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NCLEX-RN®

STUDENT WORKBOOK

LEADERSHIP AND MANAGEMENT

NCLEX® EXAM TIPS

- Understand the Scope of Leadership: Familiarize yourself with the key concepts of leadership, such as delegation, prioritization, conflict resolution, and effective communication. Review the roles and responsibilities of a nurse leader, including advocating for patients, collaborating with interdisciplinary teams, and promoting a safe and ethical practice environment.
- Know Leadership Styles: Learn about different leadership styles, such as autocratic, democratic, transformational, and laissez-faire. Understand the characteristics, advantages, and limitations of each style. Be prepared to analyze scenarios and identify the most appropriate leadership style for a given situation.
- Review Management Principles: Leadership and management often go hand in hand. Familiarize yourself with fundamental management principles, such as planning, organizing, directing, and controlling. Understand the role of a nurse manager in resource allocation, quality improvement, and risk management.
- Master Decision-Making and Problem-Solving: Effective leaders are skilled in making informed decisions and solving problems. Practice critical thinking skills by analyzing case studies or scenarios. Develop a systematic approach to decision-making, considering factors such as patient safety, ethical considerations, and available resources.
- Study Legal and Ethical Issues: Leadership involves navigating complex legal and ethical dilemmas. Review the legal and ethical principles that guide nursing practice, including informed consent, confidentiality, and patient rights. Understand your responsibility as a nurse leader in upholding ethical standards and promoting ethical decision-making among the team.
- Brush Up on Communication Skills: Effective communication is essential for leadership. Review therapeutic communication techniques, active listening, and assertiveness skills. Understand how to provide constructive feedback, resolve conflicts, and promote a positive work environment.
- Practice Time Management: Leaders must be skilled in prioritizing tasks and managing time effectively. Review strategies for setting priorities, delegating tasks, and managing interruptions. Understand the importance of maintaining an organized workflow to ensure efficient patient care delivery.
- Utilize NCLEX Practice Questions: Make use of NCLEX-style practice questions that focus on leadership and management. These questions will help you familiarize yourself with the format and content of the exam. Analyze the rationales for both correct and incorrect answers to deepen your understanding of the topics.
- Develop a Study Plan: Create a structured study plan that allocates dedicated time for leadership review. Break down the topics into manageable sections and set specific goals for each study session. Consistency and regular review will help you build a solid foundation of knowledge in this area.

NCLEX® MNEMONICS

SMART Goals: When setting goals as a leader, remember the acronym SMART:

- Specific: Goals should be clear and well-defined.
- Measurable: Goals should have measurable criteria to track progress.
- Achievable: Goals should be realistic and attainable.
- Relevant: Goals should be relevant to the situation or desired outcomes.
- Time-bound: Goals should have a specific timeframe for completion.

AIDET Communication Technique: AIDET is a mnemonic to remember key elements of effective communication:

- Acknowledge: Greet the patient and introduce yourself.
- Introduce: Explain your role and the purpose of the interaction.
- Duration: Inform the patient about the estimated time for the procedure or intervention.
- Explanation: Provide a brief explanation of what will happen during the interaction.
- Thank You: Express gratitude to the patient for their cooperation.

5 Rights of Delegation: Remember the five rights of delegation when assigning tasks to others:

- Right Task: Ensure that the task is appropriate for delegation.
- Right Circumstance: Assess if the situation is suitable for delegation.
- Right Person: Choose the appropriate person with the necessary skills and competence.
- Right Direction/Communication: Provide clear instructions and expectations.
- Right Supervision/Evaluation: Provide appropriate monitoring and feedback.

PACE Prioritization Framework: Use the PACE framework to prioritize tasks:

- Prioritize: Determine the urgency and importance of each task.
- Assess: Evaluate the situation, gather information, and assess patient needs.
- Communicate: Share information with the healthcare team and collaborate on priorities.
- Execute: Take action based on the established priorities.

4 Cs of Teamwork: Remember the 4 Cs for effective teamwork:

- Cooperation: Collaborate and work together towards a common goal.
- Communication: Maintain open and clear communication channels.
- Coordination: Coordinate tasks and resources efficiently.
- Collaboration: Foster a culture of collaboration and mutual respect.

Q1 The nurse manager has involved all staff members in the planning and development of goals and decision making. Which **leadership style** has the unit manager exercised?

1. Autocratic
2. Democratic
3. Situational
4. Laissez-faire

Q2 The registered nurse (RN) is planning her client assignments for the day. The RN has a licensed practical nurse and an assistive personnel (AP) on the team. Which task would the **RN delegate** to the AP?

1. Empty a client's urinary catheter bag.
2. Instruct a client on their new diabetic diet.
3. Teach a client how to check their blood glucose.
4. Evaluate a newly admitted client's home medications.

NOTES:

Q3 The nurse is delegating the morning hygienic care to the assistive personnel (AP). In reviewing the assigned tasks, the nurse would instruct the AP to use an **electric razor for which client?**

1. The client with severe pain related to osteoporosis
2. The client with hypokalemia related to diuretic therapy
3. The client with thrombocytopenia related to chemotherapy
4. The client with an elevated white blood cell count related to infection

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Q4 The nurse is planning the client assignments for the day. **Which clients can be safely assigned to the assistive personnel (AP)?** Select all that apply.

1. The client receiving a heparin infusion
2. The client receiving a blood transfusion
3. The client receiving continuous oxygen at 2 L/min
4. The client recovering from Guillain-Barré syndrome
5. The client who just returned from surgery for a hip repair
6. The client on isolation for methicillin-resistant Staphylococcus aureus

NOTES:

Q5 A client is scheduled for surgery, and the surgeon has explained the procedure and is about to obtain informed consent. Which statement by the client would indicate to the nurse that the client **needs further teaching** before giving informed consent to the procedure?

1. "If I don't have this surgery, then the tumor will grow."
2. "I know my surgeon explained it, but I still don't know why surgery is needed."
3. "You said my surgeon will remove the tumor but will not be removing the entire breast."
4. "I'll have some pain after the surgery, but it should get better with that tumor gone."

Q6 The nurse is caring for a client who is scheduled for electroconvulsive therapy. The nurse notes that an informed consent has not been obtained for the procedure. On review of the record, the nurse notes that the admission was an involuntary hospitalization. **Which is important information for the nurse to remember?**

1. That an informed consent does not need to be obtained
2. That an informed consent needs to be obtained from the family
3. That an informed consent needs to be obtained from the client
4. That the primary health care provider will provide the informed consent

NOTES:

Q7 The nurse is caring for a client who has just returned from having a cystoscopy with biopsy. The nurse **would intervene** if an assistive personnel (AP) is observed taking which action?

1. Obtaining the client's vital signs
2. Assisting the client with repositioning in bed
3. Telling the client that warm sitz baths may be prescribed
4. Insisting that the client ambulate immediately after the procedure

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Q8 A nursing instructor asks the nursing student to describe the definition of a critical path. Which statement, if made by the student, indicates a **need for further teaching** regarding critical paths?

1. "They are developed based on appropriate standards of care."
2. "They are nursing care plans and use the steps of the nursing process."
3. "They are developed through the collaborative efforts of members of the health care team."
4. "They provide an effective way to monitor care and to reduce or control the length of hospital stay for the client."

NOTES:

Q9 A case manager is reviewing the records of the clients in the nursing unit. Which occurrence, if noted in a client's record, would the nurse **identify as a positive variance?**

1. A client is performing colostomy irrigations.
2. The client with a leg ulcer is demonstrating signs of wound healing.
3. A postoperative client is discharged home 1 day earlier than expected.
4. The client with diabetes mellitus is administering insulin injections appropriately.

Q10 A nurse is caring for a pediatric client diagnosed with intussusception who has undergone surgery. Which task(s) can the nurse **delegate to the assistive personnel (AP)** in the care of the child? Select all that apply.

1. Dressing changes
2. Vital signs every shift
3. Auscultating bowel sounds
4. Assessing whether sutures are intact
5. Providing assistance with bathing
6. Administering IV fluids per provider's order

NOTES:

Q11 The nurse is the first responder after a tornado has destroyed many homes in the community. Which victim would the nurse **attend to first?**

1. A pregnant client who exclaims, "My baby is not moving."
2. A child who is complaining, "My leg is bleeding so bad, I am afraid it is going to fall off!"
3. A young child who is screaming, "I want my mommy!" next to an adult family member.
4. An older victim who is sitting next to the spouse, sobbing, "My spouse is dead. My spouse is dead."

Q12 The nurse in the hospital emergency department is notified by emergency medical services that several victims who survived a plane crash will be transported to the hospital. Victims are suffering from cold exposure because the plane plummeted and was submerged in a local river. What is the **initial** action of the nurse?

1. Call the nursing supervisor to activate the agency disaster plan.
2. Supply the triage rooms with bottles of sterile water and normal saline.
3. Call the intensive care unit to request that nurses be sent to the emergency department.
4. Call the laundry department and ask the department to send as many warm blankets as possible to the emergency department.

NOTES:

Q13 The nurse is reviewing the manual of disaster preparedness and response for the annual hospital disaster drill. The nurse reads that which are functions of the American Red Cross (ARC) as **opposed** to the Federal Emergency Management Agency (FEMA) in the United States? **Select all that apply.**

1. Provide monetary relief.
2. Provide crisis counseling.
3. Identify and train personnel.
4. Issue presidential declarations.
5. Deploy National Guard troops.
6. Handle inquiries from families.

Q14 An emergency department nurse is preparing to receive four clients as a result of a motor vehicle crash. Which victim would the nurse **attend to first?**

1. Child with a bleeding laceration
2. A client with a fractured wrist
3. A client with first-degree burns on the hands and arms
4. A client with chest pain, shortness of breath, and diaphoresis

NOTES:

Q15 The nurse is assigned to care for four clients. Which client would the nurse **assess first?**

1. A client who has a tympanic temperature of 99.8° F
2. A client who has a regular radial pulse of 96 beats/min
3. A client who has a supine resting blood pressure of 148/90 mm Hg
4. A client who has a peripheral (index finger) oxygen saturation percentage of 90%

Q16 The nurse has received the client assignment for the day. Which client would the nurse check **first**?

1. A client experiencing severe pain
2. A client who is hearing voices
3. A client who is in four-point leather restraints
4. A client who has just returned from surgery

NOTES:

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CLINICAL CASE

ITEM 1

HEALTH HISTORY

The nurse admits a 69-year-old client from the PACU following right total knee arthroplasty. The client has a patient-controlled analgesia (PCA) pump programmed and infusing for pain management. The client has been taught how to use the pump, and the nurse verifies the client's understanding using the teach-back method. The client has never received opioids in the past. The nurse reviews the physician's orders and performs frequent assessments based on unit protocol, every 15 minutes for 1 hour, every 30 minutes for 2 hours, then every hour for 4 hours.

VITAL SIGNS

ITEM 1

Vital Signs	1230 (Arrival to Unit)	1245	1300	1315	1345	1415
T (oral)	97.2° F (36.2° C)	96.8° F (36° C)	97.2° F (36.2° C)	97.2° F (36.2° C)	97.0° F (36.1° C)	97.2° F (36.2° C)
HR	84 BPM	82 BPM	84 BPM	80 BPM	78 BPM	72 BPM
RR	14 bpm	14 bpm	12 bpm	12 bpm	10 bpm	8 bpm
BP	132/72 mmHg	128/68 mmHg	128/66 mmHg	124/64 mmHg	128/70 mmHg	124/66 mmHg
SpO2	95% 3L NC	96% 3L NC	95% 3L NC	94% 3L NC	93% 3L NC	92% 3L NC
PCA	Total demands: 1 Total demand dose received: 0.3 mg	Total demands: 2 Total demand dose received: 0.4 mg	Total demands: 3 Total demand dose received: 0.7 mg	Total demands: 4 Total demand dose received: 0.8 mg	Total demands: 6 Total demand dose received: 1 mg	Total demands: 8 Total demand dose received: 1.2 mg

ITEM 1

For each body system below, specify the potential nursing intervention that would be appropriate for the care of the client.

Body System	Potential Nursing Intervention
Cardiovascular	1. Request a chest x-ray. 2. Perform an electrocardiogram. 3. Monitor for signs of bleeding.
Respiratory	1. Request a D-dimer level. 2. Request an arterial blood gas level. 3. Lock the PCA to prevent further dosing.
Gastrointestinal	1. Administer a stool softener. 2. Request an abdominal x-ray. 3. Keep the client on NPO status.
Neurological Musculoskeletal	1. Discontinue the surgical drain. 2. Perform range-of-motion exercises. 3. Assess pulses using a Doppler device.
Pain	1. Lock the PCA to prevent further dosing. 2. Request an increase in the demand dose from 0.1mg to 0.2mg. 3. Request a decrease in the lock-out interval from 15 minutes to 10 minutes.

MY NOTES

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"Every day it's a new opportunity!"

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