

RESPIRATORY SYSTEM

Answers with Rationale

1. (2) This is a management question and the RN must be sure that the LVN checked that the physician has written orders. Stripping and milking chest tubes is allowed only with a physician's order because it can cause excessive negative pressure, which could damage the lung tissue. Chest tubes are milked away from the client toward the drainage receptacle. LVNs are legally allowed to do this intervention.
NP:I; CN:S; CL:AN
2. (2) The pH (7.50) reflects alkalosis, and the low PaCO₂ indicates that the lungs are involved. The client should immediately be placed on oxygen via mask, so that the SaO₂ is brought up to 95 percent. Encourage slow, regular breathing to decrease the amount of CO₂ she is losing. This client may have pulmonary embolism, so she should be monitored for this condition (4), but it is not the first intervention. Sodium bicarbonate (3) would be given to reverse acidosis; mechanical ventilation (1) may be ordered for acute respiratory acidosis.
NP:I; CN:PH; CL:AN
3. (1) Basilar crackles are usually heard during inspiration and are caused by sudden opening of alveoli.
NP:AN; CN:PH; CL:K
4. (4) Hyperextension brings the pharynx into alignment with the trachea and allows the scope to be inserted without trauma.
NP:I; CN:PH; CL:A
5. (3) Administer oxygen at 2 L/min and no more, for if the client is emphysemic and receives too high a level of oxygen, he will develop CO₂ narcosis and the respiratory system will cease to function.
NP:I; CN:PH; CL:A
6. (1) Liver function tests can be elevated in clients taking pyrazinamide. This drug is used when primary and secondary antitubercular drugs are not effective. Urate levels may be increased, and there is a chemical interference with urine ketone levels if these tests are done while the client is on the drug.
NP:E; CN:PH; CL:A
7. (1) Until the gag reflex returns, the client cannot handle foods or liquids, and may aspirate. Suctioning (4) is not usually ordered. The client does not require throat irrigations (2) and can talk (3) whenever he or she is ready.
NP:E; CN:PH; CL:A
8. (3) Increased pulse and pallor are symptoms associated with shock. A compromised venous return may occur if there is a mediastinal shift as a result of excessive fluid removal. Usually no more than 1 L of fluid is removed at one time to prevent this from occurring.
NP:E; CN:PH; CL:AN
9. (1) Respiratory acidosis represents an increase in the acid component, carbon dioxide, and an increase in the hydrogen ion concentration (decreased pH) of the arterial blood. It differs from metabolic acidosis (3) in that it is caused by defective functioning of the lungs.
NP:A; CN:PH; CL:A
10. (2) The arrhythmias are caused by a buildup of carbon dioxide and not enough oxygen so that the heart is in a constant state of hypoxia.
NP:AN; CN:PH; CL:C
11. (4) ARDS produces severe dyspnea and life-threatening abnormalities of blood gases; therefore, maintaining an upright position will promote

Coding for Questions/Answers Abbreviations: **Nursing Process:** NP, Assessment: A, Analysis: AN, Planning: P, Implementation: I, Evaluation: E, **Client Needs:** CN, Safe, Effective Care Environment: S, Health Promotion and Maintenance: H, Psychosocial Integrity: PS, Physiological Integrity: PH, **Clinical Area:** CA, Medical Nursing: M, Surgical Nursing: S, Maternal/Newborn Nursing: MA, Pediatric Nursing: P, Psychiatric Nursing: PS, **Cognitive Level:** CL, Knowledge: K, Comprehension: C, Application: A, Analysis: AN