LVN/LPN COMPETENCY TEST

NAME: _____________________________________________________________  TITLE: __________________

SIGNATURE: ________________________________________________________  DATE: _________________

Instruction: Please select the best answer.

1. The nurse is caring for Mrs. Porter, a patient who has suffered severe burns, and monitoring her hourly urine output. At the end of her eight-hour shift, the total urine output for that time period is 250 cc. What is the most appropriate action for the nurse to take?

☐ a. Increase the IV fluid rate and give the patient a fluid challenge.
☐ b. Chart the output and inform the on-coming nurse. Since this is a normal amount, there is no need to notify the charge RN.
☐ c. Chart the output and notify the charge RN that it is low.
☐ d. Notify the on-coming nurse and suggest that she inform the charge RN if it doesn’t increase in the next two hours.

2. Shane, a 58-year-old white male with a 30-year pack-a-day history of cigarette smoking, is being admitted to the unit with a diagnosis of pulmonary emphysema. The Nurse knows that his oxygen must be delivered:

☐ a. In low concentrations
☐ b. Only at night while he is sleeping
☐ c. At 10 lpm via face mask
☐ d. At 70 percent via respirator

3. The nurse is assigned to care for Mr. Green who has just been admitted to the MedSurg floor with a diagnosis of acute pancreatitis. The nurse knows that with this diagnosis the goal of care is to:

☐ a. Monitor the urine for albumin and ketones
☐ b. Weigh the patient every day and monitor his fluid status
☐ c. Control nausea, vomiting and pain
☐ d. All of the above

4. The incidence of peripheral vascular disease is most common in people with:

☐ a. Viral pneumonia
☐ b. Diabetes mellitus
☐ c. Ventricular aneurysm
☐ d. Leukemia
5. You need to transport your patient to the cardiology department in order to have a 12-lead EKG done. On the way, Mrs. Williams, the patient, asks you, “What is an EKG?” The best way for you to describe this to her is:

- a. “It is a necessary test that will help the doctor determine how to care for your heart.”
- b. “It is a test that measures the electrical activity of your heart.”
- c. “It is a diagnostic procedure that measures the electrical impulses from the SA node down to the AV and throughout the rest of your heart.”
- d. “It won’t hurt you. You’ll just have to be very still.”

6. Mr. Jones has been newly diagnosed with diabetes. His care plan includes careful monitoring of his intake and output. The nurse expects to find which of the following typical presentations of diabetes?

- a. Polyuria
- b. Anuria
- c. Hematuria
- d. Oliguria

7. Two ways that are used to increase oxygenation to the myocardium are by administering:

- a. Nitroglycerin and providing nasal O2
- b. O2 via a venti mask and administering Lidocaine
- c. O2 and performing CPR
- d. Digoxin and heparin

8. A nurse is assigned a patient that is being treated with IV antibiotics for a large drainage wound on his left leg. According to the patient’s plan of care, the nurse is to change the dressing at 10:00am. The nurse knows that it is important to document the characteristics of the wound drainage. The characteristics the nurse would describe include all of the following observations EXCEPT:

- a. Amount
- b. Temperature
- c. Color
- d. Odor

9. A 32-year-old patient, pregnant with her fourth child, complains to her nurse that her varicose veins are worse than in her previous pregnancies and asks if there is anything she can do to help relieve the discomfort. Which of the following suggestions by the nurse would NOT be beneficial in helping to alleviate some of the patient’s discomfort:

- a. Advise the patient to wear support stockings
- b. Advise the patient to exercise her calf muscles
- c. Advise the patient to stand for long periods of time
- d. Advise the patient to elevate her legs when sitting
10. The nurse tells her patient that she needs to collect a clean catch urine specimen. For this procedure, the nurse is responsible for all of the following EXCEPT:

a. Determining if the test is even necessary
b. Prevent contamination of the specimen
c. Instruct the patient in the proper technique to be used to obtain the specimen
d. Labeling the specimen

11. Nurse Harris is admitting a patient with shingles. He appears very worried and asks the nurse if his shingles are contagious. The correct response from the nurse should be:

a. “Yes, anyone who comes into contact with you is susceptible to infection.”
b. “Yes, those individuals that have compromised immune systems and / or those that are not immune from a previous infection with varicella can be infected.”
c. “No, shingles is not contagious.”
d. “No, only those individuals who are immunocompromised are susceptible.”

12. A patient is being admitted to the MedSurg floor to be evaluated for possible pulmonary tuberculosis. The primary concern for the nurse when making a room assignment for this new admission would be:

a. To place her near the nurse’s station for closer observation in case of an emergency
b. To place her in a room with another woman who is close to her own age
c. To place her only in a room with another patient that has a respiratory infection
d. To place her in a negative pressure room

13. Mr. Cartwright has just been admitted to the MedSurg floor following a TURP (transurethral prostatectomy). The nurse is taking the second set of vital signs and documenting her observations. Which if the following observations is NOT usual and should be reported to the RN?

a. Mr. Cartwright is worried and asks if he’ll ever be able to have sex again
b. Mr. Cartwright complains that he is having bladder pain
c. The irrigation tubing and collection system contain some bloody drainage and some clots
d. Mr. Cartwright states that he feels the urge to urinate even though he has a catheter in place

14. The nurse knows that early warning signs of increased intracranial pressure following a head injury include:

a. Agitation and sleeplessness
b. Seizures and incontinence of urine
c. Headache and projectile vomiting
d. Dilated pupils which are non-reactive to light

15. When having to fill out an incident / occurrence report, it is beneficial for the nurse to remember that a primary purpose of this document is to:

a. Keep accurate records on patients that are prone to accidents
b. Help lawyers defend the hospital during lawsuits
c. Identify employees that are making frequent errors
d. Aid in the reduction of future incidents / occurrences by helping to identify high risk practices or situations
16. The nurse will be administering an enteral feeding to a 60-year-old patient who is unable to ingest foods orally. After raising the head of the bed to put the patient in high-fowler’s position, and before administering the feeding, the nurse must:

- a. Check the patient’s weight to determine the amount of feeding to be given.
- b. Provide mouth care.
- c. Place the patient on oxygen to assure adequate oxygenation during the feeding.
- d. Aspirate the stomach contents to check for proper placement.

17. A 14-year-old boy has just been admitted with symptoms of meningitis: nuchal rigidity, fever, vomiting and lethargy. The nurse knows to expect to prepare for the following test:

- a. Lumbar puncture
- b. CAT scan
- c. Blood cultures
- d. Ear and throat cultures

18. Mrs. Smith received her morning insulin an hour ago. The breakfast trays have been delayed. Mrs. Smith reports to her nurse that she is feeling shaky, sweaty and has a tingling sensation around her mouth and on her fingers. The nurse knows to quickly bring her:

- a. Another dose of insulin
- b. A cup of coffee
- c. A tablespoon of peanut butter
- d. A glass of orange juice

19. Mark and Jane have just learned that Mark has been diagnosed with testicular cancer. Both of them are visibly upset. They have just recently had conversations about starting a family and now express their fears to the nurse that they will never be able to have any children of their own. The most appropriate response for the nurse to tell them would be:

- a. “It is way too early to think of that now. You’ll be lucky to be alive in two years.”
- b. “Only a specialist will be able to help you with that after your surgery.”
- c. “Fortunately, testicular cancer is almost always unilateral, so Mark may still be able to produce his own sperm and become a father.”
- d. “There are new technologies and many alternatives available for couples these days. I’m sure you’ll be able to locate a good sperm donor.”

20. An 82-year-old male patient who is scheduled for open-heart surgery the next morning, informs his nurse, “If things don’t go well during my surgery, I don’t want any heroic things done that will only leave me hooked up to a bunch of machines in order to stay alive.” The nurse tells him that the most effective way for him to assure that his wishes will be carried out is for him to:

- a. Talk with the hospital chaplain about his wishes
- b. Prepare an advanced directive, such as a Living Will
- c. Talk to his primary care physician
- d. Discuss the matter with his family
21. While turning over in bed a fresh postoperative patient accidentally pulls out her right chest tube. Patient’s nurse is in the room and is unable to intervene quickly enough to prevent dislodgement, but is able to keep the end of the chest tube from falling onto the floor. The nurse’s FIRST action should be:

- a. Roll the patient quickly onto her left side
- b. Reinsert the tube and tape it into position
- c. Cover the opening to maintain a seal
- d. Tell the patient to take a deep breath and cough three times

22. Hip fractures typically occur in older patients as a direct result of falling. This is because older patients tend to suffer from:

- a. Paget’s disease
- b. Osteomyelitis
- c. Osteoarthritis
- d. Osteoporosis

23. Mrs. Young, an elderly patient on the MedSurg floor has developed a reddened area on her coccyx. Which of the following would be the most effective nursing intervention?

- a. Increase her fluid intake
- b. Sit her on a foam pillow
- c. Turn and position her every 2 hours
- d. Get the doctor to change her bed rest order

24. Mr. Thompson is a 61-year-old patient that has been on a corticosteroids for his asthma for more than twenty years. He has since developed a “moon” face, a “buffalo hump”, obesity mainly in his torso, hyperglycemia and hyper-tension. His disorder is known as:

- a. Cushing’s syndrome
- b. Hypothyroidism
- c. Adult onset diabetes
- d. Hyperparathyroidism

25. When answering a call light, the nurse enters a patient’s room to find a frightened mother whose 5-year-old daughter, a new admission to the unit, is having a seizure. What should be the nurse’s very FIRST action?

- a. The nurse should call the hospital operator and page for seizure assistance.
- b. The nurse should ask the mother to help restrain the child to prevent her from injuring herself.
- c. The nurse should quickly assess the bed area to make sure the environment is safe for the patient and that there is not any object nearby that may injure the patient.
- d. The nurse should run down the hall to find a padded tongue blade that can be quickly inserted into the patient’s mouth to prevent her from swallowing or choking on her tongue.

**SCORE:** 

**PASSING SCORE:** 

**EVALUATOR:**