Unique Approach to Success on the NCLEX-RN®
Test Strategies, Embedded Linking, Conceptualization and Practice Questions

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NCSBN Update

- As of October 1, 2020

- Test will be 75-145 questions
  - 15 questions are pretest items BUT THEY DO NOT COUNT TOWARDS SCORE
- You will have up to 5 hours for entire test, if needed
- Next Generation NCLEX section will be reintroduced for those who want to volunteer in this research effort
  - DOES NOT COUNT TOWARDS YOUR SCORE POSITIVELY OR NEGATIVELY
How to Maximize Your Test Taking Abilities for NCLEX-RN©

- STUDY FOR SUCCESS

- LINKING/CONCEPTUALIZING

- PSYCHOLOGICAL PREPARATION
Priority Setting

- Same principles for one patient as groups of patients
- When asked what to do first, initial, prioritize, who to see first, second, etc....
- ABC (Airway, Breathing, Circulation)
  - This is not same as for CPR...don’t get confused
- Other Physiological, including Pain (5th VS)
- Safety and Security
- Love and Belonging
- Actual before Risk
Pharmacological Strategies

- Generic versus Trade/Brand name
- Side Effects
- Adverse Effects
- Antidotes
Pharmacological Strategies (Con’t)

- Timing of medication administration
- What medications can/cannot be administered with
Select All that Apply

- Usually 6 options to choose from
- Will not be none, all and usually not 1 option only
  - Note the absolutes there...none, all, only
  - So if you didn’t select 2-5 options then go back and do it again
- Think “out of the box” and broadly
  - Consider complications and broader system than simply health alteration/disease
  - Think beyond that 1 multiple choice options
  - Think beyond the obvious
Select All that Apply

- Example
  - If SATA question was about assessment of patient with Lupus, then most of you would be looking for the obvious “butterfly rash” to select
  - In a SATA question, you need to think about assessments from a more broad perspective
    - What happens to the skin (think rash...dry, cracked)
    - Lupus is an autoimmune disorder so even an assessment that seems “too easy” like fever would be correct
  - In reality it should be easier for you to answer SATA as you don’t have to choose the one best response but can choose several...
  - Don’t let your anxiety of a different type of question get in your way of success
A home health care nurse is planning client visits and nursing activities for the day. The nurse begins the visits at 0900. All clients live within a 5-mile radius. List the order of priority the nurse should plan the order of the assignments for the day. (Number 1 is the first client or nursing activity and number 6 is the last).

1. A client requiring admission
2. A client being visited by the home health aide at 1030am
3. A client requiring supervision of the dressing change
4. The first dressing change for a client requiring twice-daily dressing changes
5. A client with diabetes mellitus who needs a fasting blood glucose level drawn
6. The second dressing change for a client requiring twice-daily dressing changes
A nurse is assigned to care for four clients. In planning client rounds, which client should the nurse assess first?

a. A client scheduled for a chest x-ray
b. A client requiring daily dressing changes
c. A postoperative client preparing for discharge
d. A client receiving nasal oxygen who had dyspnea during the previous shift
A nurse reviews the electrolyte results of an assigned client and notes that the potassium level is 5.6 mEq/L. Which of the following would the nurse expect to note on the EKG as a result of the lab finding?

a. ST depression  
b. Inverted T wave  
c. Absent P wave  
d. Peaked T waves
A client rings the call bell and complains of pain at the site of an IV infusion. The nurse assesses the site and determines that phlebitis has developed. The nurse should take which actions in the care of this client? Select all that apply.

a. Notifies the physician
b. Removes the IV catheter at that site
c. Applies warm moist packs to the site
d. Starts a new IV line in a proximal portion of the same vein
e. Documents the occurrence, actions taken, and client’s response
f. Informs the client that this is normal and administer acetaminophen (Tylenol) as per orders
A community health nurse is providing a teaching session about terrorism to members of the community and is discussing information regarding anthrax. The nurse tells participants that anthrax can be transmitted by which route? Select all that apply.

a. Bites from ticks or deer flies
b. Inhalation of bacterial spores
c. Through a cut or abrasion in the skin
d. Direct contact with an infected individual
e. Sexual contact with an infected individual
f. Ingestion of contaminated undercooked meat
A physician’s prescription reads clindamycin phosphate (Cleocin Phosphate) 0.3 g in 50mL normal saline to be administered IV over 30 minutes. The medication label reads clindamycin phosphate 900 mg in 6mL. A nurse prepares how many milliliters of the medication to administer the correct dose? Fill in the blank.
The physician orders 1 unit of packed red blood cells to infuse over 4 hours. The unit of blood contains 250mL. The drop factor is 10 drops/mL. A nurse prepares to set the flow rate at how many drops per minute? (Round to the nearest whole number).
A client who has had abdominal surgery complains of feeling as though “something gave way” in the incisional site. The nurse removes the dressing and notes the presence of a loop of bowel protruding through the incision. Which nursing interventions should the nurse take? Select all that apply.

a. Contact the surgeon
b. Instruct the client to cough intermittently
c. Prepare the client for wound closure
d. Document the findings and actions taken
e. Place a sterile saline dressing and ice packs over the wound
f. Place the client in a supine position without a pillow under the head
A nurse is assessing a client who suspects she is pregnant and is checking for probable signs of pregnancy. Which of the following are probable signs of pregnancy? Select all that apply.

a. Ballottement  
b. Chadwick’s sign  
c. Uterine enlargement  
d. Braxton Hicks contractions  
e. Fetal heart rate detected by nonelectronic device  
f. Outline of fetus via ultrasound
A nurse is monitoring a client in preterm labor who is receiving IV magnesium sulfate. The nurse monitors for which adverse reactions of the medication? Select all that apply.

a. Flushing
b. Hypertension
c. Increased urine output
d. Depressed respirations
e. Extreme muscle weakness
f. Hyperactive deep tendon reflexes
The clinic nurse prepares to perform a focused assessment on a client who is complaining of symptoms of a cold, cough and lung congestion. Which of the following would the nurse include for this type of assessment? Select all that apply.

a. Asking the client about family history of any illness/disease
b. Auscultating lung sounds
c. Obtaining information about client’s respirations
d. Obtaining client’s temperature
e. Assessing strength of peripheral pulses
f. Performing musculoskeletal and neurological exam
A nurse is caring for an infant with a suspected Patent Ductus Arteriosus. Which of the following assessment findings are found in an infant with this condition? Select all that apply.

a. Left ventricular hypertrophy  
b. Heart murmur  
c. Increased cardiac output  
d. Increased respiratory infections  
e. Peripheral pulses graded +4  
f. Right sided hypertrophy
Question 13*

A client develops pulmonary edema. Place in order of priority the nurse’s interventions. 1 is the nurse’s priority and 8 is the last priority intervention.

1. Assess client quickly, including assessing lung sounds
2. Administer oxygen
3. Insert a Foley catheter as ordered
4. Ensure IV access in place
5. Document event, actions taken and client’s response
6. Place client in high Fowler’s position
7. Prepare for intubation and ventilator support, if required
8. Prepare for administration of diuretic and morphine sulfate
Ketoconazole (Nizoral) is prescribed for a client with a diagnosis of candidiasis. Select the interventions the nurse includes when administering this medication. Select all that apply.

a. Restrict fluid intake
b. Instruct client to avoid alcohol
c. Monitor liver function studies
d. Administer medication with antacid
e. Instruct client to avoid exposure to sun
f. Administer medication of an empty stomach
A moderately depressed client who was hospitalized 2 days ago suddenly begins smiling and reporting that “the crisis is over. I am finally cured.” The nurse interprets this behavior as a cue to modify the treatment plan by:

a. Discussing with physician a reduction in medication for client
b. Allowing increased “in-room” activities
c. Increasing the level of suicide precautions
d. Allowing the client off-unit privileges as needed
Question 16

The client arrives in the ER following a car accident. The client’s forehead hit the steering wheel and a hyphema is diagnosed. The nurse places the client in which position?

a. Flat on bedrest
b. Semi-Fowler’s on bedrest
c. Lateral on affected side
d. Lateral on unaffected side
A client with carcinoma of the lung develops syndrome of inappropriate antidiuretic hormone (SIADH) as a complication of the cancer. The nurse anticipates which of the following may be prescribed? Select all that apply.

a. Radiation therapy
b. Chemotherapy
c. Increased fluid intake
d. Serum sodium levels
e. Medication that is antagonistic to ADH
f. Decreased oral sodium intake
Question 18*

Which home care instructions would the nurse provide to the mother of a child with acquired immunodeficiency syndrome (AIDS)? Select all that apply.

a. Fever, malaise, fatigue, weight loss, vomiting, and diarrhea are expected to occur and do not require special interventions
b. Monitor the child’s weight daily
c. The child should avoid exposure to other illnesses
d. Frequent handwashing is important
e. Clean up body fluid spills with bleach solution (10:1 ratio of water to bleach)
f. The child’s immunization schedule will need revision
The burn client is receiving treatments of topical mafenide acetate (Sulfamylon) to the site of injury. The nurse monitors the client, knowing that which of the following indicates a systemic effect has occurred?

a. Local rash at burn site  
b. Elevated blood pressure  
c. Nausea and vomiting  
d. Hyperventilation
A clinic nurse is assessing a child who is scheduled to receive a live virus vaccine. Which of the following are general contraindications associated with receiving a live virus vaccine? Select all that apply.

a. The child has symptoms of a cold
b. The child had a previous anaphylactic reaction to the vaccine
c. Mother reports child is having intermittent episodes of diarrhea
d. Mother reports child has not had an appetite and is very fussy
e. The child has disorder that caused a severely deficient immune system
f. Mother reports that child has recently been exposed to an infectious disease
Contact Information

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