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**CRNE**

Canadian Registered Nurse Examination

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**Question:** 253

Wesley, a nurse supervisor, manages the nursing staff, prepares the budget, maintains client service, and implements policies. These tasks are accomplished by performing managerial functions. When Wesley uses performance standards as criteria for measuring success, he operates through which of the following functions?

- A. Directing
- B. Controlling
- C. Organizing
- D. Decision-making

**Answer:** B

The nurse manager operates through the function of controlling when performance standards are used as criteria for measuring success. Directing is guiding or motivating others to meet the expected outcomes. Organizing is using resources to achieve the expected outcomes. Decision-making is identifying a problem and considering alternatives to resolve the problem.

**Question:** 254

A nurse is making a room assignment for a 12-month-old child with bacterial meningitis. The nurse plans to place the infant in which of the following rooms?

- A. Isolation room with negative air pressure
- B. Isolation room near the nurse's station
- C. A room with a 12-month-old child with a ventriculoperitoneal shunt
- D. A room with a 12-month old child diagnosed with diarrhea

**Answer:** B

A child with bacterial meningitis should be placed in an isolation room until the child receives antibiotics, given through the IV route, for 24 hours. The room must be near the nurse's station for close monitoring and easier access. Bacterial meningitis is transmitted through respiratory secretions; it is not an airborne disease. An isolation room with negative pressure is recommended for a client with tuberculosis.

**Question:** 255

A nurse is making a room assignment for a 12-year-old boy with a brain concussion. The nurse determines to place the boy in a room with which of the following clients?

- A. A 3-year-old boy who had a club foot repair
- B. A 12-year-old boy with rheumatic fever
- C. A 12-year-old boy with measles
- D. A 10-year-old boy with a fractured leg

**Answer:** D

A 12-year-old child with brain concussion should be placed in a room with a non-infectious client who is about the same age as the boy. A client with rheumatic fever or measles is not an ideal roommate for a client with brain concussion. The 3-year-old who had a club foot repair and the 10-year-old boy with a fractured leg are both non-infectious, but based on the growth and developmental needs of the 12-year-old client with concussion, he must be assigned to a room with a boy who is about the same age.

**Question:** 256

A nurse is assigned to care for four clients during a shift. After reviewing the client records, the nurse knows that it is most important for which of the following clients to receive the scheduled medication on time?

- A. A client diagnosed with tuberculosis, treated with streptomycin
- B. A client diagnosed with depression, treated with amitriptyline
- C. A client diagnosed with myasthenia gravis, treated with pyridostigmine bromide
- D. A client diagnosed with urinary tract infection, treated with ciprofloxacin

**Answer: C**

It is most important that a client diagnosed with myasthenia gravis receives medications on time. Early administration can cause cholinergic crisis, whereas late administration can cause myasthenia crisis.

**Question: 257**

A nurse is caring for a client with weakness on the right side of the face, right arm, and right leg. The nurse includes which of the following nursing actions in the plan of care?

- A. Place objects within the client's reach on the right side
- B. Place objects within the client's reach on the left side
- C. Initiate muscle strengthening exercises to the right side of the body
- D. Initiate range of motion exercises to the left side of the body

**Answer: B**

A client with one-sided weakness would benefit the most if objects were within their reach on the unaffected side. Muscle strengthening exercises on the unaffected side and range of motion exercises on the affected side are appropriate nursing actions

**Question: 258**

A nurse prepares a nursing care plan for a newly-admitted client with myasthenia gravis. Understanding the risks of myasthenia gravis, it is a must that the nurse prepares which of the following near the client's bedside?

- A. Defibrillator
- B. Oxygen
- C. Incentive spirometer
- D. Suction equipment

**Answer: D**

A client with myasthenia gravis is at risk for respiratory distress caused by considerable muscle weakness or fatigue, including from the diaphragm. Suction equipment, an Ambubag, and intubation tray are kept near the client's bedside.

**Question:** 259

A nurse should use which of the following protective measures when inserting a nasogastric tube?

- A. Double gloves, goggles, and mask
- B. Gloves, goggles, gown, and mask
- C. Sterile gloves, goggles, gown, and mask
- D. Sterile gloves, gown, and mask

**Answer:** B

Gloves, goggles, gown, and a mask are worn if the nurse is at risk for exposure to contaminated secretions generated by splash or sprays. Sterile technique is not necessary during nasogastric insertion.

**Question:** 260

A nurse is caring for a client with an open wound. The nurse uses which technique when changing the client's dressing?

- A. Medical technique
- B. Septic technique
- C. Clean technique
- D. Aseptic technique

**Answer:** D

Open wounds provide an entry to disease-causing microorganisms. The nurse should, therefore, use a sterile or aseptic technique when changing dressings.

**Question:** 261

A nurse dons gloves in which of the following situations?

- A. Assisting a client diagnosed with diarrhea to ambulate from the bed to the bathroom
- B. Taking the temperature of a client with Kaposi's sarcoma
- C. Providing a bed bath to a client diagnosed with tuberculosis
- D. Administering glucagon through the subcutaneous route

**Answer: D**

The nurse should wear a pair of gloves if there is a risk for coming in contact with the client's bodily fluids, like blood. Wearing of gloves is not necessary when ambulating a client, when taking the temperature of a client with Kaposi's sarcoma, or when bathing a client with tuberculosis.

**Question: 262**

A nurse would be most concerned by which of the following client room assignments?

- A. A client with tuberculosis is placed in a room with negative air pressure
- B. A client diagnosed with methicillin-resistant Staphylococcus aureus Staphylococcus aureus placed in a room with a client with third degree burns on both arms placed in a room with a client with third degree burns on both arms
- C. A client with methicillin-resistant Staphylococcus aureus Staphylococcus aureus in a private room in a private room
- D. A client diagnosed with salmonella placed in a room with another client diagnosed with gastroenteritis

**Answer: B**

A client with MRSA should be placed in a private room or with another MRSA-colonized client. If cohorting is not possible, the MRSA-colonized client can be placed in a room with another client who is not at high risk for infections. A client with third-degree burns can easily get infected because of severe impaired integrity of the skin.

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