

1. The nurse finds a small, firm, elevated lesion on the new client. How should the nurse document this finding?

- a. Macule
- b. Nodule
- c. Pustule
- d. Papule

R: D. Papule: Small, firm, elevated lesion. Macule: Small, flat, circumscribed lesion of a different color than the normal skin. Nodule: firm, raised, and deep. Palpable, elevated lesion; varies in size.

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2. Malignant melanomas can be best described by?

- a. Regular borders and do not grow.
- b. Often do not metastasize fast.
- c. Only occurring in the elderly population.
- d. Irregular borders & multicolored.

R: D. Malignant melanomas often appear as multicolored lesions with an irregular border. Melanomas grow quickly, extending down into the tissues, then metastasize quickly to the regional lymph nodes and then to other organs, leading to a poor prognosis in many cases
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3. What is the most important to educate on reducing the risk of developing skin cancer?

- a. Apply sunscreen during direct exposure to sunlight.
- b. Tanning beds are a safe way to obtain a suntan.
- c. Avoid sunlight exposure from 0800-1100.
- d. While sitting in water, sun exposure is not a concern.

R: A. Applying sunscreen while having direct exposure to any form of UV light is essential to decrease the risk of skin cancer. Clients can also wear light clothing, and hats. Clients should avoid tanning beds all together, as well sun exposure from midday to midafternoon. Water enhances UV light exposure to the skins, so it is vital to place sunscreen every 30-60mins while in the water.

4. An infant has small, red vesicles that have ruptured with yellow-brown crusts on the mouth. The nurse suspects this is?

- a. Psoriasis
- b. Impetigo
- c. Cellulitis
- d. Scleroderma

R: B. Impetigo: Small red vesicles are present, which rapidly enlarge. Vesicles will rupture to form yellowish-brown crusty masses. Psoriasis: red patches of skin covered with silvery scales. Cellulitis: reddened area, edematous, painful, red streaks running long lymph vessels.

Scleroderma: Collagen deposits in the arterioles and capillaries which reduce blood flow. Hard, shiny, tight, immovable areas of skin are present , Pg: 151

5. Herpes Simplex type 1 (HSV-1) can be described as?

- a. Latent viral infection found in or around the mouth.**
- b. Lesions following a nerve path down both extremities.
- c. Acute viral infection transmitted by sexual intercourse.
- d. Vesicles found around the glans penis.

R: A. HSV-1 are cold sores. Most common found near the lips. HSV-2 are common with STDs'. Shingles is found typically to be unilateral and is caused by varicella zoster from the herpes zoster virus. pg:154

6. Hypoxemia is responsible for signaling what to increase respiratory function?

- a. Beta receptors
- b. Dopamine receptors
- c. Chemoreceptors**
- d. Baroreceptors

R: C. Chemoreceptors stimulate respiratory control when carbon dioxide or hydrogen ions increase. Beta receptors affect cardiac function. Dopamine receptors are found in neurofunction for pleasure and used for cardiac support increasing bp. Baroreceptors found in the carotids to sense pressure changes by tension of arterial wall.

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7. Which of the following are symptoms associated with Tuberculosis?

- a. Steatorrhea, increased respirations, and hoarseness
- b. Weight loss, fatigue, night sweats**
- c. Weight gain, nausea & vomiting
- d. Increased appetite, pink frothy sputum

R: B. weight loss, fatigue, night sweats, anorexia, malaise, afternoon log grade fever, purulent sputum with blood pg. 291

8. This type of pneumonia is caused by influenza A & B, causing inflammation in the mucosa & upper resp. tract.

- a. Mycoplasma pneumonia
- b. Bronchopneumonia
- c. Viral pneumonia**
- d. Chlamydial pneumonia

R: C. Viral Pneumonia: The widespread necrosis of the respiratory mucosa typical of influenza leaves the area vulnerable to secondary infection by bacteria, which are often resident flora of the upper respiratory tract. Chlamydia pneumonia is associated with the chlamydial infection. Bronchopneumonia is caused by bacteria. Mycoplasma pneumonia is also associated with a bacterial infection related to cold agglutinin. Pg: 110