

Respiratory

1- All of the following considered complications of acute asthma except one?

- a) Status Asthmatics
- b) Cor pulmonale
- c) Respiratory failure
- d) Pneumonia

2- Oxygen therapy is used at lower concentration in patient with acute asthma avoid hypoxemia and improve O₂ saturation. T F

3- ABC is considered an initial Assessment that a nurse should make for acute asthma. T F

4- **Status Asthmatics**: it is an acute exacerbation of asthma that remains unresponsive to initial treatment with bronchodilators. T F

5- Flaring nostrils is a clinical signs of patient with Upper airway obstruction.

6- Use of accessory muscles is considered a subjective signs of airway obstruction. T F

7- Emergency care is the immediate care used for those patients who require immediate action T F

A 19-year-old comes into the emergency department with acute asthma. His respiratory rate is 44 breaths/minute, and he appears to be in acute respiratory distress. Which of the following actions should be taken first?

- a. Give a bronchodilator by nebulizer
- b. Provide emotional support to the client.
- c. Apply a cardiac monitor to the client
- d. Take a full medication history

All of the following is a medical treatment that directed towards oxygenation and ventilation status asthmatics including?

- a. Bronchodilators
- b. Corticosteroids
- c. Oxygen therapy
- d. Antibiotics

Which of the following is contraindication for endotracheal intubation

- a. Extensive maxillofacial trauma,
- b. pharyngitis
- c. cerebral hemorrhage
- d. cerebral stroke

The client with asthma should be taught that which of the following is one of the most common precipitating factors of an acute asthma attack?

- a. Viral respiratory infections
- b. Occupational exposure to toxins
- c. Exposure to cigarette smoke
- d. Exercising in cold temperatures

The nurse would anticipate which of the following ABG results in a client experiencing a prolonged, severe asthma attack?

- a. Increased PaCO₂, decreased PaO₂, and decreased pH.
- b. Decreased PaCO₂, increased PaO₂, and decreased pH.
- c. Decreased PaCO₂, decreased PaO₂, and increased pH.
- d. Increased PaCO₂, increased PaO₂, and increased pH.

The nurse recognizes that intubation and mechanical ventilation are indicated for a patient in status asthmaticus when

- a. ventricular dysrhythmias and dyspnea occur.
- b. loud wheezes are audible throughout the lungs.
- c. pulsus paradoxus is greater than 40 mm Hg.
- d. fatigue and an O₂ saturation of 88% develop.

List role of emergency nurse:

- a.....
- b.....
- c.....
- d.....

True or false

1. A significant discrepancy between arms (> 20 mm Hg in systolic blood pressure) when measured Blood pressure is suggestive of aortic dissection
2. Hypertensive urgency is a severe elevation in blood pressure without progressive target organ dysfunction.
3. A modified Trendelenburg position is recommended in hypovolemic shock
4. The most common causes of cardiogenic shock are acute myocardial infarction (AMI) with marked loss of LV function

5. Patient with hypovolemic shock can be given analgesic through the subcutaneous tissues or the muscles
6. Cold weather can be aggravating factor for chest pain related angina
7. Red color which used in triage sorting is used for life threatening conditions that need immediate intervention
8. Eating before bedtime is encouraged in patient with chest pain related GIT disturbance
9. Chest pain in patient with myocardial infarction is relieved by nitroglycerine or rest
10. Abruptly stopped taking β blockers may lead to rebound hypertension

Chest pain associated with pneumonia is worsened by

- a. forceful coughing
- b. Superficial breathing
- c. Eating
- d. exercises

Which of the following conditions requiring immediate nursing and physician assessment

- a. Cervical spine injury.
- b. mild trauma
- c. Back pain.
- d. Abdominal pain

Conditions requiring nursing and physician assessment within 30 minutes of arrival.

- a. Severe trauma.
- b. Severe bleeding.
- c. Moderate trauma.

- d. Severe shock

Characteristics of chest pain related Esophagus Symptoms are

- a. Worsened by leaning forward
- b. Worsened by forceful coughing
- c. It may present with deep breaths.
- d. It may present after meals or at bedtime

Nursing instruction for patient with chest pain related gastric disorders are

- a. Remain in flat position after each meal
- b. Remain upright for 1 to 4 hours after each meal
- c. Eating before bedtime is encouraged.
- d. Excessive use of antacids is encouraged

5-Which of the following is pulmonary causes of chest pain

- a. Pulmonary embolism
- b. Arrhythmia
- c. Pericarditis
- d. Trauma

The nurse teaches the client that the major difference between pain associated with angina and myocardial infarction (MI) is that:

- a. Angina is relieved with nitroglycerin and rest.
- b. Angina can be fatal.
- c. MI pain always radiates to the left arm or jaw.
- d. MI pain can be treated.

Which of the following client conditions put a client at risk for cardiogenic shock?

- a. Ventricular Fibrillation
- b. Atrial Fibrillation
- c. Myocardial infarction
- d. Ventricular Tachycardia

Common causes of arrhythmia can include stress, caffeine T F

Any interruption in the hearts electrical system can cause arrhythmias T F

Arrhythmias are disorders of your heart's electrical system T F

Premature ventricular contraction is early extra heart beats that originate in atrium T F

A nurse is assessing an electrocardiogram rhythm strip. The P waves and QRS complexes are regular. The PR interval is 0.16 second, and QRS complexes measure 0.06 second. The overall heart rate is 64 beats per minute. The nurse assesses the cardiac rhythm as:

- A. Normal sinus rhythm
- B. Sinus bradycardia
- C. Sick sinus syndrome
- D. First-degree heart block

A nurse is watching the cardiac monitor and notices that the rhythm suddenly changes. There are no P waves, the QRS complexes are wide, and the ventricular rate is regular but over 100. The nurse determines that the client is experiencing:

- A. Premature ventricular contractions
- B. Ventricular tachycardia
- C. Ventricular fibrillation
- D. Sinus tachycardia

A nurse is viewing the cardiac monitor in a client's room and notes that the client has just gone into ventricular tachycardia. The client is awake and alert and has good skin color. The nurse would prepare to do which of the following?

- .A. Immediately defibrillates
- .B. Prepare for pacemaker insertion
- .C. Administer amiodarone (Cordarone) intravenously
- D. Administer epinephrine (Adrenaline) intravenously

A client has developed atrial fibrillation, which has a ventricular rate of 150 beats per minute. A nurse assesses the client for:

- A. Hypotension and dizziness
- B. Nausea and vomiting

C. Hypertension and headache

D. Flat neck veins

A client with rapid rate atrial fibrillation asks a nurse why the physician is going to perform carotid massage. The nurse responds that this procedure may stimulate the

A. Vagus nerve to slow the heart rate

B. Vagus nerve to increase the heart rate; overdriving the rhythm

C. Diaphragmatic nerve to slow the heart rate

D. Diaphragmatic nerve to overdrive the rhythm.

When ventricular fibrillation occurs in a CCU, the first person reaching the client should:

A. Administer oxygen.

B. Defibrillate the client.

C. Initiate CPR

D. Administer sodium bicarbonate intravenously

Atrial depolarization is manifested on an ECG as _____.

A. U waves

B. QRS complex

C. T waves

D. P waves

Enumerate five causes of arrhythmias

A.....

B.....

C.....

D.....

E.....

Treatment of tachycardia includes the following measures

- a.....
- b.....
- c.....
- d.....
- e.....

Endocrine emergencies questions

Circle (T) if the statement is true and circle (F) if the statement is false

1	Syndrome of inappropriate antidiuretic hormone is characterized by excessive secretion from the anterior pituitary gland.	T	F
2	Aldosterone deficiency in adrenal crisis is associated with hyperkalemia and hyponatremia.	T	F
3	Assess the level of consciousness and airway management are an essential parts of secondary survey for management of patients' with endocrine emergencies.	T	F

Read the following questions carefully and then choose the correct answer

1. What is the triad of presenting symptoms of diabetes insipidus in adults?

- a. Polyuria, watery like urine, and polydipsia
- b. Polyuria, polydypsia, and polyphagia
- c. Weight gain, enuresis, and polydypsia
- d. Polydypsia, weight loss, and polydepsia

