From RN Magazine

BOARDS REVIEW

NCLEX-RN

FOR

1990

A Nursing Review to Help You Pass—The First Time

Edited by
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and
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Preface

This book had been expressly developed to meet your needs as you study and prepare for the all important NCLEX-RN examination. Taking this exam is always a stressful event in the best of circumstance: it constitutes a major career milestone, and NCLEX success is the key to your future ability to practice as a registered nurse.

Organization, Content and Features

The content and design of this revised edition have been carefully crafted to conform to the new NCLEX-RN test plan, beginning with an introductory unit on how to prepare for NCLEX-RN. This includes:

- · Explanation of the new test plan
- · Information on how the test is constructed
- * Data on scoring and notification of results
- Tips on how to plan your study and prepare successfully The units that follow concentrate on adult nursing, pediatric nursing, maternity and gynecologic nursing, and psychiatric-mental health nursing. Each unit includes:
- The nursing process (utilizing all five steps) integrated with a body systems approach
 - Assessment: reviews both history and physical examination.
 - Analysis: includes appropriate NANDA nursing diagnoses.
 - Planning: discusses patient goals.
- Implementation: provides interventions to achieve patient goals.
- Evaluation: lists outcome criteria.
- Introductory review of anatomy and physiology, and basic theories/principles
- · Review of pertinent disorders for each system including:
 - General characteristics
 - Pathophysiology/psychopathology
 - Medical management
 - Assessment data
- Nursing intervention/patient education
- Sample test questions, structured like those on the new NCLEX-RN, so you can evaluate yourself as you study

- Pertinent journal articles on specific topics relevant to the content and level of the exam
- Updated and expanded information on selected disorders, theories, and therapies

There are two complete practice tests so that you can simulate the actual testing experience. These include:

- · Practice questions similar to the NCLEX-RN
- Correct answers with rationales, and a key to categorize each question according to the new test plan including phases of the nursing process, client needs classification, and levels of cognitive ability.

The appendices provide readily accessible information on drug administration and special diets.

Contributors

The authors and editors are all experienced clinicians and educators who have extensive experience teaching nursing and helping graduates reach NCLEX success. This experience enables them to organize and present what seems to be an overwhelming amount of information very clearly and concisely. They have used an easy-to-digest outline format that emphasizes key content and frequently tested areas, as well as areas that tend to present difficulty for the graduate nurse.

We are all committed, through continuing education, to help you reach your fullest professional potential. Collectively, the authors and editors of this book have many successful years of experience helping nurses to pass their board exams. A major focus for RN magazine is the presentation of clinically relevant content, designed to help you in your nursing practice. The publisher views helping you to pass the NCLEX-RN as a major commitment. We believe that our experience, coupled with support from RN magazine, has enabled us to produce a book that will fully meet your needs.

Alice Stein Nancy Jacobson Editors

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UNIT 1 PREPARING FOR THE NCLEX EXAMINATION

by

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This first unit of the RN BOARD REVIEW FOR NCLEX-RN 1989 will provide you with the important information you need to know about the construction of the National Council Licensure Examination for Registered Nurses (NCLEX-RN, often referred to as "State Boards"), with tips on how to study, and with test-taking techniques you can use to improve your success when writing the examination.

Understanding the NCLEX Examination

THE TEST PLAN

The NCLEX-RN examination questions are based on a test plan comprised of phases of the nursing process, categories of client needs, and levels of cognitive skills.

Phases of the Nursing Process*

The phases of the nursing process to be measured in the examination for licensure are assessment, analysis, planning, implementation, and evaluation. Because all five categories are of equal importance, questions testing these nursing behaviors are distributed equally throughout the text.

Assessment

Establishing a data base.

- Gather objective and subjective information relative to the client.
 - Collect verbal and nonverbal information from the client, significant others, health team members, records, and other pertinent resources.
 - 2. Review standard data sources for information.
 - 3. Recognize symptoms and significant findings.
 - Determine client's ability to assume care of daily health needs.
 - 5. Determine health team member's ability to provide care.
 - 6. Assess environment of client.
 - Identify own or staff reactions to client, significant others, or health team members.
- B. Verify data.
 - Confirm observation or perception by obtaining additional information.
 - Question orders and decisions by other health team members when indicated.
 - Check condition of client personally instead of relying upon equipment.
- C. Communicate information gained in assessment.

Analysis

Identifying actual or potential health care needs/problems based on assessment.

- A. Interpret data.
 - 1. Validate data.
 - 2. Organize related data.
- B. Collect additional data as indicated.
- C. Identify and communicate client's nursing diagnoses.
- **D.** Determine congruency between client's needs/problems and health team member's ability to meet client's needs.

Planning

Setting goals to meet client's needs; designing strategies to achieve these goals.

- A. Determine goals of care.
 - 1. Involve client, significant others, health team members in setting goals.
 - 2. Establish priorities among goals.
 - Anticipate needs/problems according to established priorities.
- B. Develop and modify plan.
 - Involve client, significant others, health team members in designing strategies.
 - Include all information needed to manage client's care (e.g., age, sex, culture, ethnicity, religion).
 - Plan for client's comfort and maintenance of optimal functioning.
 - 4. Select nursing measures for delivery of client care.
- C. Cooperate with other health team members for delivery of client care.
 - Identify health or social resources in the community for client/significant others.
 - 2. Coordinate care for benefit of client.
 - 3. Delegate actions.
- D. Formulate expected outcomes of nursing interventions.

Implementation

Initiating and completing actions necessary to accomplish the defined goals.

- A. Organize and manage client's care.
- B. Perform or assist in performing activities of daily living.
 - 1. Institute measures for client's comfort.
 - 2. Assist client to maintian optimal functioning.
- C. Counsel and teach client, significant others, health team members.

^{*}Dvorak and Yocom, 1988, pp. 216-218. Adapted with permission,

- 1. Assist to recognize and manage stress.
- Facilitate client relationships with significant others/health team members.
- Teach correct principles, procedures, and techniques for maintenance and promotion of health.
- 4. Inform client about his health status.
- Refer client, significant others, health team members to appropriate resources.
- D. Provide care to achieve established goals for client.
 - 1. Use correct techniques in administering client care.
 - Use precautionary and preventive measures in providing care to client.
 - 3. Prepare client for surgery, delivery, or other procedures.
 - 4. Institute action to compensate for adverse responses.
 - Initiate necessary life-saving measures for emergency situations.
- E. Provide care to optimize achievement of client's health care goals.
- Provide an environment conducive to attainment of client's health care goals.
 - Adjust care in accord with client's expressed or implied needs/problems.
 - Stimulate and motivate client to achieve self-care and independence.
 - 4. Encourage client to follow treatment regimen.
 - Adapt approaches to compensate for own and health care team members' reactions to factors influencing therapeutic relationships with client.
- **F.** Supervise, coordinate, and evaluate delivery of client's care provided by nursing staff.
- G. Record and exchange information.
 - Provide complete, accurate reports on assigned client to other team members.
 - Record actual client responses, nursing actions, and other information relevant to implementation of care.

Evaluation

Determining the extent to which goals have been achieved.

- A. Compare actual outcomes with expected outcomes of therapy.
 - Evaluate responses (expected and unexpected) in order to determine degree of success of nursing interventions.
 - 2. Determine need for change in goals, environment, equipment, procedures, or therapy.
- B. Evaluate compliance with prescribed/proscribed therapy.
 - Determine impact of actions on client, significant others, or health team members.
 - 2. Verify that tests or measurements are done correctly.
 - **3.** Ascertain client's, significant others', or health team members' understanding of information given.
- C. Record and describe client's response to therapy/care.
- D. Modify plan as indicated and reorder priorities.

Categories of Client Needs*

The health care needs of the client are grouped under four broad

categories, which, together with the weighting assigned to each, are: 1) safe, effective environment (25%-31%); physiologic integrity (42%-48%); psychosocial integrity (9%-15%); and health promotion/maintenance (12%-18).

Safe, Effective Care Environment

- A. The nurse meets client needs for a safe and effective environment by providing and directing nursing care to promote
 - 1. Coordinated care
 - 2. Quality assurance
 - 3. Goal-oriented care
 - 4. Environmental safety
 - 5. Preparation for treatments and procedures
 - 6. Safe and effective treatments and procedures
- B. In order to meet client needs for a safe, effective environment, the nurse should possess knowledge, skills, and abilities that include but are not limited to
 - 1. Bio/psycho/social principles
 - 2. Principles of teaching and learning
 - 3. Basic principles of management
 - Principles of group dynamics and interpersonal communication
 - 5. Expected outcomes of various treatments
 - 6. General and specific protective measures
 - 7. Environmental and personal safety
 - 8. Client rights
 - 9. Confidentiality
 - 10. Cultural and religious influences on health
 - 11. Continuity of care
 - 12. Spread and control of infectious agents

Physiologic Integrity

- A. The nurse meets the physiologic integrity needs of clients with potential life-threatening or chronically recurring physiologic conditions, or who are at risk for development of complications or untoward effects of treatments or management by providing and directing nursing care to promote
 - 1. Physiologic adaptation
 - 2. Reduction of risk potential
 - 3. Mobility
 - 4. Comfort
 - 5. Provision of basic care
- B. In order to meet client needs for physiologic integrity, the nurse should possess knowledge, skills, and abilities that include but are not limited to
 - 1. Normal body structure and function
 - 2. Pathophysiology
 - 3. Drug administration and pharmacologic actions
 - 4. Routine nursing measures
 - 5. Intrusive procedures
 - 6. Documentation
 - 7. Nutritional therapies
 - Managing emergencies, expected and unexpected response to therapies
 - 9. Body mechanics

^{*}Ibid, pp. 219-220

- 10. Effects of immobility
- 11. Activities of daily living
- 12. Comfort measures
- 13. Uses of special equipment

Psychosocial Integrity

- A. The nurse meets clients needs for psychosocial integrity in stress and crisis-related situations throughout the life cycle by providing and directing nursing care to promote
 - 1. Psychosocial adaptation
 - 2. Coping/adaptation
- B. In order to meet client needs for psychosocial integrity, the nurse should possess knowledge, skills, and abilities that include but are not limited to
 - 1. Communication skills
 - 2. Mental health concepts
 - 3. Behavioral norms
 - 4. Psychodynamics of behavior
 - 5. Psychopathology
 - 6. Treatment modalities
 - 7. Psychopharmacology
 - 8. Documentation
 - 9. Accountability
 - 10. Principles of teaching and learning
 - 11. Appropriate community resources

Health Promotion/Maintenance

- A. The nurse meets client needs for health promotion/maintenance throughout the life cycle by providing and directing nursing care to promote (for clients and their significant others)
 - 1. Continued growth and development
 - 2. Self-care
 - 3. Integrity of support systems
 - 4. Prevention and early treatment of disease
- B. In order to meet client needs for health promotion/maintenance, the nurse should possess knowledge, skills, and abilities that include but are not limited to
 - 1. Communication skills
 - 2. Principles of teaching and learning
 - 3. Documentation
 - 4. Community resources
 - 5. Family systems
 - 6. Concepts of wellness
 - 7. Adaptation to altered health states
 - 8. Reproduction and human sexuality
 - 9. Birthing and parenting
 - 10. Growth and development, including dying and death
 - 11. Pathophysiology
 - 12. Body structure and function
 - 13. Principles of immunity

Levels of Cognitive Ability

The test also evaluates four of the cognitive abilities defined by Bloom et al. (1956): recall, comprehension, application, and analysis. While all four of these levels are evaluated, emphasis is

placed on the higher functions of application and analysis. The four are defined as

- A. Knowledge base: involves the ability to recall information.
- B. Comprehension: involves the ability to understand what is being communicated and make use of the information without necessarily relating it to other information.
- C. Application: requires the ability to remember and apply principles, procedures, and theories.
- D. Analysis: requires the ability to break down a communication into the hierarchy of its parts and recognize the relationship among the ideas.

HOW THE TEST IS CONSTRUCTED

- A. The National Council of State Boards of Nursing Inc. is the central organization for the independent member Boards of Nursing which includes the 50 states, the District of Columbia, Guam, and the Virgin Islands. The member boards are divided into four regional areas, which supervise the selection of test item writers (representing educators and clinicians), whose names are suggested by the individual state boards of nursing. This provides for regional representation in the testing of nursing practice.
- **B.** The National Council contracts with a professional testing service to supervise writing and validation of test items by the item writers. This professional service works closely with the Examination Committee of the National Council in the test development process. The National Council and the state boards are responsible for the administration and security of the test.
- C. The test is administered in February and July over a two-day period. It consists of four one-and-a-half-hour sections