# *Pharmacology 12th edition McCuistion Test Bank*

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# Test Bank - Chapter 01

Q: Which of the following would not be considered as representative of subjective data?

A. Patient-reported health history
B. Patient-reported signs and symptoms of their illness
C. Financial barriers reported by the patient's caregiver
**D. Vital signs obtained from the medical record (Correct)**

Q: The nurse is using data collected to define a set of interventions to achieve the **most** desirable outcomes. Which steps is the nurse applying?

A. Recognizing cues (assessment)
B. Analyzing cues and prioritizing hypothesis (analysis)
**C. Generating solutions (planning) (Correct)**
D. Taking action (implementation)

Q: A 5-year-old child with type 1 diabetes mellitus has had repeated hospitalizations for episodes of hyperglycemia. The parents tell the nurse they can't keep track of everything that has to be done to care for their child. The nurse reviews medications, diet, and symptom management with the parents and creates a daily checklist for the family to use. These activities are completed in which step of the nursing process?

A. Recognizing cues (assessment)
B. Analyzing cues and prioritizing hypothesis (analysis)
C. Generating solutions (planning)
**D. Taking action (implementation) (Correct)**

Q: The nurse is preparing to administer a medication and reviews the patient's chart for drug allergies, serum creatinine, and blood urea nitrogen (BUN) levels. The nurse's actions are reflective of which of the following?

**A. Recognizing cues (assessment) (Correct)**
B. Analyzing cues and prioritizing hypothesis (analysis)
C. Taking action (implementation)
D. Generating solutions (planning)

Q: Which of the following would be correctly categorized as objective data?

A. A list of herbal supplements regularly used provided by the patient.
**B. Lab values associated with the drugs the patient is taking. (Correct)**
C. The ages and relationship of all household members to the patient.
D. Usual dietary patterns and food intake.

Q: The nurse reviews a patient's database and learns that the patient lives alone, is forgetful, and does not have an established routine. The patient will be sent home with three new medications to be taken at different times of the day. The nurse develops a daily medication chart and enlists a family member to put the patient's pills in a pill organizer. This is an example of which element of the nursing process?

A. Recognizing cues (assessment)
B. Analyzing cues and prioritizing hypothesis (analysis)
**C. Taking action (implementation) (Correct)**

D. Generating solutions (planning)

Q: A patient who is hospitalized for chronic obstructive pulmonary disease (COPD) wants to go home. The nurse and the patient discuss the patient's situation and decide that the patient may go home when able to perform self-care without dyspnea and hypoxia. This is an example of which phase of the nursing process?

A. Recognizing cues (assessment)
B. Analyzing cues and prioritizing hypothesis (analysis)
C. Taking action (implementation)
**D. Generating solutions (planning) (Correct)**

Q: A patient will be sent home with a metered-dose inhaler, and the nurse provides teaching. Which expected outcome is written correctly for this process?

A. The nurse will demonstrate the correct use of a metered-dose inhaler to the patient.
B. The nurse will teach the patient how to administer medication with a metered-dose inhaler.
C. The patient will know how to self-administer the medication using the metered-dose inhaler.
**D. The patient will independently administer the medication using the metered-dose inhaler at the end of the session. (Correct)**

Q: The nurse is generating solutions (planning) for a patient who has chronic lung disease and hypoxia. The patient has been admitted for increased oxygen needs above a baseline of 2 L/min. The nurse generates an expected outcomes stating, "The patient will have oxygen saturations of >95% on room air at the time of discharge from the hospital." What is wrong with this goal?

A. It cannot be evaluated.
B. It is not measurable.
C. It is not patient-centered.
**D. It is not realistic. (Correct)**

Q: The nurse is developing a teaching plan for an elderly patient who will begin taking an antihypertensive drug that causes dizziness and orthostatic hypotension. Which hypothesis (problem) documented by the nurse is appropriate for this patient?

A. Deficient knowledge related to drug side effects.
B. Ineffective health maintenance related to age.
C. Readiness for enhanced knowledge related to medication side effects.
**D. Risk for injury related to side effects of the medication. (Correct)**

Q: An older patient must learn to administer a medication using a device that requires manual dexterity. The patient becomes frustrated and expresses lack of self-confidence in performing this task. Which action will the nurse perform **next**?

A. Ask the patient to keep trying until the skill is learned.
B. Provide written instructions with illustrations showing each step of the skill.
**C. Schedule multiple sessions and practice each step separately. (Correct)**
D. Teach the procedure to family members who can administer the medication for the patient.

Q: A school-age child will begin taking medication to be administered at 5 mL three times daily. The child's parent tells the nurse that, with a previous use of the drug, the child repeatedly forgot to bring the medication home from school, resulting in missed evening doses. What will the nurse recommend?

A. Encourage the child to be more responsible and that it is important to take the medication as prescribed.

B. Putting a note on the child's locker to encourage the child to take responsibility for medication administration.

**C. Asking the provider if 7.5 mL may be taken in the morning and 7.5 mL may be taken in the evening so that the correct amount is given daily. (Correct)**

D. Taking the noon dose to school every day and giving it to the school nurse to administer.

Q: A high-school student regularly forgets to use a twice-daily inhaled corticosteroid to prevent asthma flares and is repeatedly admitted to the hospital. The child's parent tells the nurse that the child has been told that forgetting to take the medication causes frequent hospitalizations. The nurse will

A. encourage the child to take responsibility for taking the medication.

B. reinforce the need to take prescribed medications to avoid hospitalizations.

**C. suggest putting the inhaler with the child's toothbrush to use before brushing teeth. (Correct)**

D. suggest that the child's parents administer the medication to increase compliance.

Q: An adolescent patient who has acne is given a regimen of topical medications and an oral antibiotic that generally clears up lesions to fewer than 10 within 6 to 8 weeks. At a 2-month follow-up, the patient continues to have more than 25 lesions. The child's parent affirms that the child is using the medications as prescribed. Which statement is correct for this patient to evaluate the outcome?

**A. "Goal of fewer than 10 lesions in 6 to 8 weeks is not met." (Correct)**

B. "Goal that the medication will be effective is not met."

C. "Goal that the patient will take medications as prescribed is not met."

D. "Goal that the patient understands the medication regimen is not met."

Q: Which of the following would not be considered an important element of health teaching in drug therapy?

A. Assess the patients' health literacy skills.

B. Assess all the drugs on the patients' profile for possible drug interactions.

**C. Avoid discussing potential side effects and adverse reactions with the patient to avoid nonadherence. (Correct)**

D. Determine if the patient needs laboratory monitoring.

# NCLEX Review Questions - Chapter 01

Q: The nurse is preparing to review a patient's medication history. Which information is **most** important when the nurse obtains a medication history from a patient?

**A. Allergies (Correct)**
B. Alcohol intake
C. Home remedy use
D. Use of over-the-counter medications

Q: Which activity is an example of use of concept applied to the nursing process?

A. Determination of a patient's clinical diagnosis
B. Maintaining a narrow focus on patient care
**C. Providing preventative health care (Correct)**
D. Documenting the patient's medical diagnosis

Q: Which action is representative of recognizing cues as part of the Clinical Judgment Measurement Model (CJMM)?

A. Listing the patient's problems in priority order
B. Planning care options for the patient
C. Correlating findings with evidence-based practice research
**D. Performing a physical assessment on a patient (Correct)**

Q: A nurse is working with a patient in establishing outcomes related to compliance with medication regimen. Which expected outcome reflects **best** practice?

A. The patient will decide when to take their medication based on personal preference.
**B. The patient will be able to state the clinical indications for each medication that was prescribed. (Correct)**
C. The patient will fill the prescription for each medication at the pharmacy once a month.
D. The patient will memorize the dosing schedule for prescribed medications.

Q: A nurse is preparing an educational program for a group of patients on the topic of health promotion activities. What **priority** assessment should the nurse include in the planning of this event?

**A. Recognition of perceived values of the patient group (Correct)**
B. Identification of individual group characteristics such as gender and ethnicity
C. Preparing handouts for group members
D. Developing methods to enhance group interaction

Q: A nurse is preparing to provide patient teaching to a patient on the medical-surgical unit. What factor should the nurse identify as a barrier to teaching?

A. Patient is resting in bed watching television.
B. Patient wears glasses.
**C. Patient's reported pain level post intervention with medication is 7 out of 10. (Correct)**
D. Patient is sitting in a chair in the room.

Q: A nurse at the health clinic is reviewing a patient's medication history. Which statement if made by the patient requires additional follow-up?

A. "I am taking the medication as ordered every morning."
**B. "I take the medication at night with a glass of wine." (Correct)**
C. "I have the prescription on auto fill at the pharmacy."
D. "The medication appears to agree with me."

Q: A nurse is making a home visit and finds that the elderly patient is having difficulty taking medications correctly. The patient states that it is becoming too confusing. Which **priority** action should the nurse implement?

A. Continue to schedule home visits to assist the patient.
B. Call the health care provider.
C. Ask the patient if there are any family members that can come over to help.
**D. Suggest the use of a drug box to simplify the process. (Correct)**

Q: The nurse is providing discharge instructions to a patient regarding their new medication regimen. Which information should the nurse include? (*Select all that apply*.)
*(Select all that apply.)*

**A. Clear written and verbal directions. (Correct)**
B. Location of available pharmacies for filling of prescriptions.
**C. Provide your health care provider with any updates if you add any OTC medication to your regimen. (Correct)**
D. Advise the patient to take the medication as best works in his/her schedule.
**E. Advise the patient of potential adverse effects that may be associated with this new medication. (Correct)**

Q: The nurse administers a first dose of an antibiotic and upon returns to the patient's room for further assessment. Which finding(s) is objective data? (*Select all that apply*.)
*(Select all that apply.)*

**A. Lung sounds clear to auscultation (Correct)**
**B. Skin free of redness (Correct)**
C. Patient complains of itching on fingers
D. Denial of pain
**E. Two plus pitting edema in ankles (Correct)**

Q: The nurse is preparing to teach a patient newly diagnosed with diabetes mellitus how to inject insulin. Which principle(s) will the nurse include when providing patient teaching? (*Select all that apply*.)
*(Select all that apply.)*

**A. Include a family member or friend in the teaching process. (Correct)**
B. The nurse must be a passive listener.
C. Assess readiness to learn after information is presented to the patient.
**D. Provide simple written materials appropriate for individual patient needs. (Correct)**
E. Teaching is more effective in a busy environment.
**F. The nurse should provide contact information on how to reach the health care provider. (Correct)**