

320. If the ovum is fertilized by a spermatozoon carrying a Y chromosome, a male zygote is formed.
321. Implantation occurs when the cellular walls of the blastocyte implants itself in the endometrium, usually 7 to 9 days after fertilization.
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323. Heart development in the embryo begins at 2 to 4 weeks and is complete by the end of the embryonic stage.
324. The administration of folic acid during the early stages of gestation may prevent neural tube defects.
325. With advanced maternal age, a common genetic problem is Down syndrome.
326. With early maternal age, cephalopelvic disproportion commonly occurs.
327. In the early postpartum period, the fundus should be midline at the umbilicus.
328. A rubella vaccine shouldn't be given to a pregnant woman. The vaccine can be administered after delivery, but the patient should be instructed to avoid becoming pregnant for 3 months.
329. A 16-year-old girl who is pregnant is at risk for having a low-birth-weight neonate.
330. The mother's Rh factor should be determined before an amniocentesis is performed.
331. Maternal hypotension is a complication of spinal block.
332. After delivery, if the fundus is boggy and deviated to the right side, the patient should empty her bladder.
333. Before providing a specimen for a sperm count, the patient should avoid ejaculation for 48 to 72 hours.
334. The hormone human chorionic gonadotropin is a marker for pregnancy.
335. Painless vaginal bleeding during the last trimester of pregnancy may indicate placenta previa.
336. During the transition phase of labor, the woman usually is irritable and restless.
337. Because women with diabetes have a higher incidence of birth anomalies than women without diabetes, an alpha-fetoprotein level may be ordered at 15 to 17 weeks' gestation.
338. To avoid puncturing the placenta, a vaginal examination shouldn't be performed on a pregnant patient who is bleeding.
339. A patient who has postpartum hemorrhage caused by uterine atony should be given oxytocin as prescribed.
340. Laceration of the vagina, cervix, or perineum produces bright red bleeding that often comes in spurts. The bleeding is continuous, even when the fundus is firm.
341. Hot compresses can help to relieve breast tenderness after breast-feeding.
342. The fundus of a postpartum patient is massaged to stimulate contraction of the uterus and prevent hemorrhage.
343. A mother who has a positive human immunodeficiency virus test result shouldn't breast-feed her infant.
344. Dinoprostone (Cervidil) is used to ripen the cervix.
345. Breast-feeding of a premature neonate born at 32 weeks' gestation can be accomplished if the mother expresses milk and feeds the neonate by gavage.
346. If a pregnant patient's rubella titer is less than 1:8, she should be immunized after delivery.
347. The administration of oxytocin (Pitocin) is stopped if the contractions are 90 seconds or longer.

30. The primary problem in cataract is blurring of vision.
31. The primary reason for performing iridectomy after cataract extraction is to prevent secondary glaucoma.
32. In acute glaucoma, the obstruction of the flow of aqueous humor is caused by displacement of the iris.
33. Glaucoma is characterized by irreversible blindness.
34. Hyperopia is corrected by convex lens.
35. Pterygium is caused primarily by exposure to dust.
36. A sterile chronic granulomatous inflammation of the meibomian gland is chalazion.
37. The surgical procedure w/c involves removal of the eyeball is enucleation.
38. The client is for EEG this morning. Prepare him for the procedure by rendering hair shampoo, excluding caffeine from his meal & instructing the client to remain still during the procedure.
39. If the client w/ increased ICP demonstrates decorticate posturing, observe for flexion of elbows, extension of the knees, plantar flexion of the feet,
40. The nursing diagnosis that would have the highest priority in the care of the client who has become comatose following cerebral hemorrhage is Ineffective Airway Clearance.
41. The initial nursing action—for a client who is in the clonic phase of a tonic-clonic seizure—is to obtain equipment for orotracheal suctioning.
42. The first nursing intervention in a quadriplegic client who is experiencing autonomic dysreflexia is to elevate his head as high as possible.
43. Following surgery for a brain tumor near the hypothalamus, the nursing assessment should include observing for inability to regulate body temp.
44. Post-myelogram (using metrizamide (Amipaque) care includes keeping head elevated for at least 8 hrs.
45. Homonymous hemianopia is described by a client had CVA & can only see the nasal visual field on one side & the temporal portion on the opposite side.
46. Ticlopidine may be prescribed to prevent thromboembolic CVA.
47. To maintain airway patency during a stroke in evolution, have orotracheal suction available at all times.
48. For a client w/ CVA, the gag reflex must return before the client is fed.
49. Clear fluids draining from the nose of a client who had a head trauma 3 hrs ago may indicate basilar skull fracture.
50. An adverse effect of gingival hyperplasia may occur during Phenytoin (Dilantin) therapy.
51. Urine output increased: best shows that the mannitol is effective in a client w/ increased ICP.
52. A client w/ C6 spinal injury would most likely have the symptom of quadriplegia.
53. Falls are the leading cause of injury in elderly people.
54. Primary prevention is true prevention. Examples are immunizations, weight control, and smoking cessation.
55. Secondary prevention is early detection. Examples include purified protein derivative (PPD), breast self-examination, testicular self-examination, and chest X-ray.
56. Tertiary prevention is treatment to prevent long-term complications.
57. A patient indicates that he's coming to terms with having a chronic disease when he says, "I'm never going to get any better."
58. On noticing religious artifacts and literature on a patient's night stand, a culturally aware nurse would ask the patient the meaning of the items.
59. The nitrogen balance estimates the difference between the intake and use of protein.

60. A Mexican patient may request the intervention of a curandero, or faith healer, who involves the family in healing the patient.
61. In an infant, the normal hemoglobin value is 12 g/dl.
62. Most of the absorption of water occurs in the large intestine.
63. Most nutrients are absorbed in the small intestine.
64. When assessing a patient's eating habits, the nurse should ask, "What have you eaten in the last 24 hours?"
65. A vegan diet should include an abundant supply of fiber.
66. A hypotonic enema softens the feces, distends the colon, and stimulates peristalsis.
67. First-morning urine provides the best sample to measure glucose, ketone, pH, and specific gravity values.
68. To induce sleep, the first step is to minimize environmental stimuli.
69. Before moving a patient, the nurse should assess the patient's physical abilities and ability to understand instructions as well as the amount of strength required to move the patient.
70. To lose 1 lb (0.5 kg) in 1 week, the patient must decrease his weekly intake by 3,500 calories (approximately 500 calories daily). To lose 2 lb (1 kg) in 1 week, the patient must decrease his weekly caloric intake by 7,000 calories (approximately 1,000 calories daily).
71. To avoid shearing force injury, a patient who is completely immobile is lifted on a sheet.
72. To insert a catheter from the nose through the trachea for suction, the nurse should ask the patient to swallow.
73. Vitamin C is needed for collagen production.
74. Only the patient can describe his pain accurately.
75. Cutaneous stimulation creates the release of endorphins that block the transmission of pain stimuli.
76. Patient-controlled analgesia is a safe method to relieve acute pain caused by surgical incision, trauma, injury, labor and delivery, or cancer.
77. An Asian, American or European American typically places distance between himself and others when communicating.
78. Active euthanasia is actively helping a person to die.
79. Brain death is irreversible cessation of all brain function.
80. Passive euthanasia is stopping the therapy that's sustaining life.
81. A third-party payer is an insurance company.
82. Utilization review is performed to determine whether the care provided to a patient was appropriate and cost-effective.
83. A value cohort is a group of people who experienced an out-of-the-ordinary event that shaped their values.
84. Voluntary euthanasia is actively helping a patient to die at the patient's request.
85. Bananas, citrus fruits, and potatoes are good sources of potassium.
86. Good sources of magnesium include fish, nuts, and grains.
87. Beef, oysters, shrimp, scallops, spinach, beets, and greens are good sources of iron.
88. Intrathecal injection is administering a drug through the spine.
89. When a patient asks a question or makes a statement that's emotionally charged, the nurse should respond to the emotion behind the statement or question rather than to what's being said or asked.
90. Pain threshold, or pain sensation, is the initial point at which a patient feels pain.
91. The difference between acute pain and chronic pain is its duration.

Psychiatric Nursing

1. According to Kübler-Ross, the five stages of death and dying are denial, anger, bargaining, depression, and acceptance.
2. Flight of ideas is an alteration in thought processes that's characterized by skipping from one topic to another, unrelated topic.
3. La belle indifférence is the lack of concern for a profound disability, such as blindness or paralysis that may occur in a patient who has a conversion disorder.
4. Moderate anxiety decreases a person's ability to perceive and concentrate. The person is selectively inattentive (focuses on immediate concerns), and the perceptual field narrows.
5. A patient who has a phobic disorder uses self-protective avoidance as an ego defense mechanism.
6. In a patient who has anorexia nervosa, the highest treatment priority is correction of nutritional and electrolyte imbalances.
7. A patient who is taking lithium must undergo regular (usually once a month) monitoring of the blood lithium level because the margin between therapeutic and toxic levels is narrow. A normal laboratory value is 0.5 to 1.5 mEq/L.
8. Early signs and symptoms of alcohol withdrawal include anxiety, diaphoresis, tremors, and insomnia. They may begin up to 8 hours after the last alcohol intake.
9. Al-Anon is a support group for families of alcoholics.
10. The nurse shouldn't administer chlorpromazine (Thorazine) to a patient who has ingested alcohol because it may cause over-sedation and respiratory depression.
11. Lithium toxicity can occur when sodium and fluid intake are insufficient, causing lithium retention.
12. An alcoholic who achieves sobriety is called a recovering alcoholic because no cure for alcoholism exists.
13. According to Erikson, the school-age child (ages 6 to 12) is in the industry-versus-inferiority stage of psychosocial development.
14. When caring for a depressed patient, the nurse's first priority is safety because of the increased risk of suicide.
15. Echolalia is parrotlike repetition of another person's words or phrases.
16. According to psychoanalytic theory, the ego is the part of the psyche that controls internal demands and interacts with the outside world at the conscious, preconscious, and unconscious levels.
17. According to psychoanalytic theory, the superego is the part of the psyche that's composed of morals, values, and ethics. It continually evaluates thoughts and actions, rewarding the good and punishing the bad. (Think of the superego as the "supercop" of the unconscious.)
18. According to psychoanalytic theory, the id is the part of the psyche that contains instinctual drives. (Remember i for instinctual and d for drive.)
19. Denial is the defense mechanism used by a patient who denies the reality of an event.
20. Tyramine-rich food, such as aged cheese, chicken liver, avocados, bananas, meat tenderizer, salami, bologna, Chianti wine, and beer may cause severe hypertension in a patient who takes a monoamine oxidase inhibitor.
21. Memory disturbance is a classic sign of Alzheimer's disease.

70. Patients who are in a maintenance program for narcotic abstinence syndrome receive 10 to 40 mg of methadone (Dolophine) in a single daily dose and are monitored to ensure that the drug is ingested.
71. Stress management is a short-range goal of psychotherapy.
72. The mood most often experienced by a patient with organic brain syndrome is irritability.
73. Creative intuition is controlled by the right side of the brain.
74. Methohexital (Brevital) is the general anesthetic that's administered to patients who are scheduled for electroconvulsive therapy.
75. The decision to use restraints should be based on the patient's safety needs.
76. Diphenhydramine (Benadryl) relieves the extrapyramidal adverse effects of psychotropic drugs.
77. In a patient who is stabilized on lithium (Eskalith) therapy, blood lithium levels should be checked 8 to 12 hours after the first dose, then two or three times weekly during the first month. Levels should be checked weekly to monthly during maintenance therapy.
78. The primary purpose of psychotropic drugs is to decrease the patient's symptoms, which improves function and increases compliance with therapy.
79. Manipulation is a maladaptive method of meeting one's needs because it disregards the needs and feelings of others.
80. If a patient has symptoms of lithium toxicity, the nurse should withhold one dose and call the physician.
81. A patient who is taking lithium (Eskalith) for bipolar affective disorder must maintain a balanced diet with adequate salt intake.
82. A patient who constantly seeks approval or assistance from staff members and other patients is demonstrating dependent behavior.
83. Alcoholics Anonymous advocates total abstinence from alcohol.
84. Methylphenidate (Ritalin) is the drug of choice for treating attention deficit hyperactivity disorder in children.
85. Setting limits is the most effective way to control manipulative behavior.
86. Violent outbursts are common in a patient who has borderline personality disorder.
87. When working with a depressed patient, the nurse should explore meaningful losses.
88. An illusion is a misinterpretation of an actual environmental stimulus.
89. Anxiety is nonspecific; fear is specific.
90. Extrapyramidal adverse effects are common in patients who take antipsychotic drugs.
91. The nurse should encourage an angry patient to follow a physical exercise program as one of the ways to ventilate feelings.
92. Depression is clinically significant if it's characterized by exaggerated feelings of sadness, melancholy, dejection, worthlessness, and hopelessness that are inappropriate or out of proportion to reality.
93. Free-floating anxiety is anxiousness with generalized apprehension and pessimism for unknown reasons.
94. In a patient who is experiencing intense anxiety, the fight-or-flight reaction (alarm reflex) may take over.
95. Confabulation is the use of imaginary experiences or made-up information to fill missing gaps of memory.
96. When starting a therapeutic relationship with a patient, the nurse should explain that the purpose of the therapy is to produce a positive change.

163. Hyperalertness and the startle reflex are characteristics of posttraumatic stress disorder.
164. A treatment for a phobia is desensitization, a process in which the patient is slowly exposed to the feared stimuli.
165. Symptoms of major depressive disorder include depressed mood, inability to experience pleasure, sleep disturbance, appetite changes, decreased libido, and feelings of worthlessness.
166. Clinical signs of lithium toxicity are nausea, vomiting, and lethargy.
167. Asking too many "why" questions yields scant information and may overwhelm a psychiatric patient and lead to stress and withdrawal.
168. Remote memory may be impaired in the late stages of dementia.
169. According to the DSM-IV, bipolar II disorder is characterized by at least one manic episode that's accompanied by hypomania.
170. The nurse can use silence and active listening to promote interactions with a depressed patient.
171. A psychiatric patient with a substance abuse problem and a major psychiatric disorder has a dual diagnosis.
172. When a patient is readmitted to a mental health unit, the nurse should assess compliance with medication orders.
173. Alcohol potentiates the effects of tricyclic antidepressants.
174. Flight of ideas is movement from one topic to another without any discernible connection.
175. Conduct disorder is manifested by extreme behavior, such as hurting people and animals.
176. During the "tension-building" phase of an abusive relationship, the abused individual feels helpless.
177. In the emergency treatment of an alcohol-intoxicated patient, determining the blood-alcohol level is paramount in determining the amount of medication that the patient needs.
178. Side effects of the antidepressant fluoxetine (Prozac) include diarrhea, decreased libido, weight loss, and dry mouth.
179. Before electroconvulsive therapy, the patient is given the skeletal muscle relaxant succinylcholine (Anectine) by I.V. administration.
180. When a psychotic patient is admitted to an inpatient facility, the primary concern is safety, followed by the establishment of trust.
181. An effective way to decrease the risk of suicide is to make a suicide contract with the patient for a specified period of time.
182. A depressed patient should be given sufficient portions of his favorite foods, but shouldn't be overwhelmed with too much food.
183. The nurse should assess the depressed patient for suicidal ideation.
184. Delusional thought patterns commonly occur during the manic phase of bipolar disorder.
185. Apathy is typically observed in patients who have schizophrenia.
186. Manipulative behavior is characteristic of a patient who has passive-aggressive personality disorder.
187. When a patient who has schizophrenia begins to hallucinate, the nurse should redirect the patient to activities that are focused on the here and now.
188. A patient who is receiving lithium (Eskalith) therapy should report diarrhea, vomiting, drowsiness, muscular weakness, or lack of coordination to the physician immediately.

189. The therapeutic serum level of lithium (Eskalith) for maintenance is 0.6 to 1.2 mEq/L.
190. Obsessive-compulsive disorder is an anxiety-related disorder.
191. Al-Anon is a self-help group for families of alcoholics.
192. Desensitization is a treatment for phobia, or irrational fear.
193. After electroconvulsive therapy, the patient is placed in the lateral position, with the head turned to one side.
194. A delusion is a fixed false belief.
195. Giving away personal possessions is a sign of suicidal ideation. Other signs include writing a suicide note or talking about suicide.
196. Agoraphobia is fear of open spaces.
197. A person who has paranoid personality disorder projects hostilities onto others.
198. To assess a patient's judgment, the nurse should ask the patient what he would do if he found a stamped, addressed envelope. An appropriate response is that he would mail the envelope.
199. After electroconvulsive therapy, the patient should be monitored for post-shock amnesia.
200. A mother who continues to perform cardiopulmonary resuscitation after a physician pronounces a child dead is showing denial.
201. Transvestism is a desire to wear clothes usually worn by members of the opposite sex.
202. Tardive dyskinesia causes excessive blinking and unusual movement of the tongue, and involuntary sucking and chewing.
203. Trihexyphenidyl (Artane) and benzotropine (Cogentin) are administered to counteract extrapyramidal adverse effects.
204. To prevent hypertensive crisis, a patient who is taking a monoamine oxidase inhibitor should avoid consuming aged cheese, caffeine, beer, yeast, chocolate, liver, processed foods, and monosodium glutamate.
205. Extrapyramidal symptoms include parkinsonism, dystonia, akathisia ("ants in the pants"), and tardive dyskinesia.
206. One theory that supports the use of electroconvulsive therapy suggests that it
207. "resets" the brain circuits to allow normal function.
208. A patient who has obsessive-compulsive disorder usually recognizes the senselessness of his behavior but is powerless to stop it (ego-dystonia).
209. In helping a patient who has been abused, physical safety is the nurse's first priority.
210. Pemoline (Cylert) is used to treat attention deficit hyperactivity disorder (ADHD).
211. Clozapine (Clozaril) is contraindicated in pregnant women and in patients who have severe granulocytopenia or severe central nervous system depression.
212. Repression, an unconscious process, is the inability to recall painful or unpleasant thoughts or feelings.
213. Projection is shifting of unwanted characteristics or shortcomings to others (scapegoat).
214. Hypnosis is used to treat psychogenic amnesia.
215. Disulfiram (Antabuse) is administered orally as an aversion therapy to treat alcoholism.
216. Ingestion of alcohol by a patient who is taking disulfiram (Antabuse) can cause severe reactions, including nausea and vomiting, and may endanger the patient's life.
217. Improved concentration is a sign that lithium is taking effect.
218. Behavior modification, including time-outs, token economy, or a reward system, is a treatment for attention deficit hyperactivity disorder.
219. Confabulation is the use of fantasy to fill in gaps of memory.