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QUESTION 1

You are caring for a patient in cardiogenic shock who has a multilumen pulmonary artery catheter in place. What cardiac output (CO) and pulmonary capillary wedge pressure (PCWP) would you see if the patient were unstable?

- A. CO 5 L/min, PCWP low
- B. CO 4 L/min, PCWP high
- C. CO 3 L/min, PCWP high
- D. CO 2 L/min, PCWP low

Correct Answer: C

A CO 3 L/min and PCWP that is high would indicate that the patient in cardiogenic shock is unstable. Normal cardiac output is 4 to 8 L/min. The heart fails to pump, which leads to the cardiac output falling and PCWP rising.

QUESTION 2

You are caring for a patient in the emergency department. The patient has been drinking alcohol and is asking for medication. When you instruct the patient that they have to wait to be seen by the doctor, the patient becomes verbally abusive. You then obtain a set of restraints and instruct the patient if they do not calm down you will restrain them. What can you be charged with?

- A. Assault
- B. Battery
- C. Negligence
- D. Invasion of privacy

Correct Answer: A

You as the nurse can be charged with assault for threatening to restrain the patient. You as the nurse have put the patient in fear of harmful or offensive contact. In order for this to be a chargeable offense, the patient must be aware of the threat.

QUESTION 3

When developing a plan of care for a patient with stage I Lyme disease, which of the following would you want to include?

- A. No treatment without symptoms
- B. Three-week course of antibiotics
- C. Intravenous antibiotics
- D. Oatmeal baths for two weeks

Correct Answer: B

In stage I Lyme disease a three-week course of oral antibiotics is begun. In later stages the patient may require intravenous antibiotics. Both A and D are inappropriate responses for patients with Lyme disease. Prevention, education and early diagnoses are important in controlling Lyme disease.

QUESTION 4

Your patient has been stung by a bee. What signs and symptoms would you see if the patient had an allergic reaction to the sting?

- A. Normal respiratory rate
- B. Prolonged expiratory phase
- C. Wheezing on inspiration
- D. Decreased respiratory rate

Correct Answer: B

The nurse would want to monitor the patient for a prolonged expiratory phase. The allergic reaction would lead to air trapping and alveoli distention that occurs as a result of an anaphylactic response. Respiratory rate will be within normal limits, and wheezing occurs on expiration due to constricted bronchi.

QUESTION 5

You enter a patient's room and find the patient not breathing, no pulse, and unresponsive. You have called for help. What is the next step?

- A. Bag mask ventilations
- B. Chest compressions
- C. Oxygen
- D. Open airway

Correct Answer: B

New standards in CPR emphasize chest compressions over airway, so the next step after calling for help is to check the pulse and begin chest compressions. Chest compressions should be given immediately (30 for an adult patient), and then followed by opening the airway and beginning respirations. Ventilation is only initiated when the airway is open or patent, as oxygen is not needed until the patient is breathing.

QUESTION 6

You need to read a Mantoux test on the child you are caring for. An area of induration measuring 10 mm would indicate what result?

- A. Negative

- B. Positive
- C. Inconclusive
- D. Definitive and requiring a repeat test

Correct Answer: B

An area of induration measuring 10 mm would indicate a positive result in children less than 4 years old. An area of induration 5 mm or greater would be considered positive in any high risk patients, such as those with HIV. An area of induration 15 mm or larger would be considered positive for patient four years old or older with no high risks for tuberculosis.

QUESTION 7

You are completing a hearing screening on a patient. You note that the sound lateralizes to the patient's left ear during a Weber test. What does this finding indicate?

- A. A normal finding
- B. Conductive hearing loss in the right ear
- C. Sensorineural or conductive loss
- D. Presence of nystagmus

Correct Answer: C

This test indicates sensorineural or conductive loss in the right ear. The Weber test is done by placing a vibrating tuning fork at the middle of the forehead. The patient should hear sound by bone conduction equally in both ears; if not, then the patient has hearing loss in the ear that did not hear the sound.

QUESTION 8

You are caring for a patient with a phosphorus level of 2.0 mg/dL. What condition do you know would cause the phosphorus level to be so low?

- A. Alcoholism
- B. Hypoparathyroidism
- C. Tumor lysis syndrome
- D. Renal insufficiency

Correct Answer: A

Of the above listed conditions, the patient with alcoholism would be most likely to have a phosphorus level of 2.0 mg/dL. A normal phosphorus level is 2.7 to 4.5 mg/dL. Malnutrition or starvation and the use of aluminum hydroxide-based antacids can also be causes of low phosphorus levels. The other three conditions are more likely to cause hyperphosphatemia.

QUESTION 9

You are caring for a patient who has been receiving a blood transfusion for the last 30 minutes. On assessment, you find the patient to be dyspneic and show bilateral crackles and a heart rate of 110. Which of the following complications do you suspect the patient is experiencing?

- A. Immune response
- B. Hypovolemia
- C. Fluid overload
- D. Polycythemia vera

Correct Answer: C

The patient exhibiting these signs and symptoms is most likely going into fluid overload. Crackles in the lungs would not be associated with the other options. The physician should be notified to get a diuretic for the patient.

QUESTION 10

Your patient has been involuntarily admitted the hospital. He has been scheduled for electroconvulsive therapy. The nurse knows that:

- A. Informed consent is not necessary.
- B. The family will need to sign informed consent.
- C. The patient will need to sign informed consent.
- D. The physician will need to sign informed consent.

Correct Answer: C

The patient will still need to sign the informed consent for the therapy. The patient is still considered legally competent until declared otherwise. Patients who are admitted involuntarily do not lose their right to informed consent unless they are declared incompetent; then the consent falls to the next of kin.

QUESTION 11

A hurricane is coming, and nurses have been activated to open a shelter. What items should the public be encouraged to bring to the shelter?

- A. Food and clothing
- B. Cats and dogs
- C. Medication and records
- D. Radios, televisions and other electronics

Correct Answer: C

The public should be encouraged to bring all medications and medical records to the shelter. Space will be

limited at the shelter so they should not bring food, clothing or any type of electronics.

Animals will not be allowed at the shelter.

QUESTION 12

You are caring for a patient who has been admitted to the hospital involuntarily. You know based on this admission that the patient:

- A. Is a harm to himself or others
- B. Is requesting admission
- C. Has agreed to admission
- D. Has provided a written request for admission

Correct Answer: A

The patient has been involuntarily admitted to the hospital because he presents a threat to himself or others. In this situation the patient has not consented to admission. The patient will probably be upset about the admission and will request to leave repeatedly.

QUESTION 13

Your patient came in to the emergency department with chest pain. Over the last hour the patient's blood pressure has dropped, pulse has increased and respirations have increased. What do you suspect these changes indicate?

- A. Cardiogenic shock
- B. Cardiac tamponade
- C. Pulmonary embolism
- D. Aortic aneurysm

Correct Answer: A

The changes in vital signs indicate that the patient is going into cardiogenic shock. Cardiogenic shock occurs when there is severe damage to the left ventricle. The patient may also display signs of decreased urine output and cool, clammy skin.

QUESTION 14

Which of the following would not encourage effective communication between a dying patient and his family?

- A. Discussing feelings openly
- B. Making decisions for the family and patient
- C. Assisting family and patient in performing spiritual practices

D. Acceptance when family and patient express anger

Correct Answer: B

Making decisions for the family and patient would not encourage them to have effective communication. It is important to encourage the patient and the family to express their feeling and anger if they need to. Spiritual practices are also a very important part of a patient and family's dying process.

QUESTION 15

You are caring for a patient who was brought into the emergency department unresponsive, hypotensive and tachypneic. Upon further assessment, you realize that the patient's temperature is 106 degrees Fahrenheit. You suspect heat stroke. What would your priority nursing intervention be?

- A. Obtain a history from the patient.
- B. Take oral temperature to monitor effectiveness of treatment.
- C. Call the family for consent to treat.
- D. Take off the patient's clothing, wrap him or her in wet towels and place a fan on the patient.

Correct Answer: D

The nurse's priority would be to undress and wrap the patient in wet towels and place a fan on him or her. Interventions must be taken quickly to lower the body temperature because heat stroke is life threatening. Core body temperatures should be monitored for effective treatment.

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