Nursing

ANCC-AAACN

American Academy of Ambulatory Care Nursing

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Question: 1

If a patient's nursing diagnosis is "Activity intolerance" on the care plan and the desired outcomes are for the patient to feel less tired and to carry out activities without signs of physical distress, which of the following is an appropriate nursing intervention?

A. "Keep patient awake during daytime hours."
B. "Limit activities to those that are essential."
C. *Instruct patient in energy-saving techniques."
D. "Encourage patient to take mid-morning and mid-afternoon naps:

Answer: C

Explanation:
If a patient's nursing diagnosis is "Activity intolerance" on the care plan and the desired outcomes are for the patient to feel less tired and to carry out activities without signs of physical distress, an appropriate nursing intervention is "Instruct patient in energy-saving techniques." The ambulatory care nurse should organize nursing care to allow for periods of rest and assist the patient as needed. The nurse may suggest assistive devices as indicated.

Question: 2

When preparing a budget for a community education project, the ambulatory care nurse needs to consider both direct and indirect costs, Indirect costs may include:

A. Supplies and equipment
B. Salaries
C. Employee benefits
D. Housekeeping services

Answer: D

Explanation:
If a when preparing a budget for a community education project the ambulatory care nurse must consider both the direct and indirect costs, the indirect costs may include housekeeping services because housekeeping is not an integral part of the educational program. Other indirect costs include costs for heating, lighting. and air conditioning. Some indirect costs are not easily quantified, such as the results of decreased productivity. Direct costs include salaries, benefits, and costs for supplies and equipment. Direct costs may be fixed (predictable) or variable.

Question: 3

A patient with type 1 diabetes mellitus has developed recurrent diarrhea, weight loss, fatigue, and anemi
a. What disorder should the healthcare provider suspect?
A. Crohn's disease
B. Celiac disease
C. Lactose intolerance
D. Clostridioides difficile infection

Answer: B

Explanation:
About 6% of patients with type 1 diabetes mellitus are Also diagnosed with celiac disease, so when a patient is diagnosed with one of these disorders, the person should be assessed for the other. In this case, the patient has symptoms typical of celiac disease, although symptoms are often nonspecific.

Question: 4

If a patient presents with dyspepsia, which of the following is an alarm symptom that should trigger further assessment?

A. Age 35 or older
B. Weight fluctuations of 4-5 pounds
C. Dysphagia
D. Chronic diarrhea

Answer: C

Explanation:
Alarm symptoms include vomiting. bleeding or anemia, abdominal mass. or unintended weight loss (usually 10-15 pounds), and dysphagia. Alarm symptoms are those that indicate that the patient may have a serious illness. If any of these symptoms occur with dyspepsia, then the patient may require endoscopic examination.

Question: 5

If, when utilizing the Plan-Do-Study-Act (PDSA) method of continuous quality improvement* study of the outcomes of a trial indicates that the solution that was instituted was not effective, the next step is to:

A. Return to the Plan step
B. Return to the Do step
C. Discontinue the process
D. Continue to the Act step

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Answer: A

Explanation:
If when utilizing the Plan-Do-Study-Act (PDSA) method of continuous quality improvement, study of the outcomes of a trial indicates that the solution that was instituted was not effective, the next step is to return to the Plan step in order to select a different solution. Method:
• Plan: Define the problem, brainstorm, and collect data.
• Do: Generate solutions. choose one, and implementa trial.
• Study: Evaluate outcomes.
• Act: Identify changes needed for full implementation and continue to monitor.

Question: 6

If a patient is scheduled for a routine serum creatinine to evaluate renal function, the patient should be advised to prepare for the test by:

A. Carrying out routine activities
B. Fasting for 12 hours
C. Avoiding strenuous exercise
D. Avoiding eating meat products for 2 days

Answer: C

Explanation:
If a patient is scheduled for a routine serum creatinine to evaluate renal function. the patient should be advised to prepare for the test by avoiding strenuous exercise, which may temporarily elevate the serum creatinine. While research has shown that the serum creatinine is more accurate if patients have avoided meat or fasted for 12 hours, doing so is not usually required unless a very accurate eGFR is critical for determining treatment.

Question: 7

The ambulatory care nurse is reviewing a patient's history to determine if the patient is a candidate for an intrauterine device (IUD). Contraindications for an IUD include:

A. Menorrhagia
B. History of pelvic inflammatory disease 3 years previously
C. History of renal cancer
D. History of ectopic pregnancy

Answer: D

Explanation:
When reviewing a patients history to determine If the patient is a candidate for an intrauterine device (IUD), a contraindication is a history of ectopic pregnancy because this is a risk associated with IUDs. IUDS are

sometimes inserted specifically to treat menorrhagia. Pelvic inflammatory disease is a contraindication if it is recurrent or has occurred within the previous 12 months. Only a history of breast or cervical cancer are contraindications, not renal cancer.

Question: 8

The purpose of an Advance Beneficiary Notice (ABN) is to:

A. Identify beneficiaries of a will.
B. Inform Medicare patients of non-coverage.
C. Inform patients of Medicaid eligibility.
D. Inform patients of insurance coverage.

Answer: B

Explanation:
The purpose of an Advance Beneficiary Notice (ABN) is to notify Medicare patients that an item or service is not covered by Medicare (usually meaning that supplementary insurance will also not cover the item or service). ABNs may be issued if the patient wants a service or item that is not deemed medically necessary at that time but is a service or item that is generally covered by Medicare. ABNs are not required to inform patients of services that are never covered by Medicare, such as acupuncture.

Question: 9

Which of the following corticosteroids is long acting?

A. Hydrocortisone
B. Methylprednisolone
C. Triamcinolone
D. Dexamethasone

Answer: D

Explanation:
Dexamethasone is a long-acting corticosteroid. Short-acting corticosteroids last for 8-12 hours and include hydrocortisone and cortisone acetate. Intermediate corticosteroids last for 12-36 hours and include prednisone, prednisolone, methylprednisolone, and triamcinolone. Long-acting corticosteroids last for 36-72 hours and include betamethasone and dexamethasone. Long-acting corticosteroids are about 25 times more potent than short-acting corticosteroids. For example, 40 mg of hydrocortisone is equivalent to 1.2 mg of betamethasone.

Question: 10

In the CHEDDAR method of documentation for problem-oriented medical records, the H stands for:

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A. Hearing
B. Health
C. History
D. Heart

Answer: C

Explanation:
The CHEDDAR method of documentation for problem-oriented medical records consists of the following:

C	Chief complaint	Patient's subjective description and presenting problems.
H	History	Onset of problem and duration and contributing factors (social, physical, psychological).
E	Examination	Objective findings based on physical assessment.
D	Details of problem/complaint	Details regarding the chief complaint.
D	Drugs and dosages	List of all current prescribed medications, over-the-counter medications, and supplements as well as dosages.
A	Assessment	Final assessment based on observations.
R	Return visit information (if applicable)	Need for return visit or further treatment.

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