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STUDENT WORKBOOK

CAT

"NAVIGATING CAT: NCLEX PATHWAY STRATEGIES"

W

ITEM 1 OF 6

History and Physical

The urology clinic nurse cares for a 51-year-old male client.

Body System	Findings
Neurological	Pupils equal, round, and reactive; alert and oriented
Respiratory	Lungs clear to auscultation; denies cough; 15-pack year history of cigarette smoking; quit 5 years ago; history of chronic obstructive pulmonary disease (COPD)
Gastrointestinal	Abdomen obese; normoactive bowel sounds present in all quadrants; pea-sized asymmetric nodule palpated on digital rectal exam; last bowel movement today
Genitourinary	Reports urinary frequency and urgency; denies burning; urine clear, pink-tinged
Extremities	Pulses 2+ in all extremities; bilateral hyperpigmentation of lower legs and ankles; 2+ pitting edema of ankles; history chronic venous insufficiency
Psychosocial	Married; 3 children; has been working with pesticides as a corn farmer for 25 years; reports feeling “nervous” around healthcare providers

The nurse reviews the History and Physical for a 51-year old client in the urology clinic.

ITEM 1 OF 6

Click to highlight the 3 findings that most concern the nurse.

Body System	Findings
Neurological	Pupils equal, round, and reactive; alert and oriented
Respiratory	Lungs clear to auscultation; denies cough; 15-pack year history of cigarette smoking; quit 5 years ago; history of chronic obstructive pulmonary disease (COPD)
Gastrointestinal	Abdomen obese; normoactive bowel sounds present in all quadrants; pea-sized asymmetric nodule palpated on digital rectal exam; last bowel movement today
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Psychosocial	Married; 3 children; has been working with pesticides as a corn farmer for 25 years; reports feeling “nervous” around healthcare providers

ITEM 2 OF 6

Laboratory

Laboratory Test and Reference Range	Day 1: 1030
Urinalysis	
White Blood Cells 0-5/hpf	2/hpf
Red Blood Cells 0-4/hpf	10/hpf

Laboratory Test and Reference Range	Day 1: 1030
Blood urea nitrogen 10–20 mg/dL (3.6–7.1 mmol/L)	15 mg/dL (5.36 mmol/L)
Creatinine Male: 0.6–1.2 mg/dL (Male: 53–106 µmol/L)	1.1 mg/dL (97.2 µmol/L)
Prostate-specific antigen <4.0 ng/mL (<4.0 mcg/L)	12 ng/mL (12 mcg/L)

Laboratory Test and Reference Range	Day 1: 1030
Serum Tests	
White Blood Cells 5,000-10,000/mm3 (5.0-10.0 x 109/L)	9,900/mm3 (9.9 x 109/L)
Hemoglobin Male: 14-18 g/dL (Male: 140-180 g/L)	14.4 g/dL (144 g/L)

The nurse reviews the Laboratory Results 1 and 2 from Day 1 at 1030.

ITEM 2 OF 6

For each assessment finding below, click to specify if the finding is consistent with the disease process of prostate cancer, urinary tract infection, or benign prostatic hyperplasia (BPH). Each finding may support more than 1 disease process.

Client Findings	Prostate Cancer	Urinary Tract Infection	Benign Prostatic Hyperplasia
Hematuria			
Urinary frequency and urgency			
Elevated prostate-specific antigen (PSA) level			
Nodule palpated on digital rectal exam (DRE)			

ITEM 3 OF 6

Nurses' Notes

Radiation Oncology Clinic

Day 31

Radiation Session 4 of 40

1100: Client presents to radiation/oncology clinic for stage II prostate cancer, diagnosed last month. Currently day 4 of external beam radiation therapy (EBRT). Receiving 76 Gy in 40 fractions (40 daily sessions). Client positioned prone on table. Tolerated therapy without immediate adverse effects. Total treatment time was 20 minutes. Continues to take daily bicalutamide. Discharged to home.

ITEM 3 OF 6

The emergency department nurse reviews the initial lab results from 1750.

Drag the 3 expected complications from radiation therapy that the client is at **risk** for developing to the box on the right.

Potential Complications	Expected Complications
1. fatigue 2. cystitis 3. infection 4. sexual dysfunction 5. nausea and vomiting	

NOTES:

ITEM 4 OF 6

Nurses' Notes

Radiation Oncology Clinic

Day 71

Radiation Session 32 of 40

1115:

Client presents to radiation oncology clinic accompanied by wife. Reports dull, constant lower abdominal tenderness and bloody urine with some small clots that started last night. Treatment held, and client referred to emergency department

ITEM 4 OF 6

Which of the following healthcare orders should the nurse **anticipate? Select all that apply.**

1. Administer enoxaparin.
2. Perform pelvic floor exercises.
3. Obtain a complete blood count.
4. Prepare client for CT of abdomen and pelvis.
5. Administer a belladonna and opium suppository.
6. Initiate continuous bladder irrigation via three-way urinary catheter.

NOTES:

ITEM 5 OF 6

Nurses' Notes

Emergency Department

1200:
Client presents from radiation/oncology clinic with probable radiation cystitis. Seen by urologist. Three-way indwelling urinary catheter inserted and continuous bladder irrigation (CBI) initiated. Draining pink-tinged urine with some clots. Awaiting admission to inpatient unit.

1245:
Called to client's room with reports of severe lower abdominal pain. No new drainage noted into indwelling catheter drainage bag.

ITEM 5 OF 6

Laboratory Results

Laboratory Test and Reference Range	Day 1: 1030	Day 71: 1230
Serum Tests		
White Blood Cells 5,000-10,000/mm3 (5.0-10.0 x 109/L)	9,900/mm3 (9.9 x 109/L)	6,200/mm3 (6.2 x 109/L)
Hemoglobin Male: 14-18 g/dL (Male: 140-180 g/L)	14.4 g/dL (144 g/L)	10.9 g/dL (109 g/L)

NOTES:

ITEM 5 OF 6

Laboratory Results

Laboratory Test and Reference Range	Day 1: 1030	Day 71: 1230
Serum Tests		
Blood urea nitrogen 10–20 mg/dL (3.6–7.1 mmol/L)	15 mg/dL (5.36 mmol/L)	28 mg/dL (10 mmol/L)
Creatinine Male: 0.6–1.2 mg/dL (Male: 53–106 µmol/L)	1.1 mg/dL (97.2 µmol/L)	1.7 mg/dL (150.3 µmol/L)
Prostate specific antigen <4.0 ng/mL (<4.0 mcg/L)	12 ng/mL (12 mcg/L)	-

Laboratory Test and Reference Range	Day 1: 1030	Day 71: 1230
Urinalysis		
White Blood Cells 0-5/hpf	2/hpf	0/hpf
Red Blood Cells 0-4/hpf	10/hpf	50/hpf

ITEM 5 OF 6

The nurse reviews the Nurses' Notes from Day 71 at 1200 and 1245 and Laboratory Results 1 and 2 from Day 71 at 1230.

Select the 2 actions the nurse should take **immediately.**

1. Call urology.
2. Perform a bladder scan.
3. Administer pain medication.
4. Clamp the flow of irrigation solution.
5. Assess the indwelling catheter tubing for kinks or clots.

Laboratory Results

Laboratory Test and Reference Range	Day 1: 1030	Day 71: 1230	Day 74: 0600
Serum Tests			
White Blood Cells 5,000-10,000/mm3 (5.0-10.0 x 109/L)	9,900/mm3 (9.9 x 109/L)	6,200/mm3 (6.2 x 109/L)	6,500/mm3 (6.5 x 109/L)
Hemoglobin Male: 14-18 g/dL (Male: 140-180 g/L)	14.4 g/dL (144 g/L)	10.9 g/dL (109 g/L)	12.5 g/dL (122 g/L)

Laboratory Test and Reference Range	Day 1: 1030	Day 71: 1230	Day 74: 0600
Serum Test			
Blood urea nitrogen 10–20 mg/dL (3.6–7.1 mmol/L)	15 mg/dL (5.36 mmol/L)	28 mg/dL (10 mmol/L)	18 mg/dL (6.4 mmol/L)
Creatinine Male: 0.6–1.2 mg/dL (Male: 53–106 µmol/L)	1.1 mg/dL (97.2 µmol/L)	1.7 mg/dL (150.3 µmol/L)	1.1mg/dL (97.2 µmol/L)

Laboratory Test and Reference Range	Day 1: 1030	Day 71: 1230	Day 74: 0600
Urinalysis			
White Blood Cells 0-5/hpf	2/hpf	0/hpf	1/hpf
Red Blood Cells 0-4/hpf	10/hpf	50/hpf	10/hpf

Nurses' Notes

Medical-Surgical Unit

Day 74

0600: Client awake, alert and oriented this morning. Having some bladder spasms. Urine is amber with no obvious clots. CBI discontinued. Received one unit packed red blood cells. Client to be discharged home with indwelling urinary catheter.

The nurse reviews the Nurses' Notes and Laboratory Results 1 and 2 from Day 74 at 0600.

For each client finding, click to specify whether the finding indicates that the client is progressing as expected or not progressing as expected.

ITEM 6 OF 6

Client Finding	Progressing as Expected (a)	Not Progressing as Expected. (B)
1. Hemoglobin value		
2. Urine assessment		
3. Bladder assessment		
4. BUN and creatinine values		
5. Discharge to home with indwelling urinary catheter		

NOTES:

ITEM 1 OF 6

Health History

The nurse in the emergency department is caring for an 8-year-old client.

An 8-year-old child and his mother arrive at the emergency department. The child was playing soccer at the park with friends. He later began to experience wheezing and shortness of breath. He also reports upper chest pruritus and rhinorrhea. His mother is concerned that the child tripped and fell during the game. The client stated that he used his inhaler twice before arriving at the emergency department. The client has a history of asthma and myopia. He has allergies to bee venom and pollen.

ITEM 1 OF 6

Assessment

Body System	**1500**
Neurologic	Oriented x 3; pupils equal and reactive to light
Head, eyes, ears, nose, throat (HEENT)	Symmetric head and facial features, no visible signs of injury or redness; clear nasal discharge Eye findings: scleral redness and edema present bilaterally
Respiratory	Audible wheezing, rhonchi throughout; subcostal retractions
Cardiovascular	S1 and S2 auscultated
Gastrointestinal	Bowel sounds normoactive x 4 quadrants
Integumentary	Skin warm to the touch, diaphoresis noted at the forehead and underarms; skin intact; erythema with scattered scratch marks present at the upper chest; no welts or hives present; bilateral ecchymosis at the knees; legs caked with dirt
Extremities	Capillary refill <3 seconds; 2+ pulses in all 4 extremities

ITEM 1 OF 6

Vital Signs

1500	
T	98.1 F (36.7 C)
P	115

RR	32
BP	99/60
Pulse oximetry reading	90% on room air

ITEM 1 OF 6

Select the top **4 findings** that require **immediate** follow up.

1. Pruritus
2. Wheezing
3. Pulse oximetry
4. Blood pressure
5. History of myopia
6. Shortness of breath
7. Subcostal retractions
8. Clear nasal discharge
9. Ecchymosis at the knees
10. Eye assessment findings

NOTES:

ITEM 2 OF 6

The nurse in the emergency department is caring for an 8-year-old client. Complete the following sentence by choosing from the lists of options.

The nurse recognizes that wheezing in this client is most likely due to [ ]

Select...
1. anaphylaxis
2. airflow obstruction
3. an upper respiratory infection

as evidenced by the client's [ ]

Select...
1. rhinorrhea
2. history of asthma
3. bee venom and pollen allergies.

NOTES:

ITEM 3 OF 6

The nurse in the emergency department is caring for an 8-year-old client. Complete the following sentence by choosing from the list of options.

The client is at highest risk for developing [ ]

Select...
1. pneumothorax
2. respiratory failure
3. an upper respiratory infection.

ITEM 4 OF 6

The nurse in the emergency department is caring for an 8-year-old client.

Drag potential steps the nurse should plan to take to the box on the right. Choose only the steps that are appropriate at this time.

Potential Complications	Anticipated Interventions
1. Obtain IV access. 2. Administer antibiotics. 3. Prepare for a chest x-ray. 4. Obtain an arterial blood gas. 5. Obtain a complete blood count. 6. Administer supplemental oxygen. 7. Administer a short-acting beta-2 agonist. 8. Have the client use an incentive spirometer.	

NOTES:

ITEM 5 OF 6

The nurse should **first** [ ]

Select...
1. administer albuterol
2. perform chest physiotherapy
3. prepare client for a chest x-ray
4. administer IV methylprednisolone
5. educate the client about peak flow meter use

and **then** [ ]

Select...
1. administer albuterol
2. perform chest physiotherapy
3. prepare client for a chest x-ray
4. administer IV methylprednisolone
5. educate the client about peak flow meter use

The nurse in the emergency department is caring for an 8-year-old client. Complete the following sentence by choosing from the lists of options.

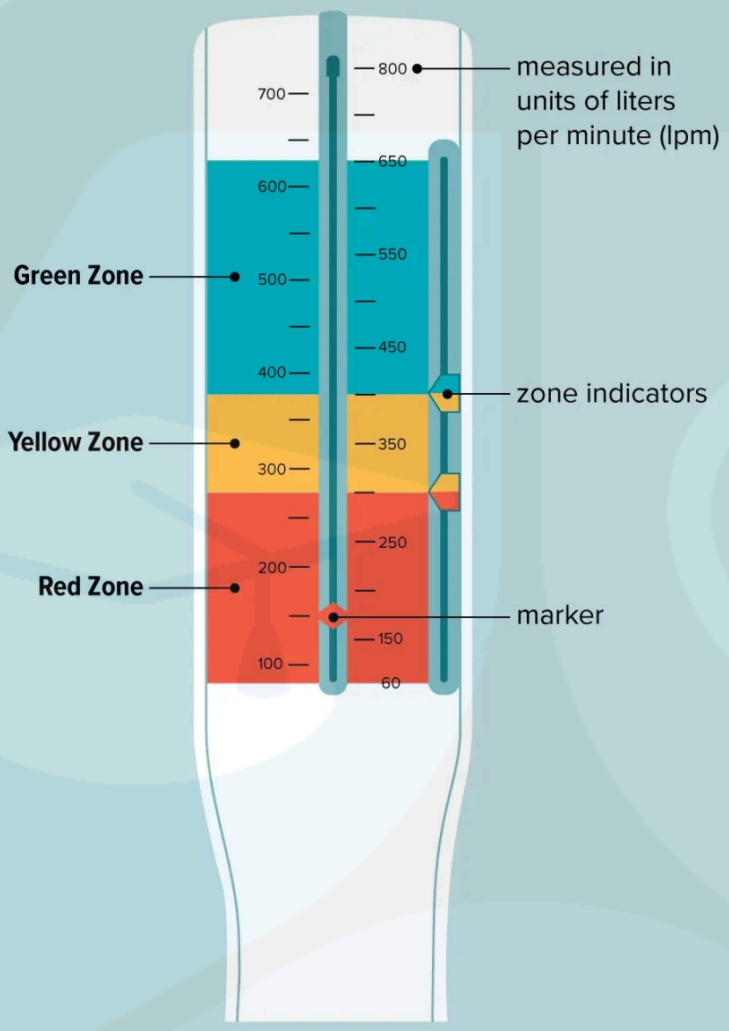
ITEM 6 OF 6

Vital Signs

	1500	1830
T	98.1 F (36.7 C)	97.9 F (36.6 C)
P	115	90
RR	32	18
BP	99/60	98/58
Pulse oximetry reading	90% on room air	98% on room air

NOTES:

PEAK FLOW METER





My Asthma Action Plan

Age ≥5 years

Patient Name: _____

Medical Record #: _____

Physician's Name: _____ DOB: _____

Physician's Phone #: _____ Completed by: _____ Date: _____

Long-Term-Control Medicines	How Much To Take	How Often	Other Instructions
		_____ times per day EVERY DAY!	
		_____ times per day EVERY DAY!	
		_____ times per day EVERY DAY!	
		_____ times per day EVERY DAY!	
Quick-Relief Medicines	**How Much To Take**	**How Often**	**Other Instructions**
		Take ONLY as needed	NOTE: If this medicine is needed frequently, call physician to consider increasing long-term-control medications.

Special instructions when I feel good, not good, and awful.

GREEN ZONE

I feel *good*.



{My peak flow is in the GREEN zone.}

PREVENT asthma symptoms everyday:

- ☐ Take my long-term-control medicines (above) every day.
- ☐ Before exercise, take _____ puffs of _____
- ☐ Avoid things that make my asthma worse like: _____

My Personal Best Peak Flow

80% Personal Best

50% Personal Best

Unable

Peak Flow Meter

YELLOW ZONE

I do *not* feel *good*.

{My peak flow is in the YELLOW zone.}

My symptoms may include one or more of the following:

- Wheeze
- Tight chest
- Cough
- Shortness of breath
- Waking up at night with asthma symptoms
- Decreased ability to do usual activities
- _____



CAUTION. I should continue taking my long-term-control asthma medicines every day AND:

- ☐ Take _____

If I still do not feel good, or my peak flow is not back in the *Green Zone* within 1 hour, then I should:

- ☐ Increase _____
- ☐ Add _____
- ☐ Call _____

RED ZONE

I feel *awful*.



{My peak flow is in the RED zone.}

Warning signs may include one or more of the following:

- It's getting harder and harder to breathe
- Unable to sleep or do usual activities because of trouble breathing

MEDICAL ALERT! Get help!

- ☐ Take _____ until I get help immediately.
- ☐ Take _____
- ☐ Call _____

Danger! Get help immediately! Call 9-1-1 if you have trouble walking or talking due to shortness of breath or lips or fingernails are gray or blue.

Medications

Home Medications:

Fluticasone 100 mcg/salmeterol 50 mcg metered dose inhaler twice daily

Albuterol 90 mcg/dose metered dose inhaler

Prior to exercise: 2 inhalations 15 A before exercise

As needed for wheezing: 4 inhalations every 20 minutes up to 3 doses

Dexamethasone 16 mg PO, once daily for 2 days

The client is now stable with no more respiratory symptoms and is awaiting discharge in the emergency department. The nurse has reviewed the Medications and Vital Signs for 1830 and has provided discharge teaching about home asthma management to the client and his mother.

For each of the statements made by the mother, click to specify whether the statement indicates an understanding or no understanding of the discharge teaching provided.

ITEM 6 OF 6

Statement	Understanding	No Understanding
1. "I should average his 3 peak flow meter attempts to get his personal best score."		
2. "When he has an asthma attack, he should first use his fluticasone/salmeterol inhaler."		
3. "I can buy fresh flowers for the house as long as he is consistently taking his medications."		
4. "He should place his lips over the peak flow meter, breathe out quickly, and read the number."		
5. "If his asthma does not improve after using his albuterol inhaler, we should get medical help."		
6. "When the peak flow meter is in the green zone and he does not have symptoms, he does not need to make any changes to his routine."		

NOTES:

Nurses' Notes

Emergency Department

0115: A 25-year-old female is brought to the emergency department at 0100 by her roommate who reports she is concerned about the client's recent behavior. The roommate reports that the client has not gone to work and has hardly slept for the past week. The client is observed to be talking excitedly about selling her belongings and moving to Paris, exclaiming that she is a true artist and her work is famous.

The roommate reports this behavior is extremely out of character for the client. In fact, she recalls a period last month when the client appeared depressed and hardly left her room for several days.

Physical assessment of the client reveals no obvious physical injuries. A rash is noted on the client's abdomen, and she mentions experiencing diarrhea for the past 2 days. Pupils are equal, round, and reactive to light. Client denies experiencing any pain.

Client is not currently taking any medications.

Vital signs: 98.6 F (37.0 C), P 123, RR 26, BP 145/95, pulse oximetry reading 98% on room air.

ITEM 1 OF 6

Mental Status Exam

Appearance	25-year-old female who appears her stated age; she is wearing heavy makeup, bright lipstick, bright clothing
Behavior	Client presents as euphoric and excited. States "I feel amazing!" She is smiling, very talkative, and has difficulty sitting still
Speech	Speech is pressured with rapid rate and elevated volume
Thought Process	Demonstrates difficulty focusing on one topic. She is oriented to person, place, and time; though, she does not appear to have insight into her current situation
Thought Content	Client denies any suicidal or homicidal ideation. She jumps frequently from one topic of conversation to the next though mostly centered on her being a famous artist. Client makes statements about quitting her job, selling all her belongings, and moving to Paris to pursue her art. Reports she recently charged $8,000 on her credit card for a plane ticket and new art supplies. Per report from the client's roommate, this spending far exceeds her means

NOTES:

ITEM 1 OF 6

Which 3 client findings should the nurse prioritize for follow-up?

1. Diarrhea
2. Skin rash
3. Pressured speech
4. Blood pressure of 145/95
5. Client has not slept in 4 days
6. Client believes she is a famous artist

ITEM 2 OF 6

Which **3 conditions** could best explain the client's current presentation?

1. Hypoglycemia
2. Bipolar disorder
3. Hyperthyroidism
4. Amphetamine abuse
5. Urinary tract infection

NOTES:

ITEM 3 OF 6

Laboratory Results

0130

Thyroid stimulating hormone (TSH) **0.45-4.50 uIU/mL** **(0.45-4.50 mU/L)**	5.10 uIU/mL (5.10 mU/L)
T4 (Total) **Male: 4-12 mcg/dL** **(59-135 nmol/L)** **Female: 5-12 mcg/dL** **(71-142 nmol/L)**	(Pending)
White blood cell (WBC) count **5,000 - 10,000/mm3** **(5-10x109/L)**	7,000/mm3 (7x109/L)
Glucose **74-106 mg/dL** **(4.1-5.9 mmol/L)**	80 mg/dL (4.4 mmol/L)

Toxicology	
Alcohol Not detected	Not detected
Amphetamines Not detected	Not detected
Opiates Not detected	Not detected

ITEM 3 OF 6

The nurse reviews the client's Laboratory Results 1 and Laboratory Results 2 from 0130.

The nurse recognizes that the client is most likely experiencing [ ] related to [ ]

Condition	Diagnosis
1. mania	1. schizophrenia
2. delirium	2. bipolar disorder
3. psychosis	3. hyperthyroidism

NOTES:

ITEM 4 OF 6

The nurse cares for a 25-year-old female in the emergency department.

Select whether the following interventions would be indicated or not indicated for this client.

Intervention	Indicated	Not Indicated
1. Speak quickly to match the client's pace		
2. Set firm behavioral boundaries with the client		
3. Place the client in a private room to allow her to rest		
4. Provide simple instructions when directing the client		
5. Ask open-ended questions when assessing the client		
6. Provide stimulating audio/visual material to engage the client		

ITEM 5 OF 6

The healthcare provider in the emergency department decides the client should be admitted to the inpatient psychiatric unit for further assessment and observation. The client arrives at the unit at 0700, and the nurse receives admission orders.

Which 2 interventions should the admitting nurse complete **first**?

1. Administer olanzapine 5 mg PO
2. Provide the client education on olanzapine
3. Provide the client with water and a handheld snack
4. Admit to the locked inpatient unit for direct supervision
5. Provide the client with a quiet space where she can rest
6. Coordinate care with client's support system regarding discharge plan

NOTES:

ITEM 6 OF 6

The nurse reviews the updated Nurses' Notes from 0600 and 1100.

For each assessment finding, click to specify if the finding indicates that the client's condition has improved, has not changed, or has declined.

Finding	Improved	No Change	Declined
1. BP 115/72; P 82			
2. Client reports loose stool			
3. Client is drawing pictures for staff to showcase her talent			
4. Client is socializing with peers and discussing travel plans			
5. Client slams chair on the floor when told she is not allowed to leave			

NOTES:

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