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2. Hepatotoxicity

Rationale:

Nevirapine (Viramune) is a non-nucleoside reverse transcriptase inhibitors (NRTI) that is used to treat HIV infection. It is used in combination with other antiretroviral medications to treat HIV. Adverse effects include rash, Stevens-Johnson syndrome, hepatitis, and increased transaminase levels. Hyperglycemia, peripheral neuropathy, and reduced bone density are not adverse effects of this medication.

103.) A nurse is caring for a hospitalized client who has been taking clozapine (Clozaril) for the treatment of a schizophrenic disorder. Which laboratory study prescribed for the client will the nurse specifically review to monitor for an adverse effect associated with the use of this medication?

1. Platelet count
2. Cholesterol level
3. White blood cell count
4. Blood urea nitrogen level

Rationale:

Hematological reactions can occur in the client taking clozapine and include agranulocytosis and mild leukopenia. The white blood cell count should be checked before initiating treatment and should be monitored closely during the use of this medication. The client should also be monitored for signs indicating agranulocytosis, which may include sore throat, malaise, and fever. Options 1, 2, and 4 are unrelated to this medication.

104.) Disulfiram (Antabuse) is prescribed for a client who is seen in the psychiatric health care clinic. The nurse is collecting data on the client and is providing instructions regarding the use of this medication. Which is most important for the nurse to determine before administration of this medication?

1. A history of hyperthyroidism
2. A history of diabetes insipidus
3. When the last full meal was consumed
4. When the last alcoholic drink was consumed

Rationale:

Disulfiram is used as an adjunct treatment for selected clients with chronic alcoholism who want

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2. Weight gain
3. Seizure activity
4. Orthostatic hypotension 3. Seizure activity

Rationale:

Bupropion does not cause significant orthostatic blood pressure changes. Seizure activity is common in dosages greater than 450 mg daily. Bupropion frequently causes a drop in body weight. Insomnia is a side effect, but seizure activity causes a greater client risk.

112.) A hospitalized client is started on phenelzine sulfate (Nardil) for the treatment of depression. The nurse instructs the client to avoid consuming which foods while taking this medication? Select all that apply.

1. Figs
2. Yogurt
3. Crackers
4. Aged cheese
- 5 Tossed salad
6. oatmeal cookies

1. Figs

2. Yogurt
4. Aged cheese

Rationale:

Phenelzine sulfate (Nardil) is a monoamine oxidase inhibitor(MAOI). The client should avoid taking in foods that are high in tyramine. Use of these foods could trigger a potentially fatal hypertensive crisis. Some foods to avoid include yogurt, aged cheeses, smoked or processed meats, red wines, and fruits such as avocados, raisins, and figs.

113.) A nurse is reinforcing discharge instructions to a client receiving sulfisoxazole. Which of the following would be included in the plan of care for instructions?

1. Maintain a high fluid intake.
2. Discontinue the medication when feeling better.
3. If the urine turns dark brown, call the health care provider immediately.
4. Decrease the dosage when symptoms are improving to prevent an allergic response. 1.

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3. "I can't drink alcohol while I am taking my medication."

4. "If I forget my morning medication, I can take two pills at bedtime." 3. "I can't drink alcohol while I am taking my medication."

Rationale:

Alcohol will lower the seizure threshold and should be avoided. Adolescents can obtain a driver's license in most states when they have been seizure free for 1 year. Anticonvulsants cause acne and oily skin; therefore a dermatologist may need to be consulted. If an anticonvulsant medication is missed, the health care provider should be notified.

129.) Megestrol acetate (Megace), an antineoplastic medication, is prescribed for the client with metastatic endometrial carcinoma. The nurse reviews the client's history and contacts the registered nurse if which diagnosis is documented in the client's history?

1. Gout
2. Asthma
3. Thrombophlebitis
4. Myocardial infarction 3. Thrombophlebitis

Rationale:

Megestrol acetate (Megace) suppresses the release of luteinizing hormone from the anterior pituitary by inhibiting pituitary function and regressing tumor size. Megestrol is used with caution if the client has a history of thrombophlebitis.

****megestrol acetate is a hormonal antagonist enzyme and that a side effect is thrombotic disorders****

13.) The client with squamous cell carcinoma of the larynx is receiving bleomycin intravenously. The nurse caring for the client anticipates that which diagnostic study will be prescribed?

1. Echocardiography
2. Electrocardiography
3. Cervical radiography
4. Pulmonary function studies 4. Pulmonary function studies

Rationale:

Bleomycin is an antineoplastic medication (Chemotherapeutic Agents) that can cause interstitial pneumonitis, which can progress to pulmonary fibrosis. Pulmonary function studies along with

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4. At bedtime with a snack Rationale:

Oral doses of levothyroxine (Synthroid) should be taken on an empty stomach to enhance absorption. Dosing should be done in the morning before breakfast.

****Note that options 1, 2, and 4 are comparable or alike in that these options address administering the medication with food.****

135.) A nurse reinforces medication instructions to a client who is taking levothyroxine (Synthroid). The nurse instructs the client to notify the health care provider (HCP) if which of the following occurs?

1. Fatigue
2. Tremors
3. Cold intolerance
4. Excessively dry skin 2. Tremors

Rationale:

Excessive doses of levothyroxine (Synthroid) can produce signs and symptoms of hyperthyroidism. These include tachycardia, chest pain, tremors, nervousness, insomnia, hyperthermia, heat intolerance, and sweating. The client should be instructed to notify the HCP if these occur. Options 1, 3, and 4 are signs of hypothyroidism.

136.) A nurse performs an admission assessment on a client who visits a health care clinic for the first time. The client tells the nurse that propylthiouracil (PTU) is taken daily. The nurse continues to collect data from the client, suspecting that the client has a history of:

1. Myxedema
2. Graves' disease
3. Addison's disease
4. Cushing's syndrome 2. Graves' disease

Rationale:

PTU inhibits thyroid hormone synthesis and is used to treat hyperthyroidism, or Graves' disease. Myxedema indicates hypothyroidism.

Cushing's syndrome and Addison's disease are disorders related to adrenal function.

137.) A nurse is reinforcing instructions for a client regarding intranasal desmopressin acetate (DDAVP). The nurse tells the client that which of the following is a side effect of the medication?

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1. Headache
2. Vulval pain
3. Runny nose
4. Flushed skin 3. Runny nose

Rationale:

Desmopressin administered by the intranasal route can cause a runny or stuffy nose. Headache, vulval pain, and flushed skin are side effects if the medication is administered by the intravenous (IV) route.

138.) A daily dose of prednisone is prescribed for a client. A nurse reinforces instructions to the client regarding administration of the medication and instructs the client that the best time to take this medication is:

1. At noon
2. At bedtime
3. Early morning
4. Anytime, at the same time, each day 3. Early morning

Rationale:

Corticosteroids (glucocorticoids) should be administered before 9:00 AM. Administration at this time helps minimize adrenal insufficiency and mimics the burst of glucocorticoids released naturally by the adrenal glands each morning.

****Note the suffix "-sone," and recall that medication names that end with these letters are corticosteroids. ****

139.) Prednisone is prescribed for a client with diabetes mellitus who is taking Humulin neutral protamine Hagedorn (NPH) insulin daily. Which of the following prescription changes does the nurse anticipate during therapy with the prednisone?

1. An additional dose of prednisone daily
2. A decreased amount of daily Humulin NPH insulin
3. An increased amount of daily Humulin NPH insulin
4. The addition of an oral hypoglycemic medication daily
3. An increased amount of daily Humulin NPH insulin

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3. Increase estrogen concentration and estrogen response.

4. Compete with estradiol for binding to estrogen in tissues containing high concentrations of receptors. 4. Compete with estradiol for binding to estrogen in tissues containing high concentrations of receptors.

Rationale:

Tamoxifen is an antineoplastic medication that competes with estradiol for binding to estrogen in tissues containing high concentrations of receptors. Tamoxifen is used to treat metastatic breast carcinoma in women and men. Tamoxifen is also effective in delaying the recurrence of cancer following mastectomy. Tamoxifen reduces DNA synthesis and estrogen response.

190.) A child is hospitalized with a diagnosis of lead poisoning. The nurse assisting in caring for the child would prepare to assist in administering which of the following medications?

1. Activated charcoal
2. Sodium bicarbonate
3. Syrup of ipecac syrup
4. Dimercaprol (BAL in Oil) 4. Dimercaprol (BAL in Oil)

Rationale:

Dimercaprol is a chelating agent that is administered to remove lead from the circulating blood and from some tissues and organs for excretion in the urine. Sodium bicarbonate may be used in salicylate poisoning. Syrup of ipecac is used in the hospital setting in poisonings to induce vomiting. Activated charcoal is used to decrease absorption in certain poisoning situations. Note that dimercaprol is prepared with peanut oil, and hence should be avoided by clients with known or suspected peanut allergy.

191.) A child is brought to the emergency department for treatment of an acute asthma attack. The nurse prepares to administer which of the following medications first?

1. Oral corticosteroids
2. A leukotriene modifier
3. A β_2 agonist
4. A nonsteroidal anti-inflammatory 3. A β_2 agonist

Rationale:

In treating an acute asthma attack, a short acting β_2 agonist such as albuterol (Proventil HFA) will be given to produce bronchodilation. Options 1, 2, and 4 are long-term control (preventive)

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the medication with food will prevent the nausea. Additionally, the client should be instructed not to take the medication with a high-protein meal because the high-protein will affect absorption. Antiemetics from the phenothiazine class should not be used because they block the therapeutic action of dopamine.

****eliminate options 3 and 4 because they are comparable or alike****

215.) A client with rheumatoid arthritis is taking acetylsalicylic acid (aspirin) on a daily basis. Which medication dose should the nurse expect the client to be taking?

1. 1 g daily
2. 4 g daily
3. 325 mg daily
4. 1000 mg daily 2. 4 g daily

Rationale:

Aspirin may be used to treat the client with rheumatoid arthritis. It may also be used to reduce the risk of recurrent transient ischemic attack (TIA) or brain attack (stroke) or reduce the risk of myocardial infarction (MI) in clients with unstable angina or a history of a previous MI. The normal dose for clients being treated with aspirin to decrease thrombosis and MI is 300 to 325 mg/day. Clients being treated to prevent TIAs are usually prescribed 1.3 g/day in two to four divided doses. Clients with rheumatoid arthritis are treated with 3.6 to 5.4 g/day in divided doses.

****Eliminate options 1 and 4 because they are alike****

216.) A nurse is caring for a client with gout who is taking Colcrys (colchicine). The client has been instructed to restrict the diet to low-purine foods. Which of the following foods should the nurse instruct the client to avoid while taking this medication?

1. Spinach
2. Scallops
3. Potatoes
4. Ice cream 2. Scallops

Rationale:

Colchicine is a medication used for clients with gout to inhibit the reabsorption of uric acid by the kidney and promote excretion of uric acid in the urine. Uric acid is produced when purine is catabolized. Clients are instructed to modify their diet and limit excessive purine intake. High-

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230.) A client is placed on chloral hydrate (Somnote) for short-term treatment. Which nursing action indicates an understanding of the major side effect of this medication?

1. Monitoring neurological signs every 2 hours
2. Monitoring the blood pressure every 4 hours
3. Instructing the client to call for ambulation assistance
4. Lowering the bed and clearing a path to the bathroom at bedtime
3. Instructing the client to call for ambulation assistance

Rationale:

Chloral hydrate (a sedative-hypnotic) causes sedation and impairment of motor coordination; therefore, safety measures need to be implemented. The client is instructed to call for assistance with ambulation. Options 1 and 2 are not specifically associated with the use of this medication. Although option 4 is an appropriate nursing intervention, it is most important to instruct the client to call for assistance with ambulation.

231.) A client admitted to the hospital gives the nurse a bottle of clomipramine (Anafranil). The nurse notes that the medication has not been taken by the client in 2 months. What behaviors observed in the client would indicate noncompliance with this medication?

1. Complaints of hunger
2. Complaints of insomnia
3. A pulse rate less than 60 beats per minute
4. Frequent handwashing with hot, soapy water
4. Frequent handwashing with hot, soapy water

Rationale:

Clomipramine is commonly used in the treatment of obsessive-compulsive disorder. Handwashing is a common obsessive-compulsive behavior. Weight gain is a common side effect of this medication. Tachycardia and sedation are side effects. Insomnia may occur but is seldom a side effect.

232.) A client in the mental health unit is administered haloperidol (Haldol). The nurse would check which of the following to determine medication effectiveness?

1. The client's vital signs
2. The client's nutritional intake
3. The physical safety of other unit clients

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such as avocados, raisins, or figs.

235.) A tricyclic antidepressant is administered to a client daily. The nurse plans to monitor for the common side effects of the medication and includes which of the following in the plan of care?

1. Offer hard candy or gum periodically.
 2. Offer a nutritious snack between meals.
 3. Monitor the blood pressure every 2 hours.
 4. Review the white blood cell (WBC) count results daily.
1. Offer hard candy or gum periodically.

Rationale:

Dry mouth is a common side effect of tricyclic antidepressants. Frequent mouth rinsing with water, sucking on hard candy, and chewing gum will alleviate this common side effect. It is not necessary to monitor the blood pressure every 2 hours. In addition, it is not necessary to check the WBC daily. Weight gain is a common side effect, and frequent snacks will aggravate this problem.

236.) A client is being treated for depression with amitriptyline hydrochloride. During the initial phases of treatment, the most important nursing intervention is:

1. Prescribing the client a tyramine-free diet
 2. Checking the client for anticholinergic effects
 3. Monitoring blood levels frequently because there is a narrow range between therapeutic and toxic blood levels of this medication
 4. Getting baseline postural blood pressures before administering the medication and each time the medication is administered
4. Getting baseline postural blood pressures before administering the medication and each time the medication is administered

Rationale:

Amitriptyline hydrochloride is a tricyclic antidepressant often used to treat depression. It causes orthostatic changes and can produce hypotension and tachycardia. This can be frightening to the client and dangerous because it can result in dizziness and client falls. The client must be instructed to move slowly from a lying to a sitting to a standing position to avoid injury if these effects are experienced. The client may also experience sedation, dry mouth, constipation, blurred vision, and other anticholinergic effects, but these are transient and will diminish with time.

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243.) A hospitalized client is having the dosage of clonazepam (Klonopin) adjusted. The nurse should plan to:

1. Weigh the client daily.
2. Observe for ecchymosis.
3. Institute seizure precautions.
4. Monitor blood glucose levels.
3. Institute seizure precautions.

Rationale:

Clonazepam is a benzodiazepine used as an anticonvulsant. During initial therapy and during periods of dosage adjustment, the nurse should initiate seizure precautions for the client.

Options 1, 2, and 4 are not associated with the use of this medication.

244.) A client has a prescription for valproic acid (Depakene) orally once daily. The nurse plans to:

1. Administer the medication with an antacid.
2. Administer the medication with a carbonated beverage.
3. Ensure that the medication is administered at the same time each day.
4. Ensure that the medication is administered 2 hours before breakfast only, when the client's stomach is empty.
3. Ensure that the medication is administered at the same time each day.

Rationale:

Valproic acid is an anticonvulsant, antimanic, and antimigraine medication. It may be administered with or without food. It should not be taken with an antacid or carbonated beverage because these products will affect medication absorption. The medication is administered at the same time each day to maintain therapeutic serum levels.

****Use general pharmacology guidelines to assist in eliminating options 1 and 2. Eliminate option 4 because of the closed-ended word "only."****

245.) A client taking carbamazepine (Tegretol) asks the nurse what to do if he misses one dose. The nurse responds that the carbamazepine should be:

1. Withheld until the next scheduled dose
2. Withheld and the health care provider is notified immediately
3. Taken as long as it is not immediately before the next dose

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thereby reducing the diarrhea. Options 1, 3, and 4 are unrelated to this medication.

35.) The client has a PRN prescription for loperamide hydrochloride (Imodium). The nurse understands that this medication is used for which condition?

1. Constipation
2. Abdominal pain
3. An episode of diarrhea
4. Hematest-positive nasogastric tube drainage

Rationale:

Loperamide is an antidiarrheal agent. It is used to manage acute and also chronic diarrhea in conditions such as inflammatory bowel disease. Loperamide also can be used to reduce the volume of drainage from an ileostomy. It is not used for the conditions in options 1, 2, and 4.

36.) The client has a PRN prescription for ondansetron (Zofran). For which condition should this medication be administered to the postoperative client?

1. Paralytic ileus
2. Incisional pain
3. Urinary retention
4. Nausea and vomiting

Rationale:

Ondansetron is an antiemetic used to treat postoperative nausea and vomiting, as well as nausea and vomiting associated with chemotherapy. The other options are incorrect.

37.) The client has begun medication therapy with pancrelipase (Pancrease MT). The nurse evaluates that the medication is having the optimal intended benefit if which effect is observed?

1. Weight loss
2. Relief of heartburn
3. Reduction of steatorrhea
4. Absence of abdominal pain

Rationale:

Pancrelipase (Pancrease MT) is a pancreatic enzyme used in clients with pancreatitis as a

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reinforcing teaching for the client about the medications prescribed, including clarithromycin (Biaxin), esomeprazole (Nexium), and amoxicillin (Amoxil). Which statement by the client indicates the best understanding of the medication regimen?

1. "My ulcer will heal because these medications will kill the bacteria."
 2. "These medications are only taken when I have pain from my ulcer."
 3. "The medications will kill the bacteria and stop the acid production."
 4. "These medications will coat the ulcer and decrease the acid production in my stomach."
3. "The medications will kill the bacteria and stop the acid production."

Rationale:

Triple therapy for *Helicobacter pylori* infection usually includes two antibacterial drugs and a proton pump inhibitor. Clarithromycin and amoxicillin are antibacterials. Esomeprazole is a proton pump inhibitor. These medications will kill the bacteria and decrease acid production.

43.) A histamine (H₂)-receptor antagonist will be prescribed for a client. The nurse understands that which medications are H₂-receptor antagonists? Select all that apply.

1. Nizatidine (Axid)
 2. Ranitidine (Zantac)
 3. Famotidine (Pepcid)
 4. Cimetidine (Tagamet)
 5. Esomeprazole (Nexium)
 6. Lansoprazole (Prevacid)
1. Nizatidine (Axid)
2. Ranitidine (Zantac)
3. Famotidine (Pepcid)
4. Cimetidine (Tagamet)

Rationale:

H₂-receptor antagonists suppress secretion of gastric acid, alleviate symptoms of heartburn, and assist in preventing complications of peptic ulcer disease. These medications also suppress gastric acid secretions and are used in active ulcer disease, erosive esophagitis, and pathological hypersecretory conditions. The other medications listed are proton pump inhibitors.

H₂-receptor antagonists medication names end with -dine.

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foods containing tyramine because they may cause a reaction characterized by redness and itching of the skin, flushing, sweating, tachycardia, headache, or lightheadedness. The client can avoid developing peripheral neuritis by increasing the intake of pyridoxine (vitamin B6) during the course of INH therapy for TB.

49.) A client has been started on long-term therapy with rifampin (Rifadin). A nurse teaches the client that the medication:

1. Should always be taken with food or antacids
2. Should be double-dosed if one dose is forgotten
3. Causes orange discoloration of sweat, tears, urine, and feces
4. May be discontinued independently if symptoms are gone in 3 months
3. Causes orange discoloration of sweat, tears, urine, and feces

Rationale:

Rifampin should be taken exactly as directed as part of TB therapy. Doses should not be doubled or skipped. The client should not stop therapy until directed to do so by a health care provider. The medication should be administered on an empty stomach unless it causes gastrointestinal upset, and then it may be taken with food. Antacids, if prescribed, should be taken at least 1 hour before the medication. Rifampin causes orange-red discoloration of body secretions and will permanently stain soft contact lenses.

5.) Mafenide acetate (Sulfamylon) is prescribed for the client with a burn injury. When applying the medication, the client complains of local discomfort and burning. Which of the following is the most appropriate nursing action?

1. Notifying the registered nurse
2. Discontinuing the medication
3. Informing the client that this is normal
4. Applying a thinner film than prescribed to the burn site
3. Informing the client that this is normal

Rationale:

Mafenide acetate is bacteriostatic for gram-negative and gram-positive organisms and is used to treat burns to reduce bacteria present in avascular tissues. The client should be informed that the medication will cause local discomfort and burning and that this is a normal reaction; therefore options 1, 2, and 4 are incorrect

50.) A nurse has given a client taking ethambutol (Myambutol) information about the

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salivation, sweating, involuntary urination and defecation, bradycardia, and severe hypotension. Treatment includes supportive measures and the administration of atropine sulfate subcutaneously or intravenously.

7.) Isotretinoin is prescribed for a client with severe acne. Before the administration of this medication, the nurse anticipates that which laboratory test will be prescribed?

1. Platelet count
2. Triglyceride level
3. Complete blood count
4. White blood cell count
2. Triglyceride level

Rationale:

Isotretinoin can elevate triglyceride levels. Blood triglyceride levels should be measured before treatment and periodically thereafter until the effect on the triglycerides has been evaluated. Options 1, 3, and 4 do not need to be monitored specifically during this treatment.

70.) Oxybutynin chloride (Ditropan XL) is prescribed for a client with neurogenic bladder. Which sign would indicate a possible toxic effect related to this medication?

1. Pallor
2. Drowsiness
3. Bradycardia
4. Restlessness
4. Restlessness

Rationale:

Toxicity (overdosage) of this medication produces central nervous system excitation, such as nervousness, restlessness, hallucinations, and irritability. Other signs of toxicity include hypotension or hypertension, confusion, tachycardia, flushed or red face, and signs of respiratory depression. Drowsiness is a frequent side effect of the medication but does not indicate overdosage.

71.) After kidney transplantation, cyclosporine (Sandimmune) is prescribed for a client. Which laboratory result would indicate an adverse effect from the use of this medication?

1. Decreased creatinine level
2. Decreased hemoglobin level
3. Elevated blood urea nitrogen level

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1. With 8 oz of milk
 2. In the morning after arising
 3. 60 minutes before breakfast
 4. At bedtime on an empty stomach
1. With 8 oz of milk

Rationale:

Ibuprofen is a nonsteroidal anti-inflammatory drug (NSAID). NSAIDs should be given with milk or food to prevent gastrointestinal irritation. Options 2, 3, and 4 are incorrect.

8.) A client with severe acne is seen in the clinic and the health care provider (HCP) prescribes isotretinoin. The nurse reviews the client's medication record and would contact the (HCP) if the client is taking which medication?

1. Vitamin A
 2. Digoxin (Lanoxin)
 3. Furosemide (Lasix)
 4. Phenytoin (Dilantin)
1. Vitamin A

Rationale:

Isotretinoin is a metabolite of vitamin A and can produce generalized intensification of isotretinoin toxicity. Because of the potential for increased toxicity, vitamin A supplements should be discontinued before isotretinoin therapy. Options 2, 3, and 4 are not contraindicated with the use of isotretinoin.

80.) A nurse is caring for a client who is taking phenytoin (Dilantin) for control of seizures. During data collection, the nurse notes that the client is taking birth control pills. Which of the following information should the nurse provide to the client?

1. Pregnancy should be avoided while taking phenytoin (Dilantin).
 2. The client may stop taking the phenytoin (Dilantin) if it is causing severe gastrointestinal effects.
 3. The potential for decreased effectiveness of the birth control pills exists while taking phenytoin (Dilantin).
 4. The increased risk of thrombophlebitis exists while taking phenytoin (Dilantin) and birth control pills together.
3. The potential for decreased effectiveness of the birth control pills exists while taking phenytoin (Dilantin).

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Rationale:

Phenytoin (Dilantin) enhances the rate of estrogen metabolism, which can decrease the effectiveness of some birth control pills. Options 1, 2, and 4 are not accurate.

81.) A client with trigeminal neuralgia is being treated with carbamazepine (Tegretol). Which laboratory result would indicate that the client is experiencing an adverse reaction to the medication?

1. Sodium level, 140 mEq/L
2. Uric acid level, 5.0 mg/dL
3. White blood cell count, 3000 cells/mm³
4. Blood urea nitrogen (BUN) level, 15 mg/dL
3. White blood cell count, 3000 cells/mm³

Rationale:

Adverse effects of carbamazepine (Tegretol) appear as blood dyscrasias, including aplastic anemia, agranulocytosis, thrombocytopenia, leukopenia, and cardiovascular disturbances, thrombophlebitis, dysrhythmias, and dermatological effects. Options 1, 2, and 4 identify normal laboratory values.

82.) A client is receiving meperidine hydrochloride (Demerol) for pain. Which of the following are side effects of this medication? Select all that apply.

1. Diarrhea
2. Tremors
3. Drowsiness
4. Hypotension
5. Urinary frequency
6. Increased respiratory rate
2. Tremors
3. Drowsiness
4. Hypotension

Rationale:

Meperidine hydrochloride is an opioid analgesic. Side effects include respiratory depression, drowsiness, hypotension, constipation, urinary retention, nausea, vomiting, and tremors.

83.) The client has been on treatment for rheumatoid arthritis for 3 weeks. During the

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nurse to inform the client that these symptoms will subside and encourage the client to continue the use of the medication.

88.) Dantrolene sodium (Dantrium) is prescribed for a client experiencing flexor spasms, and the client asks the nurse about the action of the medication. The nurse responds, knowing that the therapeutic action of this medication is which of the following?

1. Depresses spinal reflexes
 2. Acts directly on the skeletal muscle to relieve spasticity
 3. Acts within the spinal cord to suppress hyperactive reflexes
 4. Acts on the central nervous system (CNS) to suppress spasms
2. Acts directly on the skeletal muscle to relieve spasticity

Rationale:

Dantrium acts directly on skeletal muscle to relieve muscle spasticity. The primary action is the suppression of calcium release from the sarcoplasmic reticulum. This in turn decreases the ability of the skeletal muscle to contract.

****Options 1, 3, and 4 are all comparable or alike in that they all depress CNS suppression and the depression of reflexes. Therefore, eliminate these options.****

89.) A nurse is reviewing the laboratory studies on a client receiving dantrolene sodium (Dantrium). Which laboratory test would identify an adverse effect associated with the administration of this medication?

1. Creatinine
 2. Liver function tests
 3. Blood urea nitrogen
 4. Hematological function tests
2. Liver function tests

Rationale:

Dose-related liver damage is the most serious adverse effect of dantrolene. To reduce the risk of liver damage, liver function tests should be performed before treatment and periodically throughout the treatment course. It is administered in the lowest effective dosage for the shortest time necessary.

****Eliminate options 1 and 3 because these tests both assess kidney function.****

9.) The nurse is applying a topical corticosteroid to a client with eczema. The nurse would monitor for the potential for increased systemic absorption of the medication if the medication