HESI - Medical Surgical Nursing test-Exam TEST BANK FOR MEDICAL SURGICAL NURSING 11TH EDITION IGNATAVICIUS

A client asks the nurse why it is important to be weighed every day if he has right-sided heart failure. What is the nurse's best response?

- A) "The hospital requires that all inpatients be weighed daily."
- B) "Weight is the best indication that you are gaining or losing fluid."
- C) "You need to lose weight to decrease the incidence of heart failure."
- D) "Daily weights will help us make sure that you're eating properly." correct answersB

Daily weights are needed to document fluid retention or fluid loss. One liter of fluid equals 2.2 pounds.

A client has a deep wound covered with a wet-to-damp dressing. Which intervention does the nurse include on this client's care plan?

- A) Apply a new dressing when the seal breaks and the dressing leaks.
- B) Change the dressing when the current dressing is saturated.
- C) Leave the dressing intact until next week.
- D) Change the dressing every 6 hours around the clock. correct answersD

Wet-to-damp dressings are changed every 4 to 6 hours to provide maximum débridement. Synthetic dressings can be left in place for extended periods of time but need to be changed if the seal breaks and the exudate is leaking. Dry gauze dressings should be changed when the outer layer becomes saturated.

A client has a small-bore nasoenteric feeding tube. The nurse assesses the following vital signs: temperature, 100.2° F (37.8° C); pulse, 112 beats/min; respiratory rate, 22 breaths/min; and blood pressure, 106/62 mm Hg. Which action by the nurse takes priority?

- A) Auscultate bowel sounds and slow the feeding down.
- B) Remove the tube immediately and notify the heath care provider.
- C) Auscultate lung sounds and obtain oxygen saturation.
- D) Add blue dye to the feeding tube formula. correct answersC

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Table of Contents Hesi Medsurge Testbank 2014

- 1. Understanding the eBook Hesi Medsurge Testbank 2014
 - o The Rise of Digital Reading Hesi Medsurge Testbank 2014
 - Advantages of eBooks Over Traditional Books
- 2. Identifying Hesi Medsurge Testbank 2014
 - Exploring Different Genres
 - Considering Fiction vs. Non-Fiction
 - Determining Your Reading Goals
- 3. Choosing the Right eBook Platform
 - Popular eBook Platforms
 - Features to Look for in an Hesi Medsurge Testbank 2014
 - User-Friendly Interface
- 4. Exploring eBook Recommendations from Hesi Medsurge Testbank 2014
 - Personalized Recommendations
 - Hesi Medsurge Testbank 2014 User Reviews and Ratings
 - Hesi Medsurge Testbank 2014 and Bestseller Lists

- 5. Accessing Hesi Medsurge Testbank 2014 Free and Paid eBooks
 - Hesi Medsurge Testbank 2014 Public Domain eBooks
 - Hesi Medsurge Testbank 2014 eBook Subscription Services
 - Hesi Medsurge Testbank 2014 Budget-Friendly Options
- 6. Navigating Hesi Medsurge Testbank 2014 eBook Formats
 - o ePub, PDF, MOBI, and More
 - Hesi Medsurge Testbank 2014 Compatibility with Devices
 - Hesi Medsurge Testbank 2014 Enhanced eBook Features
- 7. Enhancing Your Reading Experience
 - o Adjustable Fonts and Text Sizes of Hesi Medsurge Testbank 2014
 - Highlighting and Note-Taking Hesi Medsurge Testbank 2014
 - Interactive Elements Hesi Medsurge Testbank 2014
- 8. Staying Engaged with Hesi Medsurge Testbank 2014
 - Joining Online Reading Communities
 - Participating in Virtual Book Clubs
 - \circ Following Authors and Publishers Hesi Medsurge Testbank 2014
- 9. Balancing eBooks and Physical Books Hesi Medsurge Testbank 2014
 - Benefits of a Digital Library
 - Creating a Diverse Reading Collection Hesi Medsurge Testbank 2014
- 10. Overcoming Reading Challenges
 - Dealing with Digital Eye Strain
 - Minimizing Distractions
 - Managing Screen Time
- 11. Cultivating a Reading Routine Hesi Medsurge Testbank 2014
 - Setting Reading Goals Hesi Medsurge Testbank 2014
 - Carving Out Dedicated Reading Time
- 12. Sourcing Reliable Information of Hesi Medsurge Testbank 2014
 - Fact-Checking eBook Content of Hesi Medsurge Testbank 2014
 - Distinguishing Credible Sources
- 13. Promoting Lifelong Learning

- Utilizing eBooks for Skill Development
- Exploring Educational eBooks
- 14. Embracing eBook Trends
 - Integration of Multimedia Elements
 - Interactive and Gamified eBooks

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