

HESI RN Pharmacology 2022 V2 Exam & Study Guide

antidote in cases of hemorrhage induced by the administration of heparin. Naloxone hydrochloride is administered to treat opioid-induced respiratory depression.

A nurse instructs a pregnant client about foods that are high in folic acid. Which item does the nurse tell the client is the best source of folic acid?

- M. ☐ Milk
- N. ☐ Steak
- O. ☐ Chicken
- P. ☒ Lima beans **Correct**

Rationale: The best sources of folic acid are liver; kidney, pinto, lima, and black beans; and fresh dark-green leafy vegetables. Other good sources of folic acid are orange juice, peanuts, refried beans, and peas. Milk is high in calcium. Chicken and steak are high in protein.

A nurse is providing instructions to a mother of an infant with seborrheic dermatitis (cradle cap) about treatment of the condition. The nurse tells the mother to:

- Q. ☒ Avoid the use of shampoo on the infant's scalp **Incorrect**
- R. ☐ Apply oil to the affected area on the infant's scalp **Correct**
- S. ☐ Wash the infant's scalp daily, using only tepid water
- T. ☐ Shampoo the infant's scalp, avoiding the anterior fontanel area

Rationale: Seborrheic dermatitis, a chronic inflammation of the scalp or other areas of the skin, is characterized by yellow, scaly, oily lesions. It sometimes results when parents do not wash over the anterior fontanel carefully for fear that they will hurt the infant. Treatment includes the application of oil (e.g., mineral oil) to the area to help soften the lesions followed by gentle removal of the scaly lesions with a comb before the head is shampooed. The nurse should teach the mother how to shampoo the scalp and explain that she will not damage the fontanel with normal gentle shampooing. The scalp should be rinsed well to remove all soap, which could cause irritation.

A nurse is monitoring a client who was given an epidural opioid for a cesarean birth. The nurse notes that the client's oxygen saturation on pulse oximetry is 92%. The nurse first:

- U. ☐ Notifies the registered nurse
- V. ☐ Documents the findings
- W. ☐ Instructs the client to take several deep breaths **Correct**
- X. ☒ Administers 100% oxygen by way of face mask **Incorrect**

Rationale: If the client has been given an epidural opioid, the nurse should monitor the client's respiratory status closely. If the oxygen saturation falls below 95%, the nurse instructs the client to take several deep breaths to increase the level. Although the finding would be documented, action is required to increase the oxygen saturation level. It is not necessary to contact the registered nurse. If

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RJ Alexander



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