# **HESI Fundamentals Exam**

# (CHECK THE LAST PAGE FOR MULTIPLE VERSIONS OF THE EXAM AND OTHER HESI EXAMS)

- 1. a nurse in a clinical is caring for a middle age adult who states, "the doctor says that since I am at an average risk for colon cancer, I should have a routine screening, what does that involve?" which of the following responses should the nurse make?
  - A. "I'll get a blood sample from you and send it for a screening test."
  - B. "beginning at age 60, you should have a colonoscopy."
  - C. "you should have a decal occult blood test every year."
  - D. "the recommendation is to have a sigmoidoscopy every 10 years."

"You should have a fecal occult blood test every year."

Colorectal cancer screening for clients at average risk begins at age 50. One option for screening is a fecal occult blood test annually.

- a nurse is caring for a client who is having difficulty breathing, the client is laying in bed with a nasal cannula delivering oxygen, which of the following intervention should the nurse take first?
  - A. suction the client's airway
  - B. administer a bronchodilator
  - C. Increase the humidity in the client's room
  - D. assist the client to an upright position

assist the client to an upright position

When providing client care, the nurse should first use the least invasive intervention. Therefore, the nurse should elevate the head of the client's bed to the semi-Fowler's or high Fowler's position to facilitate maximal chest expansion. Sitting upright improves gas exchange and prevents pressure on the diaphragm from abdominal organs.

- a nurse is preparing to administer 0.5 mL of oral single-dose liquid medication to a client. which of the following actions should the nurse take?
  - A. gently shake the container of medication prior to administration
  - B. transfer the medication to a medicine cup
  - C. place the client in a semi-fowlers position to medication administration
  - D. verify the dosage by measuring the liquid before administering it

Gently shake the container of medication prior to administration.

The nurse should gently shake the liquid medication to ensure the medication is mixed.

- 4. a nurse is planning care to improve self-feeding for a client who has vision loss, which of the following interventions should the nurse include in the plan of care?
  - A. tell the client which food she should eat first
  - B. provide small-handle utensils for the client
  - C. thicken liquids on the client's tray

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Yan Bai

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