英汉对贼 美国注册护士考试 试题解答

卫生部护理中心组编



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美国注册护士考试试题解答

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序言

为提高我国护士的专业英语水平,並配合国家向美国派遣护士外出工作做好语言准备及专业准备,卫生部护理中心于1990年初翻译《美国注册护士考试试题解答》一书(英汉对照)。

全书分五部分,包括:社会心理改变患者的护理,妇产科患者及新生儿的护理,儿科护理,成人内外科护理及综合练习试题。共有28组2536道试题,並附有英汉对照专业词汇总表及正确答案。

该书为1986年美国注册护士考试委员会主编的最新试题,系统地归纳了护理专业最新发展及基础知识,按疾病 分类 列举题例,方便阅读与记忆,是美国对国内护士及国外护士进行注册考试的依据。适用于准备赴美的人员参加进修考试。並有助于在职护士、进修护士的英语及护理理论水平的提高,又可作为中专以及高等护理教育教师的有益参考资料。

根据原版书前言介绍,读者应结合近代新的护理理论,着重应用护理程序以及生物、社会、心理的医学模式来理解及选择正确答案。此外,应根据个人理论及实践的薄弱环节着重努力; 並提出依科目顺序逐一学习,可取得较好的效果。

卫生部护理中心 陈淑坚 1990年初于北京

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Evaluation techniques have been used since the beginning of time for everything from choosing a mate to determining the strength of an adversary. The art of measurement has become more sophisticated through the years as evaluation continues to play a major role in everyone's life.

Lippincott's State Board Review for NCLEX-RN is intended primarily to help you review in preparation for writing the licensure examination for registered nurses. Read this introduction with care. It will explain the licensure examination, how you can best prepare for writing it, and how this book can be used to help you prepare for the examination.

WHAT IS NCLEX-RN?

NCLEX-RN is an acronym. It stands for the National Council Licensure Examination for Registered Nurses.

The National Council of State Boards of Nursing, whose Examination Committee is responsible for developing NCLEX-RN, is made up of representatives from all state boards of nursing.

WHAT IS THE PURPOSE OF NCLEX-RN?

Each state board of nursing is legally charged with the responsibility of determining an individual's competency to practice nursing in its jurisdiction. Taking a licensure examination is part of the process required of candidates by state boards of nursing to become eligible to obtain a registered nurse license and then to practice as a registered nurse.

NCLEX-RN helps state boards of nursing determine whether or not you are ready to give safe and effective nursing care. The examination tests your ability to apply knowledge in health care situations that require the intervention of a registered nurse.

WHO ARE CANDIDATES FOR NCLEX-RN?

Candidates for NCLEX-RN are persons who aspire to receive a license as registered nurses. Candidates for NCLEX-RN are graduates of baccalaureate, diploma, and associate degree programs in nursing. Most are graduates of educational programs in the United States.

Nurses educated in foreign countries are also eligible as candidates to write NCLEX-RN, provided they meet licensure requirements in the states in which they wish to practice as registered nurses. In many states, one such requirement is that a foreign-educated nurse pass a qualifying examination before becoming eligible to write NCLEX-RN. One qualifying examination is prepared by the Commission on Graduates of Foreign Nursing Schools (CGFNS). The purpose of the Commission's qualifying examination is to help graduates of foreign schools of nursing determine their ability to qualify as registered nurses in the United States. CGFNS is an independent nonprofit organization that is sponsored by the American Nurses Association and the National League for Nursing.

HOW IS NCLEX-RN PREPARED?

The Examination Committee of the National Council of State Boards of Nursing is responsible for developing NCLEX-RN. A test plan is prepared first, based on health care situations nurses commonly encounter. After the plan is approved by delegates of the Council, who represent the state boards of nursing, the states submit names of persons from their jurisdictions for writing the examination items. Item writers are selected from submitted names on the basis of their expertise, the area of the country they represent, and the type of nursing program or nursing service agency in which they work. The items are designed to emphasize the way a nurse carries out her responsibilities when planning, administering, and evaluating nursing care.

After the items are reviewed and approved by the state boards of nursing, they are selected for use in NCLEX-RN. So-called try-out items are distributed throughout the licensure examination. These items are analyzed statistically to determine whether they function in helping to judge if a candidate knows nursing content sufficiently well to practice safe nursing. If the item is found to function well, it is used in NCLEX-RN. Items that prove to be ambiguous or poorly constructed are eliminated and do not count in terms of deciding whether you pass or fail NCLEX-RN.

The California Testing Bureau (CTB)/McGraw-Hill acts as the professional testing service for NCLEX-RN. It prints, distributes, and scores the examinations.

HOW IS NCLEX-RN STRUCTURED AND WEIGHTED?

The test plan for NCLEX-RN illustrates nursing behaviors based on the nursing process, health requirements based on the locus of decision making, and levels of cognitive ability.

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The Nursing Process

The nursing process is described in five parts, as follows:

Assessing. Assessing requires a nurse to prepare a database, or information base, about a patient who is to receive nursing care. The nurse gathers information through observation and typically from the patient, the patient's family, significant others, other health personnel, and such standard sources of information as the patient's health record. The nurse verifies information she receives as necessary and eventually uses the data for making nursing decisions.

Analyzing. Analyzing requires the nurse to interpret data she has gathered concerning the patient's health care needs. The nurse then determines the nursing care needs of the patient. While analyzing information, the nurse makes a nursing diagnosis (or diagnoses) and describes objectives (goals) of nursing care.

Planning. Planning requires the nurse to develop a nursing care plan for each patient that is designed to help the patient meet the specific needs required for his health care. The plan is best prepared in cooperation with the patient and his family to the extent possible. Planning nursing care includes modifying the care plan as a patient's needs change and cooperating with other health personnel for the delivery of appropriate health care.

Implementing. Implementing means putting the nursing care plan into action. The nurse counsels, teaches, gives nursing care as required, supervises care as indicated, and exchanges information with other health personnel who are involved with the patient's care.

Evaluating. Evaluating refers to judging the patient's responses to nursing care and determining how well the goals of nursing care have been met. The nurse evaluates the appropriateness of nursing care measures that are being used, determines whether changes in care are indicated, and investigates compliance and noncompliance with prescribed care.

These five parts of the nursing process are considered of equal importance in the practice of nursing. Therefore, each part of the nursing process is assigned 20% of the total NCLEX-RN items.

Locus of Decision Making

A patient's health care requirements are described in relation to a systems technique that relates to where decision making is centered in terms of his health care. Items are structured and weighted in NCLEX-RN as follows:

Decision Making That Is Nurse Centered. Decision making that is nurse centered occurs when a patient, because of his physical and/or psychosocial status, cannot participate in making decisions about his care. In such instances, the nurse is required to make decisions regarding the patient's state of health.

Between 20% and 30% of items in NCLEX-RN illustrate decision making that is nurse centered.

Decision Making That Is Shared by the Patient and the Nurse. When decision making is shared by the patient and the nurse, the patient is able to assume at least

some control over his health care. The nurse takes over as necessary in areas where the patient has limitations, but the patient can perform selected activities in his daily living.

Between 55% and 65% of the items in NCLEX-RN illustrate decision making that is shared by the patient and the nurse.

Decision Making That Is Patient Centered. The patient, or a family member, is able to care for the patient's health needs when decision making is patient centered. The nurse's role is one of teaching, supporting, and encouraging the patient so that he can function independently in relation to meeting his health needs.

Between 10% and 20% of items in NCLEX-RN illustrate decision making that is patient centered.

Level of Cognitive Ability

NCLEX-RN includes items that require recall, comprehension, application, and analysis of knowledge. No weighting of items is given for the level of cognitive ability required by NCLEX-RN. However, *most* items are described as requiring cognitive ability at the application and analysis level.

WHY IS NCLEX-RN CALLED A COMPREHENSIVE EXAMINATION?

In the past, each test in the licensure examination for candidates for registered nurse licensure was limited to one clinical area, that is, psychiatric nursing, obstetrical nursing, pediatric nursing, medical nursing, and surgical nursing. NCLEX-RN, on the other hand, is comprehensive in nature. Each test in NCLEX-RN presents a variety of situations that are commonly encountered in nursing practice and cross all clinical disciplines.

Such underlying knowledge related to the basic physiopsychosocial sciences, fundamentals of nursing, pharmacology and other therapeutic measures, communicable disease control, legal and ethical considerations, and the like is included in items as applied to a particular patient.

HOW OFTEN IS NCLEX-RN OFFERED?

NCLEX-RN is offered in the 50 states, Washington D.C., and possessions of the United States twice each year, in February and July. The examination is administered on the same dates in all testing locations. Each state determines the testing locations it will use for its candidates for licensure.

HOW LONG IS NCLEX-RN?

NCLEX-RN is divided into four, 90-minute parts. There are approximately 90 items in each part, for a total of about 360 items. The maximum number of items in NCLEX-RN is 375. The parts are presented in booklets that are numbered I, II, and IV. Two days are required to write the entire examination.

It stands to reason that approximately 360 items cannot test all knowledge related to a course in nursing. Therefore, NCLEX-RN samples material relevant to the objectives being measured. Candidates are assured that health care situations presented in NCLEX-RN are ones commonly encountered in nursing practice. Uncommon situations, recent research, and local practices are not tested. NCLEX-RN also does not contain trick questions, nor does it contain items without a correct answer.

WHAT TYPE OF ITEM IS USED FOR NCLEX-RN?

NCLEX-RN uses objective items. Each item consists of two parts: the stem and the options.

The stem presents the problem. It may be stated in the form of a question or as an incomplete sentence. The options in the item present alternatives from which you are asked to select the correct answer. There are four options in each item. Only one option is the *correct* or *best* answer. The other three options are incorrect answers and are often called the distractors in the item.

Below are two examples of items. In the first, the stem is stated as a question; in the second, the stem is in the form of an incomplete sentence.

Example 1.

Which chamber of the heart normally receives oxygenated blood from the pulmonary veins?

- 1. The left atrium.
- 2. The right atrium.
- 3. The left ventricle.
- 4. The right ventricle.

Option 1 is the correct answer.

Options 2, 3, and 4 are incorrect answers, or distractors.

Example 2.

The name of the bone in the thigh is the

- 1. tibia.
- 3. fibula.
- 2. femur.
- 4. humerus.

Option 2 is the correct answer.

Options 1, 3, and 4 are incorrect answers, or distractors.

There is no pattern of responses in NCLEX-RN. The options for the correct answers are selected on a random basis.

HOW ARE PATIENT SITUATIONS USED IN NCLEX-RN?

With few exceptions, test items in NCLEX-RN are presented following a patient situation, that is, a patient is described and a group of items pertaining to the patient follows. There are a few individual items at the end of some of the parts of the examination.

DOES NCLEX-RN USE ANSWER SHEETS?

NCLEX-RN no longer uses answer sheets. You are asked to indicate your choice for the correct answer by recording your answer directly in the test booklets. This procedure helps eliminate the danger of losing your place on an answer sheet while recording your choice for the correct answer. Nevertheless, you should use caution in recording your answers exactly as directed and avoid making stray marks in the test booklets to avoid carelessness that could reduce your final score. The booklets are machine scored.

IS NCLEX-RN SCORED BY CORRECTING FOR GUESSING?

NCLEX-RN is not scored by correcting for guessing. Your score is based solely on the number of items you have answered correctly.

You are advised to answer an item rather than skip the item when you feel unsure of the correct answer. There is no penalty when an item is answered incorrectly.

The four parts of NCLEX-RN are scored as a whole. You will have one score only, not scores for each of the parts of NCLEX-RN, as was the case in the old licensure examination.

HOW CAN I BEST PREPARE FOR TAKING NCLEX-RN?

Be sure to follow instructions provided by your state board of nursing concerning the completion of an application for taking NCLEX-RN, submitting fees, and the like. Allow sufficient time for these requirements.

Make plans to review over a period of time. Plan your review so that you finish a few days before you are scheduled to take NCLEX-RN. If you have done well in your academic and clinical work as a student nurse, you may require little, or possibly no review. However, in general, candidates for NCLEX-RN feel more comfortable when they plan for a review period.

Approach your review with confidence and determination. Tell yourself that you will prepare well for NCLEX-RN and that you will follow your review schedule. A positive attitude will help you do well but a negative attitude is likely to interfere with your doing your best.

Plan to spend most of your review time by studying areas in which you feel least confident. To select those areas, look at yourself objectively and identify the strengths and weaknesses you displayed while a student in nursing, and review for NCLEX-RN accordingly.

Choose a review method that you have found to be best for you in the past. You have completed an educational program in nursing and have no doubt developed study skills that can serve you well in preparation for NCLEX-RN. Most candidates find it best to review texts and class notes. Many candidates find

studying at least part of the time with classmates helpful and use such sessions for asking each other questions. But be sure to study with candidates who are cooperative and serious about review sessions.

Review by working to understand basic principles and how they are applied and nursing behaviors required to practice nursing competently. It will be of little or no value to memorize material without concern for how such material is applied in the practice of caring for patients.

Use techniques to relieve anxiety. This begins by having confidence in yourself and your ability to complete NCLEX-RN successfully. Also, purposefully practice to relax and to be calm.

Try relaxation techniques if you are experiencing tension. Use those that have worked for you in the past. One recommended technique to help relieve tension involves purposefully relaxing each group of muscles in your body by starting at the toes and working up slowly to the scalp. Intersperse relaxation of muscle groups with an occasional deep breath. Speak to yourself as you practice relaxing tension: "My toes are relaxing; my legs are relaxing; and so on." Progressive relaxation of this nature can be used for 5 to 10 minutes four or five times each day.

Plan some diversion in each day's activities, especially the night before you write NCLEX-RN. This is a healthful practice and also helps relieve tension. Such physical activities as stretching, swimming, biking, walking, running, and the like, help reduce stress, and managing stress relieves anxiety and improves your ability to concentrate. Attending a theater, a sports event, or a concert, especially the night before the examination, also helps to relieve anxiety and improve your ability to concentrate.

Remove unknowns from the NCLEX-RN testing situation. For example, practice a "dry run" to the site of the examination so that you are sure of where you are going, how best to get there, how long it will take, where you will park if you are driving, where the restrooms are located, and where suitable eating facilities can be found.

Avoid cramming before the examination. It may actually interfere. Because NCLEX-RN integrates material studied over a period of time in a school or college of nursing, it is possible that cramming may result in remembering a few specific facts at the expense of understanding the total body of knowledge required to complete the examination successfully.

Have sufficient rest and a good night's sleep before writing NCLEX-RN. A tired person has more difficulty concentrating and tends to become more anxious, tense, and confused than a rested person.

Dress appropriately for the season and wear comfortable clothing. It is a good idea to take a sweater with you to protect against feeling chilly while you are taking NCLEX-RN.

Eat a nourishing breakfast and engage in a little exercise before arriving to take NCLEX-RN. For example, a brisk walk will help you relax before you start working on the examination.

Do not take books or notes into the testing room. Pencils and scrap paper will be provided.

WHAT STRATEGIES ARE MOST LIKELY TO HELP ME WHEN I AM WRITING NCLEX-RN?

Follow directions given to you by proctors administering NCLEX-RN and directions appearing in the test booklets. They are relatively simple, but carelessness in observing them may reduce your final score.

Maintain an air of confidence and calmness as you write NCLEX-RN. Having a negative attitude and allowing yourself to become irritated or angry cause stress, and you then may begin to forget material with which you are familiar.

Pay careful attention to time limits. Because you receive a score for each item you answer correctly, and no score for unanswered items, it is important to finish each part of NCLEX-RN within the 90-minute time frame. You are given approximately 1 minute for each item on NCLEX-RN, which is sufficient time to complete the examination, provided you work at a steady pace.

Read a situation with its accompanying items very rapidly before selecting correct answers if this is your personal preference. The time allowed to finish each part of NCLEX-RN is considered sufficient but does not allow for excessive reading and rereading.

Do not let your thoughts return to earlier items in the examination. This practice destroys concentration you should be using on the item at hand.

Be sure to read the stem of each item carefully. You should watch especially carefully for such words as best, least, usually, rarely, highest, lowest, primarily, contraindicated, and the like. Be alert and give considered thought to priority items, that is, items that ask you what the nurse should do *first* in a particular situation. When key words are overlooked, there is often no basis for you to select a correct answer.

Do not read anything into an item. You are to use only the information you are given. It is suggested that you read the stem carefully, identify the specific problem it presents, try to state the correct answer in your mind, and proceed to read the options for a correct response.

Select the one option you believe is the best or correct answer for each item. There may be times when you believe the options do not include what you think is the best possible response in a particular situation. In such instances, you must still select the best answer from the presented options even though you think the best possible choice has not been given.

Narrow your choices by eliminating the obviously wrong options when you are not sure of the correct answer. Narrowing your choices in this manner tends to sharpen your thinking by focusing attention on options you have identified as being reasonably correct. In many instances, it may be relatively easy and quick to rule out one or two of the options as being incorrect. If you can narrow your choice of options to two, you have a 50% chance of selecting the answer even when you are unsure of the correct response.

Remember that you are not penalized for guessing on NCLEX-RN. However, it will help if you make an educated guess by analyzing the item carefully and by concentrating on applying your very best judgment.

Make a note of an item you find particularly difficult and skip it while you

continue with the examination so that you complete items of which you feel sure. After completing the examination, go back to spend time on skipped items. However, be sure to watch the time so that you can go back to work more on items you have found difficult.

Assume that nurses described in NCLEX-RN are registered nurses. You will be informed if a health practitioner being described in an item is not a registered nurse.

WHAT IS THE PASS/FAIL SCORE FOR NCLEX-RN?

Raw scores for NCLEX-RN are standardized by using a statistical method. Standardized scores are larger than raw scores. Most scores fall between approximately 800 and 3,200. A score of 1,600 is recommended by the National Council of State Boards of Nursing to pass the licensure examination.

Each state has the responsibility of determining a passing score in its own jurisdiction. At the present time, a score of 1,600 on NCLEX-RN is used nationally for the passing score.

The pass rate on NCLEX-RN for first-time candidates is approximately 85%; about 15% of the candidates fail the examination on first try. These pass/fail percentages are approximately the same as they were when the old licensure examination was used in this country. This finding illustrates that NCLEX-RN is no more difficult than the old licensure examination even though the scoring is different.

WHAT HAPPENS IF I FAIL NCLEX-RN?

Each state notifies candidates in its jurisdiction whether they failed or passed NCLEX-RN. Those candidates who have failed are provided with a diagnostic profile so that they know their particular areas of weaknesses in nursing competency as measured by NCLEX-RN. The primary purpose of the diagnostic profile is to help failing candidates review for taking NCLEX-RN again. Candidates who fail must retake the entire NCLEX-RN, not just a part of it, as was true of the old licensure examinations.

The Examination Committee of the National Council of State Boards of Nursing developed the diagnostic profile for candidates who fail NCLEX-RN. The profile indicates areas where candidates did poorly in terms of the nursing process and of the locus of decision making. In addition, the diagnostic profile indicates in which categories of human functioning the candidates who failed did poorly. Eight categories of human functioning are described as follows:*

- 1. Protective functions
- 2. Sensory-perceptual functions
- 3. Comfort, rest, activity, and mobility

^{*}Examination Committee, National Council of State Boards of Nursing, Inc.: Diagnostic profile for failure candidates. Issues 4(1): 6-7, Spring 1983.

- 4. Nutrition
- 5. Growth and development
- 6. Fluid-gas transport;
- 7. Psycho-socio-cultural functions.
- 8. Elimination

Definitions of the eight categories of human functioning and of the locus of decision making are included on the diagnostic profile that failing candidates receive. If you wish further information concerning more specific aspects of the diagnostic profile for failing candidates, it is suggested that you write to the National Council of State Boards of Nursing, 303 East Ohio, Suite 2010, Chicago, Illinois 60611, or telephone (312) 329-1282.

HOW ARE THE REVIEW TESTS IN THIS BOOK SIMILAR AND HOW ARE THEY DISSIMILAR WHEN THEY ARE COMPARED TO NCLEX-RN?

There are 25 review tests in this book, as follows:

Part	The second secon	
	Number of Review Tests	Number of Items
I. The Nursing Care of Patients With Psycho-Social Alterations	5	446
II. The Nursing Care of Maternity Patients and	5	448
Newborns The Nursing Care of Children	4	360
The Nursing Care of Adults With	11	1,012
Medical/Surgical Disorders Total	25	2,266

This book's review tests are similar to NCLEX-RN in the following ways:

- The test plan used in the preparation of NCLEX-RN was used to prepare situations and items used in this book. They are based on knowledge considered essential for competent and safe nursing practice. The review items in this book are structured to illustrate nursing behaviors based on the nursing process and on health requirements of patients based on the locus of decision making. Most of the items require cognitive ability at the level of application and analysis with many fewer items requiring cognitive ability at the level of recall and comprehension.
- Each of the review tests contain approximately 90 items, which is similar in length to each part of NCLEX-RN.
- The items in the review tests are constructed in the same manner as items used in NCLEX-RN. The typical item in NCLEX-RN is described on page xxiii of this book.

- Typical health care situations in which nursing care plays a role and items accompanying each situation are used in the same way as they are in NCLEX-RN. There are also a few individual items used in some of the review tests in this book, as they are in NCLEX-RN.
- Just as is true of NCLEX-RN, the review tests make provisions for you to mark your choice for the correct answer for each item directly in this book.

The review tests in this book are dissimilar to NCLEX-RN in the following ways:

- The total number of items in the review tests in this book (2,266) is much greater than the total number of items in NCLEX-RN (approximately 360). No examination is capable of testing all knowledge related to a particular course of study. Therefore, the review tests, like NCLEX-RN, sample relevant material. The review tests in this book sample relevant material much more generously than NCLEX-RN can. Therefore, the review tests will help you study nursing knowledge in preparation for your writing NCLEX-RN from a very broad sampling of knowledge related to nursing practice. Because of this large sampling, there are more items accompanying each health care situation than could be used in NCLEX-RN with its much smaller sampling.
- There is no pass/fail score for the review tests in this book. Later in this
 introduction, there are suggestions concerning how you can evaluate yourself
 when using the review tests, as well as the postreview comprehensive tests.
- The review tests in this book are grouped according to clinical disciplines. Although the parts of NCLEX-RN are not grouped in this manner, authorities recommend that, for review purposes, it is better to study one clinical discipline at a time. Candidates who have used this review book in the past have also reported that it is easier to study clinical disciplines separately than all clinical areas together or as a whole.
- Correct answers and rationales are given for every item in this book. In addition, references in which correct answers for the items can be verified are given. No correct answers and rationales for items in NCLEX-RN are distributed.

WHAT ARE THE POSTREVIEW COMPREHENSIVE TESTS THAT APPEAR LATE IN THIS BOOK?

This book has three postreview comprehensive tests, each containing 90 items, beginning on page 710. Each test is comprehensive in nature; that is, the situations cross all clinical disciplines and focus on what a nurse does in her work, just as each part in NCLEX-RN does. After you have completed your review for writing NCLEX-RN, these three tests give you an opportunity to test yourself with examinations that are designed to resemble in every way possible the parts of the NCLEX-RN.

Correct answers and rationales are included for the postreview comprehensive tests, in the same manner as they are given for review tests in this book.

HOW CAN I IDENTIFY AREAS IN WHICH I MAY NEED ADDITIONAL REVIEW IN PREPARATION FOR **NCLEX-RN?**

There are two ways in which you can self-evaluate your results after completing the review tests and the postreview comprehensive tests in this book.

1. Determine the percentage of items you answered correctly in each of the review tests by dividing the number of your correct responses by the total number of questions in the review test. For example, if you answered 72 items correctly out of 90 items in a particular review test, divide 72 by 90, the quotient of which is .80, or 80%. Do this for each test. It is suggested that you review further if you answered fewer than about 75% of the items correctly on the review tests. If you answered more than 75% of the items correctly, or better still, about 80% or more of the items, you are probably prepared for taking NCLEX-RN.

2. The section entitled Self-Evaluation: Postreview Comprehensive Tests, beginning on page 797, presents two grids on which you can determine how well you did on the comprehensive tests. The directions for their use and how

to interpret results for self-evaluation are given on page 800.

HOW CAN I BEST USE THIS BOOK TO PREPARE FOR **NCLEX-RN?**

The suggestions given on pages xxiv-xxvi concerning preparation for NCLEX-RN apply when this book is used for review purposes. Here are some additional suggestions:

Do not look at the correct answers before writing the tests in this book. Doing so will defeat part of the reason for your review and self-evaluation.

Avoid searching for clues to correct answers among the items in this book. Concentrate on understanding the information being tested.

Pace yourself when writing the tests in this book. For example, plan that each test in this book should take you no more than 90 minutes to complete. If you are progressing well, slow your pace a bit. But if you are falling behind, try to work faster. This type of practice helps prepare you for writing the timed NCLEX-RN.

Refer to the section entitled Correct Answers and Rationales after you have completed each test. Make a small check mark next to items you failed to answer correctly. When you have completed checking your answers, you can easily determine the items you answered incorrectly and those you answered correctly.

Study the rationale for each item carefully. The rationales often contain more information than the specific knowledge asked for in the item and hence will help you accomplish a more complete review. References to sources in which correct answers can be verified are given following each rationale. Use these references for further checking. Or, use other texts you have and your class notes for verifying

and reviewing the reasons underlying the correct answer and why the distractors are incorrect answers.

Ask questions concerning each item, such as those that follow, for still further review. Do you understand the knowledge upon which the item was based? Do you understand why each wrong option is incorrect? Could you have answered the item correctly if the answer had been the stem and the stem had been stated as an option? Is there additional information about the patient that was not sampled in these tests but which is important, in your opinion, and in need of further review?

Place your emphasis on understanding the knowledge upon which items are based rather than trying to memorize correct answers. It is extremely unlikely that an item in this book will be identical to an item appearing in NCLEX-RN.

Apply basic principles to new or unfamiliar health care situations when you have had little or no experience with the situation you are given. Also, unfamiliar situations will help call your attention to areas in which further study may be indicated.

Be prepared to find that some patients described in this book may have health problems not directly related to their present reason for seeking health care. For example, a patient who has suffered a heart attack may have glaucoma. A patient who requires the surgical removal of a diseased organ may have diabetes mellitus. This book, like NCLEX-RN, is based on a philosophy that patients—not diseases—require care. It is hoped that the manner in which situations are presented will help you focus on a patient in need of care that will help him maintain health, cope with health problems, recover from the effects of illness or trauma, or meet death with comfort and dignity, rather than on special disease entities.

Use the self-evaluation techniques that are described on page 800 after completing the tests in this book.