

# College Admission

## Ambulatory-Care-Nursing

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## Question: 1

The factors which health literacy can be dependent on would include all of the following except?

- A. Culture
- B. Demands of the situation
- C. Financial status
- D. Communication skills of lay persons/professional

**Answer: C**

Explanation:

Health literacy refers to the ability of individuals to obtain, process, and understand basic health information and services needed to make appropriate health decisions. Various factors influence health literacy, but not all factors are directly related to it. The question asks which of the listed options is least likely to be a direct factor influencing health literacy. Let's explore each option:

**Culture:** Culture can significantly affect health literacy. It influences perceptions of health, illness, and medical care, which in turn impact how people access, understand, and use health information. Different cultural backgrounds may have varying beliefs about medicine, health practices, and communication preferences, all of which are crucial in understanding health information.

**Demands of the situation:** The complexity or seriousness of a health situation can affect an individual's ability to process health information. For instance, in high-stress situations, a person's ability to comprehend complex medical information might be impaired, affecting their health literacy in that context.

**Communication skills of lay persons/professionals:** The ability of healthcare providers and laypersons to communicate effectively plays a critical role in health literacy. Clear communication can enhance understanding and retention of health information, thereby improving an individual's health literacy.

**Demands of the healthcare system:** The complexity of the healthcare system itself can be a barrier to health literacy. If the system is difficult to navigate, it can hinder one's ability to access health information, understand health insurance, medication instructions, and more.

**Demands of the public health systems:** Similar to the healthcare system, the public health system's demands can influence health literacy. Public health information needs to be clear and accessible to effectively reach and educate the population, impacting overall health literacy.

**Lay knowledge of health topics:** General knowledge that non-professionals have about health topics can directly affect their health literacy. The more informed a person is about health issues, the better they can understand and make decisions about their health care.

**Professional knowledge of health topics:** The depth of knowledge that healthcare professionals possess and their ability to impart this knowledge clearly can significantly influence patient health literacy.

Miscommunication or overly technical explanations can impede understanding.

**Financial status:** While financial status can impact access to healthcare services, it is less directly related to health literacy compared to the other factors listed. Financial resources might influence the ability to afford medications, treatments, or health education, but they do not inherently affect an individual's capacity to understand and use health information. Given these explanations, the answer to the question is "Financial status." Although important for accessing healthcare resources, financial status

itself does not directly affect an individual's health literacy in the way that factors like culture, communication skills, or knowledge of health topics do.

## Question: 2

Which of the following would not be considered a safeguard that can help prevent the ambulatory care nurse from having legal problems with documentation?

- A. Perform chart reviews frequently for accuracy
- B. Accurate, timely documentation
- C. Understanding their limitations
- D. Using a charting methods which offers cues

**Answer: C**

Explanation:

The question posed is about identifying which of the provided options would not be considered a safeguard that helps prevent legal issues with documentation for an ambulatory care nurse. Here we can analyze each option to determine its relevance to documentation safeguards.

**\*\*Perform chart reviews frequently for accuracy:\*\*** This option directly relates to the integrity and correctness of medical documentation. Regular chart reviews help ensure that all entries are accurate, up-to-date, and reflective of the care provided. By frequently reviewing charts, nurses can catch and correct errors before they lead to misunderstandings or legal issues. This practice is a fundamental safeguard in maintaining high standards of nursing documentation.

**\*\*Accurate, timely documentation:\*\*** This is a crucial safeguard in nursing practice. Documentation should always be accurate and completed in a timely manner to reflect the care that was provided. This not only ensures continuity of care but also provides a legal record of the actions taken and decisions made. Accurate and timely documentation can protect the nurse and the healthcare facility in legal contexts by providing clear evidence of patient interactions and interventions.

**\*\*Using charting methods which offer cues:\*\*** Utilizing charting methods that include structured cues can greatly assist nurses in capturing all necessary information accurately. These cues can guide the nurse to record pertinent information systematically, reducing the chance of omitting important details. Methods such as checklists or templated forms help ensure comprehensive and consistent documentation, which is a key safeguard against potential legal issues.

**\*\*Understanding their limitations:\*\*** This option, while extremely important in the broader scope of nursing practice, relates more to clinical competence and scope of practice rather than directly to documentation safeguards. Understanding one's limitations as a nurse involves recognizing the boundaries of one's knowledge and skills and when to seek guidance or escalate care to a more qualified professional. This is crucial for safe patient care but does not directly impact the legal aspects of documentation, unlike the other options listed.

Based on this analysis, the option "Understanding their limitations" would not be considered a direct safeguard in preventing legal problems with documentation. Although it is vital for overall nursing practice and indirectly contributes to better patient outcomes and reduced liability, it does not specifically address the process or method of documentation, unlike the other options provided. Therefore, this is the correct answer to the question regarding which option is not a documentation safeguard.

### Question: 3

If the patient is taking warfarin, they should not take the following dietary supplement?

- A. Garlic
- B. Lycopene
- C. Turmeric
- D. Both A and C

**Answer: D**

Explanation:

Warfarin is a commonly prescribed anticoagulant used to prevent blood clots and the complications arising from clots such as stroke and heart attack. It works by inhibiting the synthesis of certain clotting factors that are dependent on vitamin K. Because warfarin has a narrow therapeutic index, the dosage must be carefully controlled, and interactions with other substances, including certain foods and supplements, can significantly affect its efficacy and safety.

One dietary supplement that patients taking warfarin should avoid is garlic. Garlic is known for its potential health benefits, including reducing blood cholesterol and blood pressure. However, garlic also acts as a natural anticoagulant by inhibiting platelet aggregation, which can enhance the effects of warfarin and increase the risk of bleeding. This bleeding risk can be particularly concerning in situations where the patient requires a surgical procedure or suffers from an injury.

Similarly, turmeric, which contains the active ingredient curcumin, should be used with caution. Curcumin is recognized for its antioxidant and anti-inflammatory properties, which contribute to several health benefits. However, like garlic, turmeric can also interfere with blood clotting. When combined with warfarin, turmeric may increase the risk of bleeding due to its potential to further inhibit clotting mechanisms.

Because both garlic and turmeric possess anticoagulant properties and can amplify the effects of warfarin, it is generally advised that patients taking warfarin avoid supplements containing these ingredients. The combined use of warfarin with either garlic or turmeric—or both—can lead to dangerously high levels of anticoagulation and a significantly increased risk of abnormal bleeding. In conclusion, patients on warfarin should not take dietary supplements containing garlic or turmeric. Both of these can interfere with the effectiveness and safety of warfarin treatment. It is essential for patients to consult healthcare providers before starting any new supplements, especially those known to impact blood clotting, to ensure safe and effective management of their health conditions.

### Question: 4

Where would a subcutaneous injection not be administered?

- A. The antecubital area
- B. Subscapular areas of the upper back.
- C. Upper dorsogluteal and ventrogluteal area.
- D. 1.5-2 inches out from the umbilicus

**Answer: A**

Explanation:

A subcutaneous injection is a type of injection administered into the fat layer, just beneath the skin. This method is used for the slow and consistent absorption of drugs, such as insulin and various vaccines. However, not all areas of the body are suitable for subcutaneous injections due to variations in skin thickness, the presence of blood vessels and nerves, and the overall effectiveness of drug absorption. The antecubital area, which is the inner surface of the arm where the elbow bends, is not a recommended site for subcutaneous injections. This area has a higher concentration of blood vessels and nerves that could potentially be damaged during the injection process. Additionally, the skin in the antecubital area is relatively thinner and has less subcutaneous fat compared to other parts of the body, which could lead to improper injection technique and subsequent complications such as irritation, infection, or incorrect drug absorption.

On the other hand, the recommended areas for administering subcutaneous injections typically include:

- The middle two thirds of the anterior thigh area, which provides a large, easily accessible area with sufficient subcutaneous fat.
- Subscapular areas of the upper back, where there is generally a good layer of fat beneath the skin.
- Upper dorsogluteal and ventrogluteal areas, which are preferred for their thick subcutaneous tissue and low risk of hitting major blood vessels or nerves.
- 1.5-2 inches out from the umbilicus, avoiding the belly button area directly, but utilizing the surrounding fatty tissue.
- Outer aspect of the upper arms, where there is usually enough fat and fewer critical structures.

Each of these recommended sites offers a safer and more effective option for subcutaneous injections, minimizing the risk of complications and ensuring better drug absorption. It is crucial for healthcare providers to be trained in proper injection techniques and site selection to ensure patient safety and treatment efficacy.

### Question: 5

Which of the following would be considered correct for the medication to be administered three times a day?

- A. Qid
- B. Bid
- C. Tid
- D. q 6 hours

**Answer: C**

Explanation:

In medical prescriptions, abbreviations are commonly used to indicate the frequency with which medications should be administered. Understanding these abbreviations is crucial for ensuring that a medication is given correctly and effectively. The question at hand is asking which abbreviation corresponds to administering medication three times a day. Below is an explanation of the given options: - **Tid**: This is a common abbreviation derived from the Latin term "ter in die," which means "three times a day." If a doctor prescribes medication with "tid" on the prescription, it indicates that the medication should be taken three times a day. - **Bid**: This abbreviation stands for "bis in die," which is Latin for "twice a day." When a prescription is marked with "bid," it means the medication should be

taken twice daily, typically once in the morning and once in the evening. - **Qid**: This stands for "quater in die," which translates to "four times a day" from Latin. A prescription with "qid" instructs that the medication should be administered four times throughout the day. - **q 6 hours**: This abbreviation means "every 6 hours." It is used when a medication needs to be administered more frequently throughout a 24-hour period, totaling four doses in a day. This is different from "qid" in that it specifies exact intervals (every 6 hours) rather than just stating "four times a day." Based on these explanations, the correct abbreviation for a medication that needs to be administered three times a day is **Tid**. This ensures the patient receives the medication in three divided doses over the course of the day, which can be important for maintaining consistent therapeutic levels of the medication in the bloodstream.

## Question: 6

You are conducting an assessment with a patient who has several burns in various stages of healing on her forearms. When asked, she mentions that she often burns herself when cooking because she does not feel hot temperatures well. Which lobe of her brain likely has a dysfunction?

- A. frontal
- B. temporal
- C. parietal
- D. occipital

**Answer: C**

Explanation:

The correct answer to the question is the parietal lobe. The parietal lobe of the brain is primarily responsible for processing sensory information from various parts of the body, integrating this sensory input to form a single perception (cognition), and constructing a spatial coordinate system to represent the world around us. One of the key functions of the parietal lobe involves the sense of touch and the ability to judge temperature, pressure, pain, and the location of one's body parts in space.

When a person has a dysfunction or damage in the parietal lobe, they may experience difficulties with proprioception (the sense of self-movement and body position) and temperature sensation. This can explain why the patient mentioned in the question frequently burns herself while cooking due to not feeling hot temperatures well. Her inability to adequately sense heat could be indicative of a parietal lobe impairment.

Additionally, it is important to consider the broader implications of such injuries. When a patient has multiple burns that they attribute to frequent accidents due to sensory deficits, healthcare providers should not only focus on treating the physical injuries but also investigate the underlying neurological issues. Moreover, it's crucial to evaluate whether these injuries might also be self-inflicted, intentionally or due to cognitive impairments. Assessing the risk for self-injury is essential, and discrepancies between the patient's explanation and the pattern or severity of the burns may warrant further exploration into their mental and neurological health.

Thus, in the case presented, the most likely lobe of the brain experiencing dysfunction is the parietal lobe, given its role in processing and interpreting sensory data such as temperature. Appropriate medical and psychological evaluations would be necessary to address both the immediate physical injuries and any underlying neurological or psychological issues.

## Question: 7

Which of the following does NOT require taking standard infection precautions in patient care?

- A. Urine.
- B. Blood.
- C. Sweat.
- D. Mucous with no visible blood.

**Answer: C**

Explanation:

In medical settings, standard infection precautions are essential for protecting healthcare workers and patients from the transmission of infections through bodily fluids and substances. These precautions typically include the use of personal protective equipment (PPE), such as gloves, gowns, masks, and eye protection, to prevent direct contact with bodily fluids which may carry infectious agents.

The typical bodily fluids that necessitate standard infection precautions include blood, urine, feces, saliva, mucus, vomit, and semen, particularly when they are visibly contaminated with blood. The reason for these precautions is that these fluids can contain high concentrations of infectious agents like viruses and bacteria, which can be transmitted through direct contact.

However, sweat is an exception to this rule. Generally, sweat is not considered a significant risk for the transmission of infectious diseases in the absence of visible blood. Sweat itself typically does not contain infectious agents unless it is mixed with blood from abrasions or other injuries. Therefore, while handling or coming into contact with sweat, standard infection precautions like wearing gloves or other PPE are not usually required unless there is visible contamination with other potentially infectious bodily fluids.

This exception for sweat is based on current scientific understanding and guidelines provided by health authorities such as the Centers for Disease Control and Prevention (CDC). It is important to note, however, that precautions should still be maintained in environments where there is a higher risk of blood presence or other factors that might complicate the situation.

In summary, while strict adherence to infection control practices is critical in healthcare settings, the handling of sweat exclusively does not typically necessitate the same level of barrier precautions required for other bodily fluids. Nevertheless, healthcare professionals should continuously assess the risk of exposure and apply all other general hygiene practices, such as hand washing, to maintain a safe care environment.

## Question: 8

The use of holistic nursing care helps to nourish the whole person. This type of care would include all but which of the following?

- A. The financial status
- B. The body
- C. The spirit
- D. The mind

**Answer: A**

Explanation:

Holistic nursing care is an approach that aims to treat the whole person rather than just their physical symptoms. This method integrates multiple dimensions of care to address the spiritual, mental, and physical aspects of an individual's well-being. Holistic nursing is rooted in the philosophy that the interconnectedness of the mind, body, and spirit can significantly influence health and healing.

To clarify, the spirit refers to the essence of being that connects to beliefs, values, and faith. Caring for the spiritual needs might involve practices and support systems that offer peace, meaning, and connection. The mind aspect concerns mental health, encompassing emotional and psychological well-being. This can include managing stress, anxiety, depression, and other mental health issues. The body is addressed in the physical sense, focusing on achieving physical health and addressing any illnesses or injuries.

However, the financial status of an individual, while important in the context of accessing health care services and possibly affecting health outcomes, is not typically a direct focus of holistic nursing care itself. Holistic nursing primarily concentrates on the direct aspects of a person's health and well-being as mentioned—their physical condition, mental state, and spiritual well-being. While financial advice or support might be part of a broader care network or social services referral, it is not generally included under the direct scope of holistic nursing interventions. Thus, when considering what holistic nursing care includes, the financial status of a patient would not be a typical component.

### Question: 9

Of the following, which would not be considered a benefit of telehealth?

- A. Can increase the cost of healthcare
- B. Higher quality of care
- C. Continuity of care
- D. Improved decision making

**Answer: A**

Explanation:

Telehealth, or telemedicine, involves the use of digital information and communication technologies, such as computers and mobile devices, to access health care services remotely and manage health care. This approach has garnered widespread support for its potential to improve various aspects of healthcare delivery. However, it is essential to evaluate its potential drawbacks alongside its benefits. One of the purported drawbacks, which is "Can increase the cost of healthcare", might initially seem counterintuitive since telehealth is often credited with the potential to reduce healthcare costs. The rationale behind telehealth potentially increasing healthcare costs lies in several areas: the initial setup costs for technology and training, potential increases in utilization due to easier access, and the maintenance of technology over time. For instance, healthcare providers might need to invest in robust digital platforms, secure communication tools, and training for staff, which could be substantial. Moreover, while telehealth can lead to cost savings in some scenarios, such as reducing the need for

physical office space and decreasing travel time, the overall impact on costs is complex and can vary based on how telehealth is implemented.

In contrast, other options like "Higher quality of care", "Continuity of care", "Improved decision making", "Centralized health records", and "More collaboration between healthcare professionals" are generally considered direct benefits of telehealth. These benefits manifest in several ways: - **Higher quality of care**: Telehealth can improve access to specialists and more timely care interventions, potentially leading to better patient outcomes. - **Continuity of care**: Telehealth facilitates ongoing health monitoring and communication between patient visits, helping in chronic disease management and post-operative care. - **Improved decision making**: Access to centralized health records and data analytics through telehealth platforms can enhance the accuracy and speed of clinical decision-making. - **Centralized health records**: Telehealth often relies on electronic health records that centralize patient data, making it easier for different care providers to access and coordinate patient care. - **More collaboration between healthcare professionals**: Telehealth encourages multidisciplinary team meetings and consultations, often in real-time, regardless of each member's location.

Thus, while telehealth has the potential to enhance many aspects of healthcare delivery, its impact on healthcare costs is not straightforward and can be seen as both a potential benefit and a drawback, depending on the specific context and implementation. This complexity makes "Can increase the cost of healthcare" a valid answer if the question is about potential disadvantages of telehealth.

## Question: 10

A telephone nurse is triaging a caller who has a fever and bouts of vomiting. The patient said she just took her temperature and it was 102.3. This nurse knows the appropriate follow up question for this symptom is what?

- A. How was the temperature taken?
- B. Is this number rounded?
- C. Is the thermometer digital or glass?
- D. How many times has the temperature been taken?

**Answer: A**

Explanation:

The correct follow-up question "How was the temperature taken?" is crucial in the context of telephone triage for several reasons. When a nurse is triaging a patient remotely, they lack the ability to physically assess the patient, making accurate and precise information vital for proper evaluation and advice. Different methods of measuring temperature can yield different results, and each has its own level of accuracy and reliability. For instance, oral temperatures are generally reliable but can be affected if the patient has recently consumed hot or cold food or drinks. Rectal temperatures are often higher and more accurate but are less commonly used due to discomfort. Axillary (underarm) temperatures might be lower than the core body temperature and can sometimes be less reliable.

By asking how the temperature was taken, the nurse can determine the reliability of the reported fever. This inquiry also helps to establish whether the patient or someone else took the temperature, which can affect the accuracy of the reading. For example, improper placement of a thermometer can lead to incorrect readings. Additionally, knowing the type of thermometer used—digital or mercury—is important. Digital thermometers provide quick readings and are generally considered safe and accurate

if used correctly, whereas mercury thermometers, though less common now, require proper technique and timing to ensure accurate readings.

Understanding the method used also allows the nurse to offer specific advice or instructions on how to take a temperature accurately if re-measurement is necessary. This is especially important if the initial reading might have been influenced by external factors or incorrect usage. Moreover, specific thermometer types might need specific instructions, such as shaking down a mercury thermometer or ensuring a digital thermometer has functional batteries.

Lastly, this question opens the dialogue for further necessary questions related to the patient's condition—such as the duration of the fever, associated symptoms (like chills, sweating, or additional signs of infection), and any recent exposures to illnesses—which are all crucial for determining the urgency and the most appropriate care recommendations. Thus, the seemingly simple question "How was the temperature taken?" sets the stage for a comprehensive assessment, ensuring the nurse can provide informed, accurate, and safe medical guidance over the phone.

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