# 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 2014 Test Bank Medical Surgical Nursing**

- 1. Understanding the eBook Hesi 2014 Test Bank Medical Surgical Nursing
  - The Rise of Digital Reading Hesi 2014 Test Bank Medical Surgical Nursing
  - Advantages of eBooks Over Traditional Books
- 2. Identifying Hesi 2014 Test Bank Medical Surgical Nursing
  - Exploring Different Genres
  - Considering Fiction vs. Non-Fiction
  - Determining Your Reading Goals
- 3. Choosing the Right eBook Platform
  - Popular eBook Platforms
  - o Features to Look for in an Hesi 2014 Test Bank Medical Surgical Nursing
  - User-Friendly Interface
- 4. Exploring eBook Recommendations from Hesi 2014 Test Bank Medical Surgical Nursing
  - Personalized Recommendations
  - Hesi 2014 Test Bank Medical Surgical Nursing User Reviews and Ratings
  - Hesi 2014 Test Bank Medical Surgical Nursing and Bestseller Lists
- 5. Accessing Hesi 2014 Test Bank Medical Surgical Nursing Free and Paid eBooks
  - Hesi 2014 Test Bank Medical Surgical Nursing Public Domain eBooks
  - Hesi 2014 Test Bank Medical Surgical Nursing eBook Subscription Services
  - Hesi 2014 Test Bank Medical Surgical Nursing Budget-Friendly Options
- 6. Navigating Hesi 2014 Test Bank Medical Surgical Nursing eBook Formats

- ∘ ePub, PDF, MOBI, and More
- Hesi 2014 Test Bank Medical Surgical Nursing Compatibility with Devices
- Hesi 2014 Test Bank Medical Surgical Nursing Enhanced eBook Features
- 7. Enhancing Your Reading Experience
  - o Adjustable Fonts and Text Sizes of Hesi 2014 Test Bank Medical Surgical Nursing
  - Highlighting and Note-Taking Hesi 2014 Test Bank Medical Surgical Nursing
  - Interactive Elements Hesi 2014 Test Bank Medical Surgical Nursing
- 8. Staying Engaged with Hesi 2014 Test Bank Medical Surgical Nursing
  - Joining Online Reading Communities
  - Participating in Virtual Book Clubs
  - Following Authors and Publishers Hesi 2014 Test Bank Medical Surgical Nursing
- 9. Balancing eBooks and Physical Books Hesi 2014 Test Bank Medical Surgical Nursing
  - Benefits of a Digital Library
  - o Creating a Diverse Reading Collection Hesi 2014 Test Bank Medical Surgical Nursing
- 10. Overcoming Reading Challenges
  - Dealing with Digital Eye Strain
  - Minimizing Distractions
  - Managing Screen Time
- 11. Cultivating a Reading Routine Hesi 2014 Test Bank Medical Surgical Nursing
  - Setting Reading Goals Hesi 2014 Test Bank Medical Surgical Nursing
  - Carving Out Dedicated Reading Time
- 12. Sourcing Reliable Information of Hesi 2014 Test Bank Medical Surgical Nursing
  - Fact-Checking eBook Content of Hesi 2014 Test Bank Medical Surgical Nursing
  - 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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