level is decreasing?

1. Blood pressure increase

2. Slow, easy respirations

3. Pulse decrease

4. Facial grimacing

5. Blood pressure decrease

Correct Answer: 2,3,5

A patient, admitted to the ICU with a diagnosis of acute pancreatitis, is prescribed pain medication through a PCA pump. What will the nurse include when teaching the patient and family about the proper use of the pump?

1. The patient should only use the PCA pump when the pain is severe.

2. The family may help by "pushing the button" when they feel the patient is in pain.

3. The PCA allows the patient to administer smaller amounts of pain medication more frequently, which helps to get more effective pain relief.

4. The PCA delivers pain medication every time the button is pushed.

Correct Answer: 3

A patient is surprised to learn the diagnosis of pancreatitis. Which risk factors should the nurse be certain to ask about during the assessment?

1. Frequency of alcohol intake

2. History of gall stones

3. List of current medications

4. History of smoking

5. History of peptic ulcer disease

Correct Answer: 1,2,3,4

The nurse is teaching a patient about pancreatitis. What would the nurse include when instructing on the mechanism of the disease process?

1. "The exact mechanism is uncertain."

2. "Cells in the pancreas become damaged and release enzymes that injure the pancreas."

3. "Gall bladder stones block the ducts in the pancreas causing damage."

4. "A poor diet because of alcohol intake causes the pancreas to become inflamed."

5. "The pancreas contracts an infection from poor blood supply through the organ."

Correct Answer: 1,2

A patient has been diagnosed with pancreatitis. What risk factors will help determine the severity of the patient's disease?

1. Age

2. Body weight

3. Chest x-ray findings

4. Oxygen saturation

5. Hemoglobin level

Correct Answer: 1,2,3

The Client with Pancreatitis

17. The client who has been hospitalized with pancreatitis does not drink alcohol because of her religious convictions. She becomes upset when the physician persists in asking her about alcohol intake. The nurse should explain that the reason for these questions is that:

1. There is a strong link between alcohol use and acute pancreatitis.

2. Alcohol intake can interfere with the tests used to diagnose pancreatitis.

3. Alcoholism is a major health problem, and all clients are questioned about alcohol intake.

4. The physician must obtain the pertinent facts, regardless of religious beliefs.

18. The nurse monitors the client with pancreatitis for early signs of shock. Which of the following conditions is primarily responsible for making it difficult to manage shock in pancreatitis?

1. Severity of intestinal hemorrhage.

2. Vasodilating effects of kinin peptides.

3. Tendency toward heart failure.

4. Frequent incidence of acute tubular necrosis.

19. A client with acute pancreatitis has a blood pressure of 88/40, heart rate of 128 bpm, respirations of 28/min, and Grey Turner's sign. What action should the nurse perform first?

1. Assess the urine output.

2. Place an intravenous line.

3. Position on the left side.

4. Insert a nasogastric tube.

20. A client is admitted with acute necrotizing pancreatitis. Lab results have been obtained, and a peripheral IV has been inserted. Which of the following prescriptions from a health care provider should the nurse question?

1. Infuse a 500-mL normal saline bolus.

2. Calcium gluconate 90 mg in 100 mL NS.

3. Total parenteral nutrition (TPN) at 72 mL/h.

4. Placement of a Foley catheter.

21. Which of the following medications would the nurse question for a client with acute pancreatitis?

1. Furosemide (Lasix) 20 mg IV push.

2. Imipenem (Primaxin) 500 mg IV.

3. Morphine sulfate 2 mg IV push.

4. Famotidine (Pepcid) 20 mg IV push.

22. The nurse should monitor the client with acute pancreatitis for which of the following complications?

1. Heart failure.

2. Duodenal ulcer.

3. Cirrhosis.

4. Pneumonia.

23. When providing care for a client hospitalized with acute pancreatitis who has acute abdominal pain, which of the following nursing interventions would be most appropriate for this client? **Select all that apply.**

1. Placing the client in a side-lying position.

2. Administering morphine sulfate for pain as needed.

3. Maintaining the client on a high-calorie, high-protein diet.

4. Monitoring the client's respiratory status.

5. Obtaining daily weights.

24. The nurse notes that a client with acute pancreatitis occasionally experiences muscle twitching and jerking. How should the nurse interpret the significance of these symptoms?

1. The client maybe developing hypocalcemia.

2. The client is experiencing a reaction to meperidine (Demerol).

3. The client has a nutritional imbalance.
4. The client needs a muscle relaxant to promote rest.

25. A client is receiving Propantheline bromide in the management of acute pancreatitis. Which of the following would indicate that the nurse should discuss withholding the medication with the physician?

- 1. Absent bowel sounds.**
2. Increased urine output.
3. Diarrhea.
4. Decreased heart rate.

26. Which of the following dietary instructions would be appropriate for the nurse to give a client who is recovering from acute pancreatitis?

- 1. Avoid crash dieting.**
2. Restrict carbohydrate intake.
3. Eat six small meals a day.
4. Decreasesodiuminthediet.

27. Pancreatic enzyme replacements are prescribed for the client with chronic pancreatitis. When should the nurse instruct the client to take them to obtain the most therapeutic effect?

1. Three times daily between meals.
- 2. With each meal and snack.**
3. In the morning and at bedtime.
4. Every 4 hours, at specified times.

28. The nurse should teach the client with chronic pancreatitis to monitor the effectiveness of pancreatic enzyme replacement therapy by doing which of the following?

1. Recording daily fluid intake.
2. Performing glucose fingerstick tests twice a day.
- 3. Observing stools for steatorrhea.**
4. Testing urine for ketones.

59. A nurse is assessing a client who has a potential diagnosis of pancreatitis. Which risk factors predispose the client to pancreatitis? **Select all that apply.**

- 1. Excessive alcohol use.**
- 2. Gallstones.**
- 3. Abdominal trauma.**
4. Hypertension.
- 5. Hyperlipidemia with excessive triglycerides.**
6. Hypothyroidism.

75. A nurse is analyzing a client's intake and output. The client has a temperature of 102°F (38.9°C) and is receiving IV fluid therapy because of the nothing-by-mouth status due to acute pancreatitis. Before planning nursing actions, the nurse should first consider which of the following?

1. The client's body mass index.
- 2. Insensible fluid loss through the lungs and skin.**
3. When the client last ate.
4. The number of bags of IV fluid for the client.

31. Which client laboratory data should the nurse report to the HCP immediately?

1. The elevated amylase report on a client diagnosed with acute pancreatitis.
2. The elevated WBC count on a client diagnosed with a septic leg wound.
- 3. The urinalysis report showing many bacteria in a client receiving chemotherapy.**
4. The serum glucose level of 235 mg/dL on a client diagnosed with type 1 diabetes.

655. During a hospital admission history, a nurse suspects acute pancreatitis when a 40-year-old client reports:

- 1. the sudden onset of intense pain in the upper left abdominal quadrant that radiates to the back.**
2. persistent abdominal pain in the lower abdomen that has shifted to the lower right quadrant.

3. bloody diarrhea and colicky abdominal pain.
4. mild upper abdominal pain and projectile vomiting.

ANSWER: 1

656. While performing an assessment of a client with acute pancreatitis, a nurse notes the following skin appearance. What should be the nurse's interpretation of this finding?



1. Seepage of blood-stained exudates from the pancreas has occurred.

2. The pancreatitis has caused the stomach to bleed and the blood is now in the interstitial tissue.
3. An intestinal obstruction that has increased vascular pressure has developed due to the pancreatic inflammation.
4. Portal hypertension has developed.

ANSWER: 1

658. A client recovering from acute pancreatitis that has been NPO (nothing per mouth) asks a nurse when he can begin eating again. Which response by the nurse is most accurate?

1. "As soon as you start to feel hungry you can begin eating."
2. "When you have active bowel sounds and you are passing flatus."
- 3. "When your pain is controlled and your serum lipase level has decreased."**

4. "Oral intake stimulates the pancreas so you will need to be NPO for at least 2 weeks from the day your disease was diagnosed to allow the pancreas to heal."

ANSWER: 3

13. A nurse is preparing to initiate total parenteral nutrition (TPN) for a client with acute pancreatitis, via a central venous line. The nurse has already properly identified the client and verified the order by comparing the container of TPN solution to the health-care provider's order. Prioritize the remaining steps that the nurse should take in preparing the TPN for administration.

- _____ Purge the intravenous (IV) tubing with the TPN solution
- _____ Check patency with saline and then connect the tubing to the client's central line port
- _____ Assess client's knowledge of TPN and educate as needed
- _____ Set the infusion pump at the prescribed rate and start the infusion
- _____ Select the appropriate tubing and filter
- _____ Place the tubing in a volume control IV pump

ANSWER: 3, 5, 1, 6, 2, 4

659. A 40-year-old client is recovering from an exacerbation of chronic pancreatitis. As the client prepares for discharge, the client makes several statements to a nurse. Which statement should be concerning to the nurse because it could inhibit the client's ability to accomplish the developmental tasks of middle adulthood?

1. "I'm planning on continuing to be active in the local town service club."
2. "I should be able to return to work in 3 weeks."
- 3. "I've really missed my friends. I'm looking forward to having a glass a wine with them."**
4. "My spouse has been very supportive."

ANSWER: 3

660. A client diagnosed with chronic pancreatitis, is concerned about pain control. A nurse explains to the client that the initial plan for controlling the pain of chronic pancreatitis involves the administration of:

1. opioid analgesic medications.
2. NSAIDs.
- 3. pancreatic enzymes with H₂ blocker medications.**
4. acetaminophen (Tylenol®) and low-carbohydrate diet.

ANSWER: 3

661. In preparation for providing care to a client immediately after a Whipple procedure, a nurse should anticipate that the nursing care plan may include:

- 1. monitoring the blood glucose levels.**
2. administering enteral feedings.
3. irrigating the nasogastric (NG) tube with 30 mL of saline every 4 hours.
4. assisting the client to the commode to promote bowel elimination within the first 8 hours post surgery.

664. A nurse is beginning client care and has been assigned to the following four clients. Which client should the nurse plan to assess first?

1. A 50-year-old client who has chronic pancreatitis and is reporting a pain level of 6 out of 10 on a numeric scale
- 2. A 47-year-old client with esophageal varices who has influenza and has been coughing for the last 30 minutes**
3. A 60-year-old client who had an open cholecystectomy 15 hours ago and has been stable through the night
4. A 54-year-old client with cirrhosis and jaundice who is reporting itching

ANSWER: 2

1085. A nurse evaluates that pancrelipase (Pancrease®) is having the optimal intended benefit for a client with cystic fibrosis when assessing that the client has:

1. lost weight.
2. relief of heartburn.
3. increased steatorrhea.
- 4. improved nutritional status.**

ANSWER: 4

18. The nurse is discharging a client with chronic pancreatitis. Which of the following measures would be essential to include in the client's discharge instruction?

1. Weight reduction and exercise program
2. Bowel retraining program including daily laxative administration
- 3. Diet modifications avoiding high-fat foods, caffeine, and alcohol**
4. Relaxation techniques and stress Management

32. The nurse assesses a client to be experiencing muscle cramps, numbness, and tingling of the extremities, and twitching of the facial muscle and eyelid when the facial nerve is tapped. The nurse reports this assessment as consistent with which of the following?

1. Hypokalemia
2. Hypernatremia
3. Hypermagnesemia
- 4. Hypocalcemia**

21. The nurse is administering medications. Which medication would the nurse question administering?

- 1. Morphine sulfate, an opioid, to a client diagnosed with pancreatitis.**
2. Diphenhydramine (Benadryl), an H₁ blocker, to a client with an allergic reaction.
3. Methylprednisolone (Solu-Medrol), a glucocorticoid, to a client with Type 2 diabetes.
4. Vasopressin (DDAVP), a hormone, to a client diagnosed with diabetes insipidus.

22. The nurse has received the morning report. Which medication should be administered first?

1. Levothyroxine (Synthroid), a hormone, to a client diagnosed with hypothyroidism.
2. Pantoprazole (Protonix), a proton-pump inhibitor, to a client diagnosed with GERD.

3. Acetaminophen (Tylenol) to a client with a migraine headache of “7” on the pain scale.

4. Pancreatin (Donnazyme), an enzyme, to a client diagnosed with chronic pancreatitis.

23. The client diagnosed with chronic pancreatitis has a nasogastric tube. The charge nurse observes the primary nurse instill an antacid down the tube and then clamp the tube. Which action should the charge nurse take?

1. Tell the nurse to reconnect the tube to suction.

2. Notify the unit manager of the nurse’s actions.

3. Do nothing because this is the correct procedure.

4. Instruct the nurse to administer the medication orally.

24. The HCP prescribed chlorthalidone (Librium), a sedative hypnotic, for a 55-year-old male client diagnosed with chronic pancreatitis. Which statement is the scientific rationale for prescribing this medication?

1. Librium acts as an adjunct to pain medication.

2. Librium limits complications related to alcohol withdrawal.

3. Librium prevents the nausea related to pancreatitis.

4. Librium is used as a sleep aid for clients who are NPO.

25. The client diagnosed with acute pancreatitis is complaining of severe abdominal pain. Which interventions should the nurse implement? **Select all that apply.**

1. Ask the client to rate the pain on a 1–10 pain scale.

2. Determine when the client received the last dose of medication.

3. Administer hydrocodone (Vicodin), a narcotic pain medication.

4. Assist the client to a semi-Fowler’s position.

5. Apply oxygen at 4 L/minute via nasal cannula.

26. The client diagnosed with acute pancreatitis is placed on total parenteral nutrition (TPN). Which intervention should the nurse implement?

1. Monitor blood glucose levels daily.

2. Assess the peripheral intravenous site.

3. Check the client’s complete blood count.

4. Change the tubing with every new bag of TPN.

27. The nurse is administering pancreatic secretin, a stimulatory hormone, to a client to rule out chronic pancreatitis. Which procedure should the nurse follow?

1. Have the client lie on the right side during the administration of the medication.

2. Make sure the client has signed a permit for an investigational procedure.

3. Aspirate gastric and duodenal contents before and after the medication.

4. Place the client in the Trendelenburg position before beginning the medication.

28. Which intervention should be implemented when discharging a client diagnosed with chronic pancreatitis who has been receiving high doses of meperidine (Demerol), an opioid, for the past 4 weeks?

1. Tell the client to monitor his or her stools and to avoid constipation.

2. Taper the medication slowly over several days prior to discharge.

3. Refer the client to a drug withdrawal clinic to stop taking the Demerol.

4. Discuss signs and symptoms of drug dependence to report to the HCP.

29. The male client diagnosed with pancreatitis is prescribed octreotide (Sandostatin), a hormone. Which data indicates the medication has been effective?

1. The client reports that the diarrhea has subsided.

2. The client states that he has grown 1 inch.

3. The client has no muscle cramping or pain.

4. The client has no complaints of heartburn.

30. The client diagnosed with pancreatitis is complaining of polydipsia and polyuria. Which medication should the nurse prepare to administer?

1. Humalog, a fast-acting insulin intravenously, and then monitor glucose levels.

2. Pancrelipase (Cotazym) sprinkled on the client’s food with meals.

3. Humulin R subcutaneously after assessing the blood glucose level.

4. Ranitidine (Zantac), a histamine₂ receptor blocker, orally.

Pancreatitis

25. The client is admitted to the medical department with a diagnosis of rule-out (R/O) acute pancreatitis. Which laboratory values should the nurse monitor to confirm this diagnosis?

1. Creatinine and (BUN).
2. Troponin and (CK-MB).
- 3. Serum amylase and lipase.**
4. Serum bilirubin and calcium.

26. Which client problem has priority for the client diagnosed with acute pancreatitis?

1. Risk for fluid volume deficit.
- 2. Alteration in comfort.**
3. Imbalanced nutrition: less than body requirements.
4. Knowledge deficit.

27. The nurse is preparing to administer a.m. medications to clients. Which medication should the nurse question before administering?

- 1. Pancreatic enzymes to the client who has finished breakfast.**
2. The pain medication, morphine, to the client who has a respiratory rate of 20.
3. The loop diuretic to the client who has a serum potassium level of 3.9 mEq/L.
4. The beta blocker to the client who has an apical pulse of 68 bpm.

28. The client is diagnosed with acute pancreatitis. Which health-care provider's admitting order should the nurse question?

1. Bedrest with bathroom privileges.
2. Initiate IV therapy of D5W at 125 mL/hr.
3. Weigh the client daily.
- 4. Low-fat, low-carbohydrate diet.**

29. The nurse is completing discharge teaching to the client diagnosed with acute pancreatitis. Which instruction should the nurse discuss with the client?

1. Instruct the client to decrease alcohol intake.
2. Explain the need to avoid all stress.
- 3. Discuss the importance of stopping smoking.**
4. Teach the correct way to take pancreatic enzymes.

30. The male client diagnosed with chronic pancreatitis calls and reports to the clinic nurse he has been having a lot of "gas," along with frothy and very foul-smelling stools. Which intervention should the nurse implement?

1. Explain this is common for chronic pancreatitis.
2. Ask the client to bring in a stool specimen to the clinic.
- 3. Arrange an appointment with the HCP for today.**
4. Discuss the need to decrease fat in the diet so this won't happen.

31. The nurse is discussing complications of chronic pancreatitis with a client diagnosed with the disease. Which complication should the nurse discuss with the client?

1. Diabetes insipidus (DI).
2. Crohn's disease.
- 3. Narcotic addiction.**
4. Peritonitis.

32. The client is immediate post procedure endoscopic retrograde cholangiopancreatogram (ERCP). Which intervention should the nurse implement?

1. Assess for rectal bleeding.
2. Increase fluid intake.
- 3. Assess gag reflex.**
4. Keep in supine position.

33. The client diagnosed with acute pancreatitis is in pain. Which position should the nurse assist the client to assume to help decrease the pain?

1. Recommend lying in the prone position with legs extended.
2. Maintain a tripod position over the bedside table.
3. **Place in side-lying position with knees flexed.**
4. Encourage a supine position with a pillow under the knees.

34. The client with an acute exacerbation of chronic pancreatitis has a nasogastric (N/G) tube. Which interventions should the nurse implement? **Select all that apply.**

1. **Monitor the client's bowel sounds.**
2. Monitor the client's food intake.
3. **Assess the client's intravenous site.**
4. **Provide oral and nasal care.**
5. **Monitor the client's blood glucose.**

35. The nurse is administering a pancreatic enzyme to the client diagnosed with chronic pancreatitis. Which statement best explains the rationale for administering this medication?

1. **It is an exogenous source of protease, amylase, and lipase.**
2. This enzyme increases the number of bowel movements.
3. This medication breaks down in the stomach to help with digestion.
4. Pancreatic enzymes help break down fat in the small intestine.

36. The client diagnosed with acute pancreatitis is being discharged home. Which statement by the client indicates the teaching has been effective?

1. "I should decrease my intake of coffee, tea, and cola."
2. **"I will eat a low-fat diet and avoid spicy foods."**
3. "I will check my amylase and lipase levels daily."
4. "I will return to work tomorrow but take it easy."

Cancer of the Pancreas

37. The nurse is assessing a client with complaints of vague upper abdominal pain worse at night but relieved by sitting up and leaning forward. Which assessment question should the nurse ask next?

1. "Have you noticed a yellow haze when you look at things?"
2. **"Does the pain get worse when you eat a meal or snack?"**
3. "Have you had your amylase and lipase checked recently?"
4. "How much weight have you gained since you saw an HCP?"

38. The nurse caring for a client diagnosed with cancer of the pancreas writes the problem of "altered nutrition: less than body requirements." Which collaborative intervention should the nurse include in the plan of care?

1. Continuous feedings via (PEG) tube.
2. Have the family bring in foods from home.
3. Assess for food preferences.
4. **Refer to the dietitian.**

39. The nurse is planning a program for clients at a health fair regarding the prevention and early detection of cancer of the pancreas. Which self-care activity should the nurse discuss as an example of a primary nursing intervention?

1. Monitor for elevated blood glucose at random intervals.
2. Inspect the skin and sclera of the eyes for a yellow tint.
3. **Limit meat in the diet and eat a diet low in fat.**
4. Instruct the client with hyperglycemia about insulin injections.

40. The nurse and an unlicensed assistive personnel (UAP) are caring for clients on an oncology floor. Which intervention should the nurse delegate to the UAP?

1. **Assist the client with abdominal pain to turn to the side and flex the knees.**
2. Monitor the Jackson Pratt drainage tube to ensure it is draining properly.
3. Check to see if the client is sleeping after pain medication is administered.
4. Empty the bedside commode of the client who has been having melena.

41. The client diagnosed with cancer of the pancreas is being discharged to start chemotherapy in the HCP's office. Which statement made by the client indicates the client understands the discharge instructions?

1. "I will have to see the HCP every day for six (6) weeks for my treatments."
- 2. "I should write down all my questions so I can ask them when I see the HCP."**
3. "I am sure this is not going to be a serious problem for me to deal with."
4. "The nurse will give me an injection in my leg and I will get to go home."

42. The client is being admitted to the outpatient department prior to an endoscopic retrograde cholangiopancreatogram (ERCP) to rule out cancer of the pancreas. Which pre procedure instruction should the nurse teach?

1. Prepare to be admitted to the hospital after the procedure for observation.
2. If something happens during the procedure, then emergency surgery will be done.
- 3. Do not eat or drink anything after midnight the night before the test.**
4. If done correctly, this procedure will correct the blockage of the stomach.

43. The client is diagnosed with cancer of the head of the pancreas. Which signs and symptoms should the nurse expect to assess?

- 1. Clay-colored stools and dark urine.**
2. Night sweats and fever.
3. Left lower abdominal cramps and tenesmus.
4. Nausea and coffee-ground emesis.

44. The client diagnosed with cancer of the head of the pancreas is two (2) days post- pancreatoduodenectomy (Whipple's procedure). Which nursing problem has the highest priority?

1. Anticipatory grieving.
- 2. Fluid volume imbalance.**
3. Alteration in comfort.
4. Altered nutrition.

45. The client had a total pancreatectomy and splenectomy for cancer of the body of the pancreas. Which discharge instructions should the nurse teach? **Select all that apply.**

1. Keep a careful record of intake and output.
- 2. Use a stool softener or bulk laxative regularly.**
- 3. Use correct insulin injection technique.**
- 4. Take the pain medication before the pain gets too bad.**
5. Sleep with the head of the bed on blocks.

46. The client admitted to rule out pancreatic islet tumors complains of feeling weak, shaky, and sweaty. Which priority intervention should be implemented by the nurse?

1. Start an IV with D5W.
2. Notify the health-care provider.
- 3. Perform a bedside glucose check.**
4. Give the client some orange juice.

47. The home health nurse is admitting a client diagnosed with cancer of the pancreas. Which information is the most important for the nurse to discuss with the client?

1. Determine the client's food preferences.
- 2. Ask the client if there is an advance directive.**
3. Find out about insurance/Medicare reimbursement.
4. Explain the client should eat as much as possible.

48. The nurse caring for a client diagnosed with cancer of the pancreas writes the nursing diagnosis of "risk for altered skin integrity related to pruritus." Which intervention should the nurse implement?

1. Assess tissue turgor.
2. Apply antifungal creams.
3. Monitor bony prominences for breakdown.
- 4. Have the client keep the fingernails short.**

The Client with Viral Hepatitis

29. The nurse is assessing a client with chronic hepatitis B who is receiving lamivudine. What information is most important to communicate to the physician?

- 1. The client has had a 3-kg weight gain over 2 days.**
2. The client has nausea.
3. The client now has a temperature of 99°F (37.2°C) orally.
4. The client has fatigue.

30. The nurse is assessing a client with hepatitis and notices that the aspartate transaminase (AST) and alanine transaminase (ALT) lab values have increased. Which of the following statements by the client requires further instruction by the nurse?

1. "I require increased periods of rest."
2. "I follow a low-fat, high-carbohydrate diet."
3. "I eat dry toast to relieve my nausea."
- 4. "I take acetaminophen (Tylenol) for arthritis pain."**

31. College freshmen are participating in a study abroad program. When teaching them about hepatitis B, the nurse should instruct the students on the need for:

1. Water sanitation.
2. Single dormitory rooms.
3. Vaccination for hepatitis D.
- 4. Safe sexual practices.**

32. Which of the following is normal for a client during the icteric phase of viral hepatitis?

1. Tarry stools.
- 2. Yellowed sclera.**
3. Shortness of breath.
4. Light, frothy urine.

33. The nurse is teaching a client with viral hepatitis about preventing transmission of the disease. The nurse should focus teaching on:

- 1. Proper food handling.**
2. Insulin syringe disposal.
3. Alpha-interferon.
4. Use of condoms.

34. A client has a positive serologic test for anti-HCV (hepatitis C virus). The nurse should instruct the client:

1. How to self-administer alpha interferon.
2. That the HCV will resolve in approximately 3 months.
- 3. That a follow-up appointment for HCV genotype testing is required.**
4. To take alpha interferon as prescribed.

35. A client with chronic hepatitis C is experiencing nausea, anorexia, and fatigue. During the health history the client states that he is homosexual, drinks one to two glasses of wine with dinner, is taking St. John's Wort for a "bit of depression," and takes Tylenol for frequent headaches. The nurse should do which of the following? **Select all that apply.**

1. Instruct the client that the wine with meals can be beneficial for cardiovascular health.
- 2. Instruct the client to ask the health care provider about taking any other medications as they may interact with medications the client is currently taking.**
3. Instruct the client to increase the protein in his diet and eat less frequently.
- 4. Advise the client of the need for additional testing for HIV.**
- 5. Encourage the client to obtain sufficient rest.**

36. A client who is recovering from hepatitis A has fatigue and malaise. The client asks the nurse, "When will my strength return?" Which of the following responses by the nurse is most appropriate?

1. "Your fatigue should be gone by now. We will evaluate you for a secondary infection."
2. "Your fatigue is an adverse effect of your drug therapy. It will disappear when your treatment regimen is complete."
3. "It is important for you to increase your activity level. That will help decrease your fatigue."

4. "It is normal for you to feel fatigued. The fatigue should go away in the next 2 to 4 months."

37. The nurse is developing a plan of care for the client with viral hepatitis. The nurse should instruct the client to:

1. Obtain adequate bed rest.

2. Increase fluid intake.
3. Take antibiotic therapy as prescribed.
4. Drink 8 oz (240 mL) of an electrolyte solution everyday.

38. When planning care for a client with viral hepatitis, the nurse should review laboratory reports for which of the following abnormal laboratory values?

1. Prolonged prothrombin time.

2. Decreased blood glucose level.
3. Elevated serum potassium level.
4. Decreased serum calcium level.

39. The nurse should teach the client with viral hepatitis to:

1. Limit caloric intake and reduce weight.

2. Increase carbohydrates and protein in the diet.

3. Avoid contact with others and sleep in a separate room.
4. Intensify routine exercise and increase strength.

40. The nurse develops a teaching plan for the client about how to prevent the transmission of hepatitis A. Which of the following discharge instructions is appropriate for the client?

1. Spray the house to eliminate infected insects.

2. Tell family members to try to stay away from the client.

3. Tell family members to wash their hands frequently.

4. Disinfect all clothing and eating utensils.

41. The client with hepatitis is experiencing fatigue, weakness, and a general feeling of malaise. The client tires rapidly during morning care. The most appropriate goal for this client is to:

1. Increase mobility.

2. Learn new self-care skills.

3. Adapt to new levels of energy.

4. Gradually increase activity tolerance.

42. What would be the nurse's best response to the client's expressed feelings of isolation as a result of having hepatitis?

1. "Don't worry. It's normal to feel that way."

2. "Your friends are probably afraid of contracting hepatitis from you."

3. "I'm sure you're imagining that!"

4. "Tell me more about your feelings of isolation."

43. Interferon alfa-2b (Intron A) has been prescribed to treat a client with chronic hepatitis B. The nurse should assess the client for which of the following adverse effects?

1. Retinopathy.

2. Constipation.

3. Flulike symptoms.

4. Hypoglycemia.

44. The nurse is preparing a community education program about preventing hepatitis B infection. Which of the following would be appropriate to incorporate into the teaching plan?

1. Hepatitis B is relatively uncommon among college students.

2. Frequent ingestion of alcohol can predispose an individual to development of hepatitis B.

3. Good personal hygiene habits are most effective at preventing the spread of hepatitis B.

4. The use of a condom is advised for sexual intercourse.

45. Which of the following expected outcomes would be appropriate for a client with viral hepatitis? The client will:

1. Demonstrate a decrease in fluid retention related to ascites.
- 2. Verbalize the importance of reporting bleeding gums or bloody stools.**
3. Limit use of alcohol to two to three drinks per week.
4. Restrict activity to within the home to prevent disease transmission.

The Client with Cirrhosis

46. A client with cirrhosis is receiving lactulose. During the assessment, the nurse notes increased confusion and asterixis. The nurse should:

- 1. Assess for gastrointestinal (GI) bleeding.**
2. Hold the lactulose.
3. Increase protein in the diet.
4. Monitor serum bilirubin levels.

47. The nurse is assessing a client with cirrhosis who has developed hepatic encephalopathy. The nurse should notify the physician of a decrease in which serum lab value that is a potential precipitating factor for hepatic encephalopathy?

1. Aldosterone.
2. Creatinine.
- 3. Potassium.**
4. Protein.

48. A client has advanced cirrhosis of the liver. The client's spouse asks the nurse why his abdomen is swollen, making it very difficult for him to fasten his pants. How should the nurse respond to provide the most accurate explanation of the disease process?

1. "He must have been eating too many foods with salt in them. Salt pulls water with it."
2. "The swelling in his ankles must have moved up closer to his heart so the fluid circulates better."
3. "He must have forgotten to take his daily water pill."
- 4. "Blood is not able to flow readily through the liver now, and the liver cannot make protein to keep fluid inside the blood vessels."**

49. A nurse is developing a care plan for a client with hepatic encephalopathy. Which of the following are goals for the care for this client? **Select all that apply.**

- 1. Preventing constipation.**
- 2. Administering lactulose to reduce blood ammonia levels.**
- 3. Monitoring coordination while walking.**
- 4. Checking the pupil reaction.**
- 5. Providing food and fluids high in carbohydrate.**
6. Encouraging physical activity.

50. The nurse is assessing a client who is in the early stages of cirrhosis of the liver. Which focused assessment is appropriate?

1. Peripheral edema.
2. Ascites.
- 3. Anorexia.**
4. Jaundice.

51. A client with cirrhosis begins to develop ascites. Spironolactone (Aldactone) is prescribed to treat the ascites. The nurse should monitor the client closely for which of the following drug-related adverse effects?

1. Constipation.
- 2. Hyperkalemia.**
3. Irregular pulse.
4. Dysuria.

52. What diet should be implemented for a client who is in the early stages of cirrhosis?

- 1. High-calorie, high-carbohydrate.**
2. High-protein, low-fat.
3. Low-fat, low-protein.

4. High-carbohydrate, low-sodium.

53. A client with jaundice has pruritus and areas of irritation from scratching. What measures can the nurse discuss to prevent skin breakdown? **Select all that apply.**

1. Avoid lotions containing calamine.
- 2. Add baking soda to the water in a tub bath.**
- 3. Keep nails short and clean.**
- 4. Rub the skin when it itches with knuckles instead of nails.**
5. Massage skin with alcohol.
6. Increase sodium intake in diet.

54. Which of the following health promotion activities would be appropriate for the nurse to suggest that the client with cirrhosis add to the daily routine at home?

1. Supplement the diet with daily multivitamins.
- 2. Abstain from drinking alcohol.**
3. Take a sleeping pill at bedtime.
4. Limit contact with other people whenever possible.

55. The nurse is reviewing the chart information for a client with increased ascites. The data include the following: temperature 37.2°C, heart rate 118, shallow respirations 26, blood pressure 128/76, and SpO₂ 89% on room air. Which action should receive priority by the nurse?

1. Assess heart sounds.
2. Obtain a prescription for blood cultures.
3. Prepare for a paracentesis.
- 4. Raise the head of the bed.**

56. Which of the following positions would be appropriate for a client with severe ascites?

- 1. Fowler's.**
2. Side-lying.
3. Reverse Trendelenburg.
4. Sims.

57. The client with cirrhosis receives 100 mL of 25% serum albumin IV. Which finding would best indicate that the albumin is having its desired effect?

- 1. Increased urine output.**
2. Increased serum albumin level.
3. Decreased anorexia.
4. Increased ease of breathing.

58. A client with a Sengstaken-Blakemore tube has a sudden drop in SpO₂ and increase in respiratory rate to 40 breaths/min. The nurse should do which of the following in order from first to last?

- 1. Affirm airway obstruction by the tube.**
- 3. Deflate the tube by cutting with bedside scissors.**
- 2. Remove the tube.**
- 4. Apply oxygen via face mask.**

59. The health care provider instructs a client with alcohol-induced cirrhosis to stop drinking alcohol. The expected outcome of this intervention is:

1. Absence of delirium tremens.
2. Having a balanced diet.
- 3. Improved liver function.**
4. Reduced weight.

60. The nurse monitors a client with cirrhosis for the development of hepatic encephalopathy. Which of the following would be an indication that hepatic encephalopathy is developing?

- 1. Decreased mental status.**
2. Elevated blood pressure.
3. Decreased urine output.

4. Labored respirations.

61. A client's serum ammonia level is elevated, and the physician prescribes 30 mL of lactulose. Which of the following is an adverse effect of this drug?

1. Increased urine output.
2. Improved level of consciousness.
- 3. Increased bowel movements.**
4. Nausea and vomiting.

The nurse has a prescription to administer 2 oz of lactulose to a client who has cirrhosis. How many milliliters of lactulose should the nurse administer?

60_mL.

63. A client is to be discharged with a prescription for lactulose. The nurse teaches the client and the client's spouse how to administer this medication. Which of the following statements would indicate that the client has understood the information?

1. "I'll take it with Maalox."
- 2. "I'll mix it with apple juice."**
3. "I'll take it with a laxative."
4. "I'll mix the crushed tablets in some gelatin."

64. The nurse is providing discharge instructions for a client with cirrhosis. Which of the following statements best indicates that the client has understood the teaching?

1. "I should eat a high-protein, high-carbohydrate diet to provide energy."
2. "It is safer for me to take acetaminophen (Tylenol) for pain instead of aspirin."
- 3. "I should avoid constipation to decrease chances of bleeding."**
4. "If I get enough rest and follow my diet, it is possible for my cirrhosis to be cured."

65. The nurse is preparing a client for a paracentesis. The nurse should:

- 1. Have the client void immediately before the procedure.**
2. Place the client in a side-lying position.
3. Initiate an IV line to administer sedatives.
4. Place the client on nothing-by-mouth (NPO) status 6 hours before the procedure.

66. A client with ascites and peripheral edema is at risk for impaired skin integrity. To prevent skin breakdown, the nurse should:

1. Institute range-of-motion (ROM) exercise every 4 hours.
2. Massage the abdomen once a shift.
- 3. Use an alternating air pressure mattress.**
4. Elevate the lower extremities.

67. The nurse is planning a staff development program on how to care for clients with hepatitis A. Which of the following precautions should the nurse indicate as essential when caring for clients with hepatitis A?

1. Gowning when entering a client's room.
2. Wearing a mask when providing care.
3. Assigning the client to a private room.
- 4. Wearing gloves when giving direct care.**

68. After completing assessment rounds, which of the following should the nurse discuss with the physician first?

1. A client with cirrhosis who is depressed and has refused to eat for the past 2 days.
2. A client with stable vital signs that has been receiving IV cipro following a cholecystectomy for 1 day and has developed a rash on the chest and arms.
3. A client with pancreatitis whose family requests to speak with the physician regarding the treatment plan.
- 4. A client with hepatitis whose pulse was 84 and regular and is now 118 and irregular.**

69. The nurse's assignment consists of the following four clients. From highest to lowest priority, in which order should the nurse assess the clients after receiving morning report?

- 1. The client with cirrhosis who became confused and disoriented during the night.**

3. The client with acute pancreatitis who is requesting pain medication.
2. The client who is 1 day postoperative following a cholecystectomy and has a t-tube inserted.
4. The client with hepatitis B who has questions about discharge instructions.

70. The nurse should institute which of the following measures to prevent transmission of the hepatitis C virus to health care personnel?

1. Administering hepatitis C vaccine to all health care personnel.
2. Decreasing contact with blood and blood-contaminated fluids.
3. Wearing gloves when emptying the bedpan.
4. Wearing a gown and mask when providing direct care.

646. The serum ammonia level of a client with cirrhosis is elevated. As a priority, a nurse should plan to:

1. monitor the client's temperature every 4 hours.
2. observe for increasing confusion.
3. measure the urine specific gravity.
4. restrict the client's oral fluid intake.

647. A client is hospitalized for conservative treatment of cirrhosis. As part of the collaborative plan of care, a nurse would anticipate:

1. monitoring the client's blood sugar.
2. maintaining NPO (nothing by mouth) status.
3. administering antibiotics.
4. encouraging frequent ambulation.

648. While caring for a male client with cirrhosis, a nurse adds the nursing diagnosis Disturbed body image related to physical manifestations of illness when the client is overheard telling his brother:

1. "I don't think I can handle this disease."
2. "I know the doctors say I have liver failure, but I don't really believe them."
3. "I know I should rest more, but I'm just not that type of person."
4. "I don't like the fact that I seem to have breasts now."

649. A client diagnosed with cirrhosis is scheduled for a transjugular intrahepatic portosystemic shunt (TIPS) placement. A nurse realizes the client does not understand the procedure when the client says:

1. "I hope my abdominal incision heals better after this procedure than it did when I had my appendix out."
2. "This procedure should decrease the risk that I might have another episode of bleeding from my esophagus."
3. "I know the shunt they are placing could become occluded in the future."
4. "This procedure should keep me from getting so much fluid buildup in my abdomen."

650. After completing discharge education, a nurse recognizes the need for further teaching when a client, diagnosed with cirrhosis, says:

1. "I know propranolol (Inderal®) has been ordered to decrease my blood pressure."
2. "I plan to stop drinking alcohol."
3. "I am going to work only part-time."
4. "I know furosemide (Lasix®) will help to keep me from developing abdominal swelling."

1827. A family notices that their father, who has been diagnosed with cirrhosis, has become increasingly irritable and restless. A health-care practitioner orders a protein-restricted diet. A nurse should explain to the client and family that this dietary change will:

1. help to restore their father's liver function.
2. help reduce the amount of ammonia in their father's blood.
3. give their father's liver a chance to rest, since proteins in the diet make the liver work harder.
4. prevent fluid from leaking into their father's abdomen.

80. During the emergency insertion of a central venous line in a client diagnosed with hepatitis B (HBV), a nurse suffers a needle-stick injury from a blood-contaminated needle. The nurse goes directly to the hospital's occupational health service. Which immediate treatment should the nurse anticipate receiving?

1. Administration of hepatitis B immune globulin (HBIG) and initiation of the hepatitis vaccine if the nurse has not been previously vaccinated

2. Administration of hepatitis B immune globulin (HBIG)
3. Blood tests for the presence of hepatitis B antigens and administration of HBIG 1 week later
4. Blood tests for the presence of hepatitis B antigens and treatment with HBIG if the tests are positive

254. A nurse admits a male client to a hospital with exacerbation of asthma. During the admission history, the nurse learns that the client has a history of chronic hepatitis C. Which precautions should the nurse plan to implement based on the transmission of the hepatitis C virus?

1. Airborne
2. Contact
3. Droplet

4. Standard

1232. A public health nurse is caring for a 10-year-old child who is diagnosed with hepatitis A. The nurse is instructing the parents to avoid giving their child oral medications. Which is the nurse's rationale for giving this instruction?

1. The child does not need pain medications because there is no pain associated with hepatitis A.
2. The medication of choice is antibiotics, and the child will be on those only while hospitalized.

3. Normal medication doses may become dangerous due to the liver's inability to detoxify and excrete them.

4. The foods provided will contain all of the natural substances the child will need for recovery.

9. Which actions should be taken by a nurse when admitting a client diagnosed with hepatitis C (HCV)?

1. Admits the client to a private room and initiates droplet isolation precautions
- 2. Admits the client to a semiprivate room and initiates standard precautions**
3. Admits the client to a private room and initiates airborne isolation precautions
4. Admits the client to a semiprivate room and initiates contact isolation precautions

Chapter 58: Care of Patients with Liver Problems

1. A nurse obtains a client's health history at a community health clinic. Which statement alerts the nurse to provide health teaching to this client?

- a. I drink two glasses of red wine each week.
- b. I take a lot of Tylenol for my arthritis pain.**
- c. I have a cousin who died of liver cancer.
- d. I got a hepatitis vaccine before traveling.

ANS: B

2. A nurse cares for a client who has cirrhosis of the liver. Which action should the nurse take to decrease the presence of ascites?

- a. Monitor intake and output.
- b. Provide a low-sodium diet.**
- c. Increase oral fluid intake.
- d. Weigh the client daily.

ANS: B

3. A nurse assesses a client who is recovering from a paracentesis 1 hour ago. Which assessment finding requires action by the nurse?

- a. Urine output via indwelling urinary catheter is 20 mL/hr**
- b. Blood pressure increases from 110/58 to 120/62 mm Hg
- c. Respiratory rate decreases from 18 to 14 breaths/min
- d. A decrease in the client's weight by 6 kg

ANS: A

4. A nurse cares for a client who is hemorrhaging from bleeding esophageal varices and has an esophagogastric tube. Which action should the nurse take first?

- a. Sedate the client to prevent tube dislodgement.
- b. Maintain balloon pressure at 15 and 20 mm Hg.
- c. Irrigate the gastric lumen with normal saline.

d. Assess the client for airway patency.

ANS: D

5. A nurse assesses a client who is prescribed an infusion of vasopressin (Pitressin) for bleeding esophageal varices. Which clinical manifestation should alert the nurse to a serious adverse effect?

- a. Nausea and vomiting
- b. Frontal headache
- c. Vertigo and syncope

d. Mid-sternal chest pain

ANS: D

6. A nurse cares for a client with hepatic portal-systemic encephalopathy (PSE). The client is thin and cachectic in appearance, and the family expresses distress that the client is receiving little dietary protein. How should the nurse respond?

a. A low-protein diet will help the liver rest and will restore liver function.

b. Less protein in the diet will help prevent confusion associated with liver failure.

- c. Increasing dietary protein will help the client gain weight and muscle mass.
- d. Low dietary protein is needed to prevent fluid from leaking into the abdomen.

ANS: B

7. A nurse cares for a client who is prescribed lactulose (Heptalac). The client states, I do not want to take this medication because it causes diarrhea. How should the nurse respond?

a. Diarrhea is expected; that's how your body gets rid of ammonia.

- b. You may take Kaopectate liquid daily for loose stools.
- c. Do not take any more of the medication until your stools firm up.
- d. We will need to send a stool specimen to the laboratory.

ANS: A

8. After teaching a client who has been diagnosed with hepatitis A, the nurse assesses the client's understanding. Which statement by the client indicates a correct understanding of the teaching?

a. Some medications have been known to cause hepatitis A.

b. I may have been exposed when we ate shrimp last weekend.

- c. I was infected with hepatitis A through a recent blood transfusion.
- d. My infection with Epstein-Barr virus can co-infect me with hepatitis A.

ANS: B

9. A nurse assesses clients at a community health fair. Which client is at greatest risk for the development of hepatitis B?

a. A 20-year-old college student who has had several sexual partners

- b. A 46-year-old woman who takes acetaminophen daily for headaches
- c. A 63-year-old businessman who travels frequently across the country
- d. An 82-year-old woman who recently ate raw shellfish for dinner

ANS: A

10. A nurse teaches a client with hepatitis C who is prescribed ribavirin (Copegus). Which statement should the nurse include in this client's discharge education?

a. Use a pill organizer to ensure you take this medication as prescribed.

- b. Transient muscle aching is a common side effect of this medication.
- c. Follow up with your provider in 1 week to test your blood for toxicity.
- d. Take your radial pulse for 1 minute prior to taking this medication.

ANS: A

11. After teaching a client who has plans to travel to a non-industrialized country, the nurse assesses the client's understanding regarding the prevention of viral hepatitis. Which statement made by the client indicates a need for additional teaching?

- a. I should drink bottled water during my travels.
- b. I will not eat off another's plate or share utensils.

c. I should eat plenty of fresh fruits and vegetables.

d. I will wash my hands frequently and thoroughly. ANS: C

13. A nurse assesses clients on the medical-surgical unit. Which client is at greatest risk for the development of carcinoma of the liver?

- a. A 22-year-old with a history of blunt liver trauma
- b. A 48-year-old with a history of diabetes mellitus
- c. A 66-year-old who has a history of cirrhosis**
- d. An 82-year-old who has chronic malnutrition

ANS: C

15. After teaching a client who has alcohol-induced cirrhosis, a nurse assesses the clients understanding. Which statement made by the client indicates a need for additional teaching?

- a. I cannot drink any alcohol at all anymore.
- b. I need to avoid protein in my diet.**
- c. I should not take over-the-counter medications.
- d. I should eat small, frequent, balanced meals.

ANS: B

16. A nurse cares for a client with hepatopulmonary syndrome who is experiencing dyspnea with oxygen saturations at 92%. The client states, I do not want to wear the oxygen because it causes my nose to bleed. Get out of my room and leave me alone! Which action should the nurse take?

- a. Instruct the client to sit in as upright a position as possible.**
- b. Add humidity to the oxygen and encourage the client to wear it.
- c. Document the clients refusal, and call the health care provider.
- d. Contact the provider to request an extra dose of the clients diuretic.

ANS: A

17. A nurse cares for a client who is scheduled for a paracentesis. Which intervention should the nurse delegate to an unlicensed assistive personnel (UAP)?

- a. Have the client sign the informed consent form.
- b. Assist the client to void before the procedure.**
- c. Help the client lie flat in bed on the right side.
- d. Get the client into a chair after the procedure.

ANS: B

18. A nurse cares for a client who has chronic cirrhosis from substance abuse. The client states, All of my family hates me. How should the nurse respond?

- a. You should make peace with your family.
- b. This is not unusual. My family hates me too.
- c. I will help you identify a support system.**
- d. You must attend Alcoholics Anonymous.

ANS: C

19. A nurse cares for a client with hepatitis C. The clients brother states, I do not want to contract this infection, so I will not go into his hospital room. How should the nurse respond?

- a. If you wear a gown and gloves, you will not get this virus.
- b. Viral hepatitis is not spread through casual contact.**
- c. This virus is only transmitted through a fecal specimen.
- d. I can give you an update on your brothers status from here.

ANS: B

1. An infection control nurse develops a plan to decrease the number of health care professionals who contract viral hepatitis at work. Which ideas should the nurse include in this plan? (Select all that apply.)

- a. Policies related to consistent use of Standard Precautions**
- b. Hepatitis vaccination mandate for workers in high-risk areas
- c. Implementation of a needleless system for intravenous therapy**
- d. Number of sharps used in client care reduced where possible**
- e. Postexposure prophylaxis provided in a timely manner**

ANS: A, C, D, E

2. A nurse assesses a client who has liver disease. Which laboratory findings should the nurse recognize as potentially causing complications of this disorder? **(Select all that apply.)**

a. Elevated aspartate transaminase

b. Elevated international normalized ratio (INR)

c. Decreased serum globulin levels

d. Decreased serum alkaline phosphatase

e. Elevated serum ammonia

f. Elevated prothrombin time (PT)

ANS: B, E, F

3. A nurse delegates hygiene care for a client who has advanced cirrhosis to an unlicensed nursing personnel (UAP). Which statements should the nurse include when delegating this task to the UAP? **(Select all that apply.)**

a. Apply lotion to the clients dry skin areas.

b. Use a basin with warm water to bathe the client.

c. For the clients oral care, use a soft toothbrush.

d. Provide clippers so the client can trim the fingernails. e. Bathe with antibacterial and water-based soaps.

ANS: A, C, D

4. A nurse assesses a male client who has symptoms of cirrhosis. Which questions should the nurse ask to identify potential factors contributing to this laboratory result? **(Select all that apply.)**

a. How frequently do you drink alcohol?

b. Have you ever had sex with a man?

c. Do you have a family history of cancer?

d. Have you ever worked as a plumber?

e. Were you previously incarcerated?

ANS: A, B, E

5. A nurse plans care for a client who has hepatopulmonary syndrome. Which interventions should the nurse include in this clients plan of care? **(Select all that apply.)**

a. Oxygen therapy

b. Prone position

c. Feet elevated on pillows

d. Daily weights

e. Physical therapy

ANS: A, C, D