

WELCOME TO THE

NCLEX VIRTUAL TRAINER

"THE FUTURE OF NURSE EDUCATION"

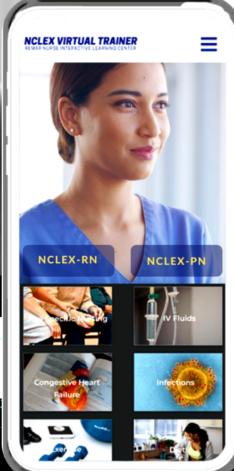


4-HOUR NCLEX REVIEW

(LECTURE NOTES & DISCOUNTS INSIDE)

#1 CONTENT REVIEW FOR NCLEX RN & LPN

THIS NCLEX TRAINING OPPORTUNITY IS SPONSORED BY:
REGINA MSN, RN @ REMARNURSE.COM



REMARKS FROM THE AUTHOR

Each year thousands of nursing students from all over the United States prepare to take their NCLEX. Unfortunately, nearly fifteen percent of fail the first time and nearly forty percent fail as repeat-testers, and it's frustrating.

You know that you need an NCLEX review, but let's be honest, they can be expensive, overwhelming, boring, and may not work for you. Let's not even talk about test anxiety.

My goal is to help you remove the stress from NCLEX by giving you and teaching you the straight to the point core-content that you need to pass NCLEX. Student learn best by breaking down the content into easily digestible bites.

During today's class, we will create a strong foundation of content. Most live review courses are three to five days long. However, you know it takes a at least three to six weeks to fully prepare for NCLEX because the real work of studying is done AT HOME!

When you sit for NCLEX, it's not group work. You test by yourself. For this reason, I've created the ReMar NCLEX comprehensive core-content review with a six-week daily study calendar so that you can be responsible for your own guided studies. !

I passed NCLEX with 75 questions on my first try and I was so excited! Since starting ReMar Review over ten years ago I've seen the most amazing stories come from the students with the most difficult circumstances. This is my hope for you. Believe in yourself, because you can pass NCLEX!

Regina M. Callion, MSN, RN

Regina M. Callion

You've Officially Reached the Starting Line!



- 1. A nurse is caring for a client with Meniere's disease. The client wants to go to a carnival. Which activity should the nurse educate the patient to avoid?
 - A. Bumper cars
 - B. Throwing darts
 - C. Ferris wheel
 - D. Eating cotton candy
- 2. A nurse is caring for a client diagnosed with diabetes mellitus type 2. Which of the following is expected?
 - A. Urine is positive for ketones but negative for blood
 - B. Urine and blood positive for both glucose and ketones
 - C. Urine is positive for ketones but no glucose is present in blood
 - D. Urine negative for ketones and glucose in the blood
- 3. After educational instructions have been given to a newly diagnosed type 1 diabetic the nurse would follow up after the patient makes which of the following statements?
 - A. If my blood glucose is over 250 mg/dL I will start checking my urine for ketones and decrease my insulin if the test comes back positive.
 - B. I will notify my doctor is my blood glucose level is above 200 mg/dL.
 - C. I may experience polyuria if my blood glucose levels become too high.
 - D. Shakiness is a sign of hypoglycemia and indicates that I need to eat more.
- 4. A nurse is caring for a client with a newly implanted cardiac pacemaker. Which is the most important action by the nurse?
 - A. Educate the client on how to avoid post-surgical infections
 - B. Demonstrate to the client how to perform deep breathing exercises
 - C. Monitor the heart rhythm
 - D. Evaluate the post-surgical pain to decrease anxiety and allow the client to perform daily activities
- 5. A nurse is working on a cardiac unit. Which patient should she medicate first?
 - A. The client who needs digoxin who has an apical pulse of 56.
 - B. The client who needs furosemide with a serum potassium level of 3.3 mEg/L.
 - C. The client who needs amiodarone with an EKG reading of ventricular fibrillation.
 - D. The client who needs verapamil with a blood pressure of 120/80





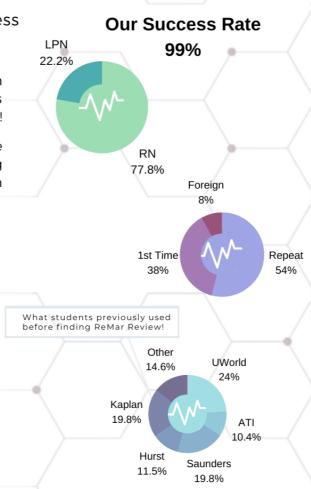
PREPARED FOR SUCCESS!

ReMar Nurses have a 99.2% NCLEX Success Rate Studying Core Nursing Content.

Established in 2010, ReMar Review has become an industry leader and helped more than 300,000 nurses better understand the Core Nursing Content for NCLEX!

With the NCLEX Virtual Trainer we will give you the tools to effectively prepare for the examination. Along with that we provide a community to support you on the journey to becoming a safe nursing professional.

- The NCLEX-RN & LPN test plans and Practice Analysis serve as our guide for content development.
- Our curriculum narrows down the content to emphasize the key topics found on the exam.
- We save time by only teaching the information that a new graduate is expected to know for NCLEX.
- Our streamlined approach to core content builds student's competence and confidence.



SO WHAT'S THE DIFFERENCE?

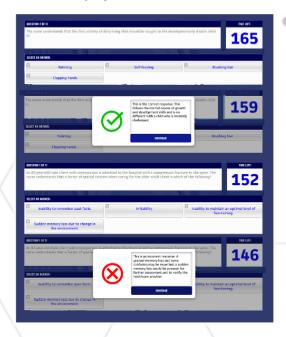
We asked 5,000 repeat-testers "What resources have you previously used?" Nearly 25% of the nurses questioned that failed NCLEX reported using **UWorld**; and nearly 20% of those students reported using **Kaplan** prior to their failed attempt.

You can literally do a thousand NCLEX questions and learn hundreds of "strategies" but as one student said after passing "When you sit for NCLEX all of those strategies go out the window if you don't KNOW THE CONTENT!" ReMar focuses on the content because when you know your content you are better equipped to answer any question NCLEX gives you! Content is the difference between confidence and anxiety; and passing NCLEX or failing NCLEX. What makes ReMar different? We have better nursing content!

EXPERIENCE THE NEW REMAR NCLEX VIRTUAL TRAINER!

CRITICAL THINKING QUESTIONS

Our researched training model combines the science of nursing with clinical applications to situational awareness and judgement.



PRINTED WORKBOOKS

The NCLEX VIRTUAL TRAINER includes the NCLEX-VT Student Workbook & Quick Facts for NCLEX to optimize your study experience and deepen your connection with the written content-based material.



INTERACTIVE CONTENT

Your virtual training platform contains comprehensive content lectures by the #1 Instructor Regina Callion MSN, RN. Each videos is fun, easy to understand and engaging, like watching NetFlix for NCLEX!



M DAILY STUDY CALENDAR

Follow our six-week study calendar to take control of your study routine and pass your state board exam with confidence and **THREE-MONTHS ONLINE ACCESS!**

INSTANT ANALYTIC REPORTING

You'll have access to our extensive dashboard with reporting tools, comprehensive analytics, with daily reporting to keep you on track. Your progress reports will demonstrate your readiness for NCLEX!



FULLY MOBILE RESPONSIVE

- · Phone
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- · Tablet
- · Smart
- · Laptop
- · Television

BLACK FRIDAY 2020



SAVE \$100 OFF

NCLEX VIRTUAL TRAINING

SCAN CODE OR VISIT REMARNURSE.COM/





Free Bonus with fist 500 orders!

Get Three-Month Unlimited Access Pay only \$149 during Sale!!!!

NCLEX VIRTUAL TRAINER

I created the ReMar NCLEX Virtual Trainer in part to give you full control over your NCLEX preparation and training experience!

With this **FREE NCLEX Review class,** brought to you by **ReMar NCLEX Virtual Trainer for RN & LPN,** I want you to see how we break down core content and build your confidence in the testing process. This is your best opportunity to pass NCLEX even if you've failed before. This is the content that you need!

The NCLEX Virtual Trainer (VT) has the best NCLEX CONTENT, QUESTIONS, and ACCOUNTABILITY!

It's highly recommend and used by thousands of ReMar Nurses to pass NCLEX every single month!

Sincerely with Love,

Your Favorite NCLEX Instructor, Regina M. Callion MSN, RN



ORDER HERE





YOU'VE COME TOO FAR TO LEAVE WITHOUT YOUR LICENSE!

The Virtual Trainer is the absolute best NCLEX review. Order your ReMar NCLEX Virtual Trainer now with 3-months online access and two NCLEX Workbooks when you order from ReMarNurse.com

BLACK FRIDAY NCLEX REVIEW TOPICS

www.ReMarNurse.com

Class begins Friday, November 27th at 11:00 am EST - 3:00 pm EST on Facebook & YouTube Live!

- Becoming a ReMar Nurse!
- Diabetes Mellitus for NCLEX!
- Ear Spotlight for NCLEX!
- Passing NCLEX with Content!
- EKG Overview for NCLEX!
- Management of Care Prioritization!
- TIPS to Master NCLEX!
- NCLEX Pre -Test Answers!
- How to use NCLEX-VT!
- November 2020 NCLEX Testimonials
- Week One Sample Calendar!
- **FREE 3-DAY VT TRIAL (Pg. 25 48)**
- Being Mental Prepared to Test!



I. Diabetes mellitus is a me	etabolism disorder in are	
Normal blood sugar valu	ıe:	
Type Types of Diabetes	Mellitus:	
	Diabetes Type 1	Diabetes Type 2
Age?		
Is the body producing insulin?		
Insulin dependent?		
Ketone Production?		
Treatment?		

2.	Signs/Symptoms A.
	B. C.
3.	Glycosylated Hemoglobin (A1c)- blood sugar control over months it should be less than percent.
	should be less than percent.
Г	
	NCLEX PRACTICE QUESTION:
_	
	A 16-year-old young woman is admitted to the critical care unit with severe hyperglycemia caused by new-onset type 1 diabetes mellitus. The nurse notes a sweet-smelling odor on the patient's exhaled breath. This is a result of:
	 ketoacidosis hunger decreased serum osmolality increased protein metabolism
-	Patient Education for NCLEX:
	Exercise:
	Sick Times:



Types	Generic Name	Onset	Peak	Duration
Rapid Acting	Novolog Humalog			
Short Acting "clear"	Novolin R			
Intermediate "Cloudy"	NPH			
Long Acting	Glargine			



Meniere's Disease: A dis	sease that occurs in the	ear resulting in
too much endolymphatic fluid.		
The cause of Meniere's is unknown	'n.	
3 main symptoms:		
•		
•		
·		
Pt may also complain of: Nausea	& Vomiting	
Best position during a Meniere's a	attack:	
Diagnosis: Hearing Test, MRI, EN	I G	
Diet:		
Treatment:		
Medical-		
Surgical- Labyrinthectomy		
NCLEX Prep:		
 Teach client not to 	·	



Depolarization/Repolarization? Start with _______ -means a resting state, no electrical activity. Starts in the ______ located in ______. _____ means-movement of ions across the cell membrane. Ions move through channels: 1. 2. 3. Movement of ions across cell membrane causes _____ -means return of the ions to their previous resting state. During repolarization _____ are relaxed. P wave PR Interval= 0.12atrial repolarization and relaxation & simultaneous ventricular depolarization and contraction **QRS** QRS Complex= T wave final state of repolarization of the ventricles source unknown usually follows T wave U wave



Normal sinus rhythm=

1. What is the rate?	
2. What is the rhythm?	
3. Is there a P wave before each QRS?	
4. Are the P waves upright and similar?	
5. What is the length of the PR interval?	
6. What is the length of the QRS	0.06-0.12
complexes	

Rules: Heart rate=_____

Can you circle each p wave on this ECG strip?

Can you circle each QRS complex on this ECG strip?



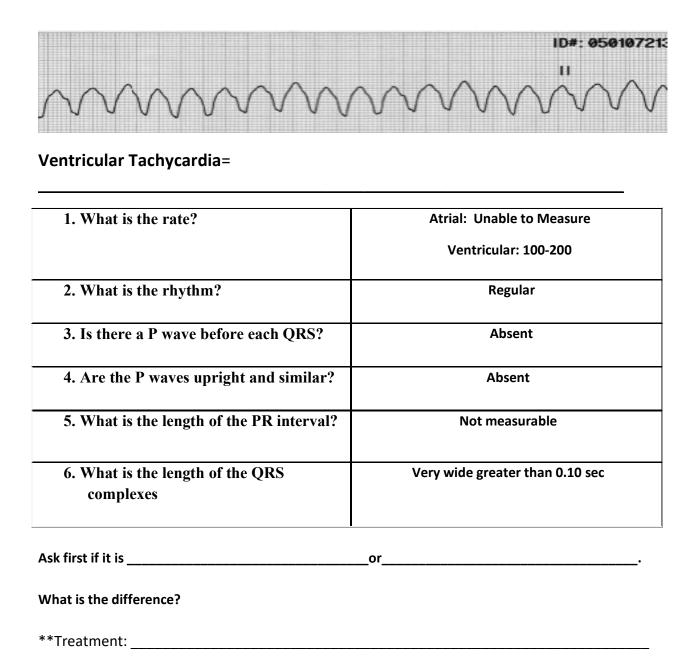




Atrial Flutter= <u>Saw-tooth pattern</u>

1. What is the rate?	Variable
2. What is the rhythm?	Irregular
3. Is there a P wave before each QRS?	Normal P waves are absent
4. Are the P waves upright and similar?	SAW tooth pattern
5. What is the length of the PR interval?	Unable to measure
6. What is the length of the QRS complexes?	0.06-0.12





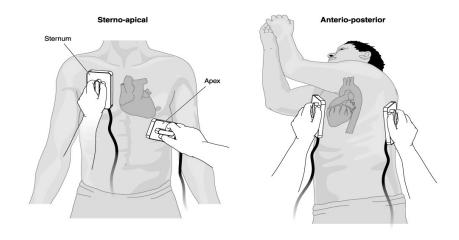
**Never pick as a treatment for ventricular tachycardia because it



What is the difference?

1. Defibrillation	
2. Cardioversion	

Defibrillation/ Cardioversion



Written CONSENT:



1.	A nurse is reporting for duty in the emergency room and receives report
	on 4 patients. Based on the report who should she see first?

- 1. An 8-year-old client reporting asthma with no signs of respiratory distress who was given hydromorphone 1 mg IV for acute pain.
- 2. A 38-year-old client with a severe nosebleed who states his lower back hurts when he lies completely flat in the bed.
- 3. An 83-year-old client with type 2 diabetes mellitus who has a blood glucose level of 325 mg/dL.
- 4. A 59-years-old client with a left leg DVT on a heparin drip who complains of pain when walking.

Do Not Get Distracted with:	1.2.
Only Think About What	is Happening:
Look for the Patient Who is Going To:	



- 1. Who should the nurse see first?
 - A. A 7-month-old female with bulging fontanels crying loudly.
 - B. A 3-years-old male with a temperature of 38.8 Celsius.
 - C. A 10-years-old female 48 hours after a tonsillectomy who is now confused.
 - D. A 9-years-old complaining of stomach pain.
- 2. A client comes to the emergency department immediately after experiencing numbness of the face and an inability to speak, and paralysis the symptoms disappear and the client states they no longer want to be seen. The nurse should include which of the following statements in her client education?
 - A. The client has probably experienced a transient ischemic attack (TIA), which is a sign of progressive cerebral vascular disease.
 - B. The client is not free to leave when the symptoms reflect cerebral involvement.
 - C. The client has experienced the effects of a thrombus and needs to be treated within 24 hours.
 - D. The client does not have any cardiac issues as the symptoms resolved on their own.
- 3. A client with a history of transient ischemic attacks would be prescribed which of the following medications?
 - A. Furosemide
 - B. Amiodarone
 - C. Aspirin
 - D. Metoclopramide
- 4. Which of the following statements indicate a client is being neglected? Select all that apply:
 - A. My son takes me to the bank to deposit my money.
 - B. My son forgets to give me my insulin with meals.
 - C. My son cooks food for me that I don't always enjoy.
 - D. My son does not take me to see my physical therapist.
 - E. I often forget when my son comes to visit me.
 - 5. A nurse is caring for Mr. Read who is prepared for surgery. When reviewing the chart, the nurse finds no consent form. What is the initial action to take?
 - A. Stop the surgery process
 - B. Have the client sign a consent form
 - C. Contact the physician
 - D. Contact the nurse manager

- 6. A nurse is caring for a client diagnosed with a deep vein thrombosis of the right leg and swollen toes. What is the initial action of the nurse?
 - A. Notify the physician
 - B. Check client's oxygen saturation
 - C. Assess the distal pulses
 - D. Apply ice to the right leg
- 7. Which of the following clients is at risk for a sexually transmitted disease? Select all that apply.
 - A. A 20-yr. old client who is not sexually active but in a long-term relationship.
 - B. An 18-yr. old client who is sexually active but has one partner and uses a condom.
 - C. A 22-yr. old client in a long-term relationship, sexually active, addicted to heroin, and uses a condom.
 - D. A 21-yr. old client with multiple sexual partners and uses a condom.
 - E. A 20-yr. old client with multiple sexual partners and is on the birth control pill.

F.

- 8. The primary way Hepatitis A is spread is by which route?
 - A. During sexual intercourse
 - B. By contact with infected body secretions.
 - C. Through fecal contamination of food or water.
 - D. Through kissing that involves contact with mucous membranes.
- 9. A nurse receives a bag of 10% Dextrose from the pharmacy but the bag is not labelled. What is the initial action of the nurse?
 - A. Contact the pharmacy to let them know the error
 - B. Hang the bag and administer to the client
 - C. Send the bag back to the pharmacy
 - D. Contact the unit supervisor
 - 10. Which of the following clients should the nurse see first?
 - A. A 10-years- old female complaining of asthma but no signs of respiratory distress.
 - B. A 15-years-old male with a laceration to the chest.
 - C. A 13-years-old female complaining of body aches, fever, chills.
 - D. A 9-years-old male with diarrhea.
 - 11. A nurse administers Zithromax IV to a client with nausea. The nurse was ordered to administer Zofran IV to this client. Which initial action should the nurse take?
 - A. Notify the primary care provider.
 - B. Notify the unit supervisor.
 - C. Document in the medical record.
 - D. Draw a single red line through the documentation, initial and date the error.



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1			
2			
3			
4			
<u>5</u>			
<u>6</u>			

NCLEX TESTING DAY TIPS!

- 1) Know the location (parking, room, etc.)
- 2) Pack everything you need the night before
- 3) Do not study the night before
- 4) Eat breakfast and dress in layers
- 5) Do not go in expecting to stop at minimum questions.



BLACK FRIDAY SPECIAL DEAL \$100.00 OFF CURRENT VT SALE PRICE, PAY JUST \$149!!!

(The First 500 VT orders receive will First Shift - How to Dominate Your First Two Years of Nursing)

How did you feel going through the lessons today? Did you learn something new today or did you find the content easier to understand then before?

This Black Friday, today, I'd like to help encourage you on your journey with a one-time special offer of \$100 off the current VT sales price to help you get the full review!

Your Virtual Trainer account subscription comes with 3-months of online access, physical student workbook, Quick Facts for NCLEX, student calendar, and of course me as your #1 NCLEX instructor!

How to Use Your NCLEX Virtual Trainer!

- Watch NCLEX-VT Lectures daily
- Read DVD NCLEX Student Workbook daily
- Read Quick Facts for NCLEX daily
- Complete Homework assignments daily
- Follow your Six-Week Study Calendar
- Pass NCLEX and get your nursing license!







Limit Bonus Item!

YOU CAN. YOU WILL. YOU MUST. PASS NCLEX!

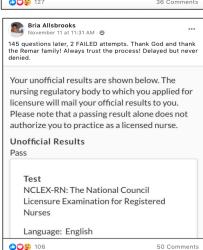
ORDER NOW AT REMARNURSE.COM



Is the ReMar NCLEX VIRTUAL TRAINER WORTH IT?

THESE NURSES SHARED THEIR TESTIMONIAL ALL FROM THIS NOVEMBER 2020 BECAUSE WITH GOD IT'S POSSIBLE!







received my Remar book today for Hesi.

On to my next journey!!!
BSN I'm coming for ya 6 6 6 6

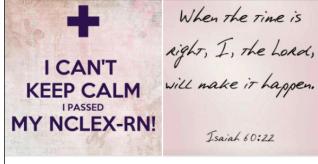
LOADING RN



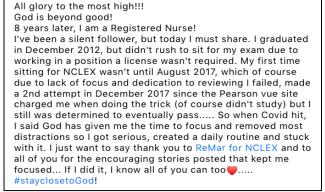
Just want to thank everybody in this group for all the positive advice and help you gave. For all the practice questions you guys posted. It helped me a lot. I also want to thank the ReMar team. I know I passed my exam because of VT, qbank, and especially GOD. Don't ever give up on your dream of becoming a nurse. To God Be The Glory!

November 4 at 10:48 AM - @

Tiffany Williams November 12 at 11:24 AM · 🕾



○○ 142 40 Comments





Rashanne Satchell

November 11 at 11:32 AM - 😁

It's official! I am a Remar Nurse, RN! After failing more than once, divorce, becoming a single parent and COVID I passed!





Hey guys, I have been studying with Remar for the last 6 weeks online and also using the Quick Facts. I sat for my board on 11-19-20... I passed my NClex! I would like to thank Mrs. Regina! I think it was one the last lecture on the Nclex Tips with VT, where you gave me so much courage and inspiration to pass this test! You told me that I was in control and I was going into the test for a license and I should leave with one! That's exactly what I did. I never stop believing that I can, I will, I must pass Nclex! Thank you so much! Best Nclex Prep hands down !!

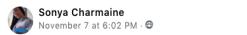


D You and 200 others

65 Comments



I have been out of school for 7 years and I finally passed my boards!! Thanks ReMar!! It really helped me out a lot!!



On August 22nd 2020 I became a REMAR NURSE! ** *** Since passing my NCLEX I've been super busy doing what I LOVE! I was a REPEAT test taker but ALL PRAISES TO THE MOST HIGH & Regina & Mark, I accomplished one of my many goals! The program truly works if you follow Regina's plan! IF I CAN DO IT ANYONE CAN! #NURSESONYA 🧣 💯 💯 💯





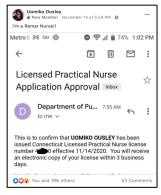
I Finally did it 🙏

I did the VT in 3 weeks and then got the QB (75 questions a day for 2 weeks) and I repeated most of the VT again while doing chores (mainly the ones in the beginning that I've forgotten about) the last 3 days before the exam I focused more on quickfacts. On my way to the testing center I listened to the Sundays service (a great message for me) and I felt at ease, I prayed for those sitting in the car about to test as well. Once I started walking into the building I started to get super anxious and shaky, I knew it was my last chance through FL to pass Nclex. I rushed to the bathroom and dropped onto my knees and prayed for God to take away this anxiety. I also prayed that he would create this exam for me, that it didn't have to be easy and he can take me to the max questions, but to make it for my knowledge. I instantly felt a relief. When I took the Nclex every question that I got I knew the answer, but I didn't ask the lord to make it easy, so he hit me with about 60-70 SATAs 😵

But Knowing my content made me Confident and lowered my anxiety. I got max questions again!

For those who have failed i know the horrible feeling....but after my depression phase, I realized that I wasn't being punished from my fails. I realized God took me through the long route because he wanted me to fix myself, fix all my problems, become closer to him and he wanted me to become more knowledgeable, so that I don't look foolish as a new nurse. I became so much closer to God and even listened to positive church messages even while doing questions.

I'm praying for you future Nurses . I know u will make it. God will bless you not at your time, but at his time. ~Remar Nurse







NCLEX RN Virtual Trainer Study Calendar

WEEK ONE

	Monday			Tuesday	
	TOPIC/ LOCATION	DONE		TOPIC/LOCATION	DONE
8:00	Your study books will be arriving soon!		8:00	Log into the Virtual Training Center	
	Now is the time to get comfortable in VT. Log-in.			Begin "Before the Books Arrive" Activities	
	Now locate the following sections and explore.			Take notes on downloadable worksheets.	
	Locate the following sections:		9:00	End Study Session	
	Training center- My Notes- File Vault-My Profile-			Mark this task as done	
	Calendar-My Report Card-My Usage Report			Take a Study Break for now.	
	Once you have completed this task make a		12:00	Complete all "Before the Books Arrive" Activities	
	check mark in the done column of this			Take notes on information learned	
	$document \rightarrow$			Mark this task as done \rightarrow	
	Wednesday			Thursday	
	TOPIC/LOCATION	DONE		TOPIC/LOCATION	DONE
8:00	R		8:00	Enter the VT Center & Open "Student Workbook"	
9:00	E		8:05	Watch Pregnancy Overview Lecture/ Take Notes	
10:00	S			Watch Advanced Clinical Topic:	
11:00	Т			Electronic Fetal Heart Monitoring	
			9:00	Watch Labor & Delivery Overview	
	*Think about a potential test date 6 weeks from			0 1 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
				Complete Clinical Judgement Activities 1 & 2	
			9:20	Open the "Quick Facts for NCLEX" book Complete Pretest, Planner Page #1, & pages 1-10	
			9:20	Open the "Quick Facts for NCLEX" book	es in
				Open the "Quick Facts for NCLEX" book Complete Pretest, Planner Page #1, & pages 1-10 Study Allergy, Analgesics, Antibiotics, Anticoagulant	es in
	Friday			Open the "Quick Facts for NCLEX" book Complete Pretest, Planner Page #1, & pages 1-10 Study Allergy, Analgesics, Antibiotics, Anticoagulant the pharmacology section in back of the book.	s in
	Friday TOPIC/LOCATION	DONE		Open the "Quick Facts for NCLEX" book Complete Pretest, Planner Page #1, & pages 1-10 Study Allergy, Analgesics, Antibiotics, Anticoagulant the pharmacology section in back of the book. End study session and mark task as done.	os in
8:00	•	DONE	11:00	Open the "Quick Facts for NCLEX" book Complete Pretest, Planner Page #1, & pages 1-10 Study Allergy, Analgesics, Antibiotics, Anticoagulant the pharmacology section in back of the book. End study session and mark task as done. Saturday/Sunday	
8:00 8:20	TOPIC/LOCATION	DONE	11:00	Open the "Quick Facts for NCLEX" book Complete Pretest, Planner Page #1, & pages 1-10 Study Allergy, Analgesics, Antibiotics, Anticoagulant the pharmacology section in back of the book. End study session and mark task as done. Saturday/Sunday TOPIC/LOCATION	
	TOPIC/LOCATION Watch Normal & High Risk Newborn	DONE	11:00	Open the "Quick Facts for NCLEX" book Complete Pretest, Planner Page #1, & pages 1-10 Study Allergy, Analgesics, Antibiotics, Anticoagulant the pharmacology section in back of the book. End study session and mark task as done. Saturday/Sunday TOPIC/LOCATION	

9:40 Complete Maternal & Child Health Progress Exam

Study the Pharmacology Section Anticonvulsants, Antidotes, Antineoplastics & Anti-Parkinsons

10:00 Open the "Quick Facts for NCLEX" book

11:00 End study session and mark as done.

*Study times should be changed to fit your daily

life.





R | Still not convinced? Take the free trial!

FREE 3-DAY TRIAL



The following content inside of this workbook can only be accessed by creating a NCLEX Virtual Trainer FREE TRIAL Account. You can create your free account by using your smart phone camera to scan the QR Code [the square above] or by visiting (ReMarNurse.com/FREENCLEX) and using the link to create your trial account

You will need a valid credit card to create your account. You will not be charged before, during, or after your trial. If you love the content you can upgrade to the full program with your discounted link from inside of your FREE NCLEX Review Trial.

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DIABETES INSIPIDUS VS. SYNDROME OF INAPPROPRIATE ANTIDIURETIC
HORMONE SECRETION
POSITIONS
DISASTER MANAGEMENT
CLINICAL JUDGEMENT ACTIVITY #10101

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Blood Gas Interpretation Numbers

ReMar Review

рН	HCO₃
Below 7.35=	
Above 7.45 =	

THINK R.O.M.E.!

Respiratory Opposite Metabolic Equal

A.) How would you interpret this blood gas? pH 7.53 PaCO2 33 HCO3 33 PaO2 72

pH 7.53 HCO₃ 33 = ______

B.) How would you interpret this blood gas? pH 7.10 PaCO₂ 24 HCO₃ 45 BE 3

pH 7.10 _____ HCO₃ 45 _____ = ____

C.) How would you interpret this blood gas? pH 7.32 $PaCO_2$ 35 HCO_3 17 PaO_2 89

pH 7.32 _____ HCO₃ 17____ = ____

Blood Gas Interpretation by Diagnosis

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1st question: Is this a breathing problem?

Yes	No
R	М
Respiratory Alkalosis=	Metabolic Alkalosis-
Respiratory Acidosis=	Metabolic Acidosis=

Critically Think:

- 1) Which blood gas value would you expect to see in a client with a pulmonary embolus
- 2) Which blood gas value would you expect to see in a client who has diabetes mellitus type 2?
- 3) Which blood gas value would you expect to see in a client who has chronic obstructive pulmonary disorder?
- 4) Which blood gas value would you expect to see in a client who has a pancreatic fistula and diarrhea?
- 5) Which blood gas value would you expect to see in a client 26 weeks pregnant with hyperemesis gravidarum?

^{*}For NCLEX you do not have to worry about compensated or partially compensated blood gas interpretation.

CHEST TUBES

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A.) Chest tube is a	drain that allow fluids or air to
escape the pleural space	
Remember normal breathing wo	orks on
5 ,	humans inhale it is a result of the diaphragm contracting and pout. This causes the lungs to expand. The pressure inside the are that sucks the air in.
Chest tubes are needed whenev	ver thein the
pleural space is disrupted.	



Tension pneumothorax	is in between	
and	which	
can be caused by trauma, surgery,	falls etc. Outside air creates a one way	
valve inside the lung.		

CHEST TUBES ReMarNurse.com

Classic signs of a tension pneumothorax:

Trachea deviation	Yes

This is a medical emergency, client needs treatment right away!

Treatment of tension pneumothorax:

CHEST TUBES

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B.) Chest tube Setup: All chest tube systems have these three chambers

Collection chamber	Water Seal	Suction Control
Purpose is to:	Purpose is to:	Amount of suction applied to the client.
Notify primary healthcare provider 1.	Allow a to exist from pleural space during air to enter the pleural space	Both water seal and suction control have water in them.
2.	during 	Bubbling/Tidaling
	Bubbling/Tidaling	Continuous-
	Continuous Intermittent	Intermittent-

CHEST TUBES

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C.) Care of a client with a chest tube			
1) Assess client for:			
2) Chest tubes should be placed	chest level.		
3) Do not milk or strip chest tube without a doctor's order.			
4) Daily x-rays are needed to check	·		
5) Clients will have andressing at the ins	sertion site.		
6) Never clamp a chest tube without a M.D. order.			
D.) Common NCLEX troubleshooting			
1. Noticed the water seal is broken			
A. Place the distal end of the tube in 2 cm of sterile water.			

2. Pulled the chest tube out

A. Use a		·
B. Cover the o	ppening with an	·
C	the dressing on	sides only so that you can allow
Critical Think:		
What is the di	ifference between a regular s	sterile dressing & occlusive dressing?
Complains deep breath	of pain won't comply-medic	ated and have the client to cough and
A.		
В.		
For NCLEX you	u have at the bedside of a cli	ent with a chest tube.
1.		
2.		
3.		

Critically Think! ReMar Nurses

- 1. What kind of lung sounds would the nurse expect to hear with a client who needs a chest tube? Select all that apply.
- 1. Wheezes
- 2. Crackles
- 3. Stridor
- 4. Diminished
- 5. Pleural friction rub
- 2. When caring for a client with a chest tube what should the nurse do to evaluate the effectiveness of the chest tube?
- 1. Empty chest tube drainage every shift
- 2. Mark chest tube drainage every shift
- 3. Clamp the chest tube when transferring the patient
- 4. Add water to the water seal chamber when she notices it is low
- 3. What should be done once the fluid in the water seal chamber no longer fluctuates with inspiration or expiration?
- 4. After a client has his chest tube removed by the healthcare provider which dressing should the nurse have ready to place over the incision site?
- 1. Transparent film dressing
- 2. Xeroform petroleum dressing
- 3. Seaweed healing dressing
- 4. Sterile cotton dressing

Vent Alarms

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ReMar Tip about Ventilator Alarms	High alarm sound =
	Caused by: mucous, blockage, biting
	Low alarm sound =
	Caused by:
If you don't know what to do	Disconnect the client and manually
then:	resuscitate them.

H.O.L.D. Help

Н	High Alarm
0	Obstruction
L	Low Alarm
D	Disconnection

Congestive Heart Failure

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When the	_cannot pump enough blood	and nutrients to mee
the needs of the organs.		
Big Problem:		
Side		Side
L think	R think	
Signs:	Signs:	
Most clients will have failure _		

Congestive Heart Failure

В.) Di	agn	osti	c T	ests
----	------	-----	------	-----	------

- C.) Medications
 - 1.
 - 2.
 - 3.
 - 4.
- D.) Nursing Interventions

Congestive Heart Failure Practice Questions

- 1. Mr. Green is scheduled to receive furosemide 60 mg IV BID for a diagnosis of congestive heart failure. The medication will have which of the following effects? Select all that apply.
 - 1. Decrease blood pressure
 - 2. Increase urine output
 - 3. Increase blood pressure
 - 4. Decrease urine output
 - 5. Decrease pain
 - 6. Increase edema
- 2. A 62-years-old client presents with dyspnea and blue colored nails and lips. The client has a suspected history of congestive heart failure and is admitted to emergency room. The client has not been compliant with his medication regimen and states he has not taken his hydrochlorothiazide for 4 days. The nurse should anticipate a diagnosis of which of the following?
 - 1. Pneumonia
 - 2. Pulmonary edema
 - 3. Pneumothorax
 - 4. Atelectasis
- 3. You are teaching the parents of a child with congestive heart failure about fluid intake. Which statement indicates understanding of monitoring fluid retention?
 - 1. I will calculate all of the fluids that my child drinks as this is the best method to monitor fluid retention.
 - 2. I will weigh each diaper daily as this is the best way to monitor fluid retention.
 - 3. I will weigh the child each day at the same time as this is the best way to determine fluid retention.
 - 4. I will listen to the lungs with my stethoscope as this is the best way to monitor fluid retention.
- 4. A client comes into the wellness clinic after being diagnosed with congestive heart failure. She complains of becoming tired after only very little activity. Which activity suggestion would the nurse give to preserve energy and decrease oxygen demands?
 - 1. Setting a specific time during the day and accomplishing all daily tasks at one time.
 - 2. Eating small frequent meals throughout the day.
 - 3. Removing oxygen therapy during rest to build up a tolerance without it.
 - 4. Exercise shortly after waking up in the morning when energy levels are highest

Diagnostic Procedures

1. Lumbar puncture				
Position:				
Client Teaching:				
2	non-invasive test that uses to			
create a detailed picture.				
Position-				
Client Teaching:				
J				
3.				
J.				
Position				
Client teaching:				

4. Esophagogastroduodenoscopy
Position-
Client Teaching:
5.
Position -
Client teaching -
Before exam: Do not take anticoagulants and herbal medications.
After exam: What is the most serious complication after a liver biopsy?

Diagnostic Procedures

6.
Position -
Client Teaching:
Cheffe readming.
7. Angiogram or Arteriogram (RN only topic)
Position
Client education
Before Exam:
Medications to hold: Metformin, anticoagulants
After the exam:

1. Assess the:
2. Bedrest for to hours.
*Note: Some references say hold Metformin 24-48 hours before diagnostic study requiring IV iodine contrast media.

LOWERING CHOLESTEROL

The goal of therapy is to lower		
and		
Why does cholesterol matter?		
Values to know:		
LDL (Bad) =		
HDL (Good) =		
Total Cholesterol =		
Triglycerides =		
Examples of Dyslipidemias		
Simvastatin, Rosuvastatin, Atorvastatin		
Drug name ends in: Statin		
Side effects of Statins:		
What about the B3 vitamin <i>Niacin</i> ?		
Side effects of Niacin:		

Avoid flushed face by giving aspirin 30 minutes before treatment.
When your client is on a dyslipidemia assess them for?
What are the three types?
Which organ is damaged due to free-flowing muscle fibers?
How will the muscle tissue be excreted?
How to treat:
NCLEX teaching about lowering cholesterol:
Goal of Low Cholesterol diet:
Avoid:
Dairy foods such as cheese, butter, ice cream, egg yolk
Foods to include: avocados- which help raise HDL and lower LDL

Physiological Adaptation Homework Exam

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You will complete this exam in the book and then check your answers inside of your NCLEX Virtual Trainer (VT) account. When you answer these same questions in the VT the answers will be marked correct or incorrect. You must achieve a 95% to move on. You are able to take every exam again if needed.

- 1. A client is experiencing hyperventilation while receiving treatment on a mechanical ventilator. The nurse should monitor the client for:
- A. Hypercapnia
- B. Respiratory acidosis
- C. Respiratory alkalosis
- D. Decreased respiratory rate
- 2. Which position would provide the greatest respiratory capacity during an episode of dyspnea?
- A. Sims' position
- B. Supine position
- C. Orthopneic position
- D. Semi-Fowler's position
- 3. A nurse is caring for a client diagnosed with acute pleuritis. Which of the following is the most important to include in the plan of care?
- A. Administer pain medication frequently
- B. Assess for signs of pneumonia
- C. Administer medications to reduce cough
- D. Restrict fluids to reduce pulmonary edema
- 4. A client has just returned from a bronchoscopy. Which of the following is the best way to assess the return of the gag reflex?
- A. Inserting a tongue depressor to the back of the throat.
- B. Asking the client to say 4 or 5 short words.
- C. Monitoring the client while swallowing 5 ml of water.
- D. Asking the client to cough and deep breathe.
- 5. A client is being discharged from the hospital to complete his tuberculosis treatment at the outpatient clinic. Which of the following diets should the nurse instruct the client to maintain?
- A. A liquid diet with protein supplements
- B. A low calorie, low protein diet
- C. A high calorie, low protein, high carbohydrates diet
- D. A high calorie diet with frequent small meals
- E. A low calorie, low dairy and low carbohydrates diet

- 6. A nurse is caring for a client 10 hours following a left pneumonectomy. The nurse should place the client in which position?
- A. Left side-lying or supine
- B. Right or left side-lying position
- C. High Fowler's or right side-lying
- D. Right side-lying or prone
- 7. A client with lung cell cancer is scheduled for biopsy. Which of the following should be included in the client education?
- A. Take your aspirin as normal.
- B. Eat nothing after midnight.
- C. You will require a chest tube to assist with the procedure.
- D. An iodine contrast may be used to visualize the location of the cancer.
- 8. A nurse is caring for a client scheduled for a thoracentesis. The nurse knows:
- A. A thoracentesis may increase respiratory distress immediately after the procedure.
- B. The thoracentesis is used to remove fluid and blood from the thoracic cavity.
- C. The thoracentesis may negatively affect the client's blood pressure.
- D. The thoracentesis is used to increase the circulating fluid volume.
- 9. A nurse is working in the post-operative unit. Which is the most important action to ensure adequate ventilation?
- A. Administer oxygen while the client is sedated.
- B. Assess the client's lung sounds per doctor's order.
- C. Obtain a pulse oximetry reading if oxygen saturation is less than 95%.
- D. Place the client in the lateral position with the neck extended.
- 10. A client is caring for a client with a chest tube. During ambulation, the client's chest tube becomes separated from the drainage system? Which of the following is the best action by the nurse?
- A. Clamp the chest tube.
- B. Place the client in a high Fowler's position.
- C. Reconnect the chest tube to the drainage system.
- D. Prepare the client for reintubation.

Physiological Adaptation Progress Exam

- 1. A client who has a newly placed percutaneous endoscopic gastrotomy (PEG) tube is requesting a bed bath. Which instruction should be given to unlicensed assistive personnel (UAP)?
- A. Monitor the client for residuals over 500 mL.
- B. Report any redness around the tube insertion site.
- C. Evaluate the client's response to pain medication during the bath.
- D. Check the client's blood glucose level.
- 2. A nurse is caring for a 4-year-old with a diagnosis of congestive heart failure. Which of the following signs would indicate a decrease in cardiac output?
- A. Fever
- B. Increased urine output
- C. Hypertension
- D. Delayed capillary refill
- 3. The school nurse has received a report that a child in the third grade has been diagnosed with cardiac disease. Which of the following symptoms would support a diagnosis of congestive heart failure?
- A. Abdominal pain
- B. Inability to run short distances
- C. Muscle tremors
- D. Dilated pupils
- 4. A twenty-month-old child with congestive heart failure is scheduled to receive digoxin. The nurse should hold the medication if the apical pulse is:
- A. Greater than 60 bpm
- B. Less than 50 bpm
- C. Greater than 100 bpm
- D. Less than 100 bpm
- 5. A nurse is caring for an infant with a heart defect that has a result of left to right shunting. The nurse should expect which diagnosis?
- A. Cardiopulmonary obstructive disease
- B. Tetralogy of Fallot
- C. Congestive heart failure
- D. Atrial septal defect
- 6. A client presents to the emergency department with acute chest trauma and respiratory distress.

Which assessments are of the highest priority?

- A. Respiratory ventilation status and presence of pulses
- B. Blood pressure and the presence of pulses
- C. Level of consciousness and respiratory rate
- D. Respiratory rate and blood pressure
- 7. A client with a misplaced chest tube requires mechanical ventilation. When suctioning the endotracheal tube, the nurse should:
- A. Hyperoxygenate the client with 100% oxygen before and after suctioning
- B. Suction up to four times only during the procedure to expel mucus
- C. Use short thrusting motions to enter the sensitive respiratory passage
- D. Apply suction while gently inserting the catheter
- 8. The nurse is caring for a client in respiratory distress. The client has early indications of respiratory acidosis, which include:
- A. Bradypnea
- B. Restlessness
- C. Nausea
- D. Clubbing of the fingers
- 9. When caring for a client with a chest tube, the nurse observes some skin elevation around the insertion site. When the area is palpated, the nurse hears crackles. How should the nurse document this finding?
- A. Rales
- B. Airway blockage
- C. Pitting edema
- D. Crepitus
- 10. A female client with lung cancer is scheduled for a biopsy. Which of the following should the nurse include in the client education?
- A. This procedure is different from percutaneous needle aspiration.
- B. You will need to remain NPO after midnight.
- C. There will be fluid removed from your abdominal cavity during the procedure.
- D. The procedure will allow the physician to visualize the lungs.

IT'S TIME TO UPGRADE YOU!

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If you've taken the FREE Trial then you know how effective it is to study content with me inside the NCLEX VT! I don't know what you program you may have used in the past but the truth is - it's time for an upgrade!

Every week hundreds of nurses are pass NCLEX with ReMar and my goal is to make sure you have everything you need to pass boards and get your nursing license! Right now, I have a \$100 off the current sales price to give you full VT access, study calendar, and send out your physical workbook!



Use this scan code to upgrade your VT Trial account to the full version of the RN NCLEX Virtual Trainer. If you don't have a trial account visit ReMarNurse.com to purchase your VT during Black Friday to claim your bonus copy of First Shift with your VT order.



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NCLEX Mental Preparedness & Grief Form

Regina M. Callion MSN, RN



If you are experiencing any anxiety in some way and you need to manage it in order

to move forward, let me just say, you are normal!

There is no one who doesn't feel anxious at some point in their life, especially

perusing something important and meaningful as your nursing career.

Remember you've come too far to leave without you license. I'm so excited to be

with you on this journey and I can't wait to see your testimony on the other side of

NCLEX. ReMar Nurses trust the process; put Faith-Over-Fear, and move forward.

Finally, if you are not familiar with ReMar Review and the ReMar Nurse Family take

some time to do your research! ReMar is the best NCLEX review for core-content

with literally thousands of reviews and testimonials from nurses just like you that

found the right help and never gave up!

If you have any questions about this personal assessment don't hesitate to email

me directly at Support@ReMarReview.com, and I'll be glad to help walk you

through the process of passing NCLEX.

Complete the form on the following page to help process your mental

preparedness or grief toward NCLEX and let's move past this together!

Directions: You are doing this form because you have failed NCLEX or have a general anxiety

or doubts about studying for NCLEX.

NCLEX VIRTUAL TRAINER WORKBOOK PREVIEW LEARN MORE @ REMARNURSE.COM

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If this is correct, you need a healing process. It's time to begin the process of healing by allowing yourself to be open about where you are now and moving past your past.

Answer each question open and honestly and allow the answers to provide insight into your steps toward success. **This is for your eyes only!**

Did you give (or) are you giving NCLEX preparation your all?

How do you know?

If you could go back what things would you do exactly the same?

If you could go back what things would you do differently?

i

I failed (or) may be at risk of failing because? Select all that apply

- I needed to study more
- I had external pressures affecting me (i.e. job, family, deaths,)
- I was overly anxious
- I was unprepared
- I over thought the questions
- I was not confident in my abilities
- I was over confident in my abilities
- I had too many different study resources

If you selected any of the above choices which ones were out of your control? Which ones could you have controlled?

As each question on your NCLEX exam went on how did you feel?

Do you have difficulty talking about the process (or) experience to others?

Have you gone through any of the following emotions? What is it like?

(Guilt - Shame - Defeat - Mistrust - Disconnected – Helplessness)

*If you are experiencing guilt, shame, defeat, mistrust etc. recognize that these are all normal responses however you must choose to identify those thoughts and replace them with a more balanced picture of what actually happened in order to move forward.

What do you feel you need moving forward?

What are your strengths when it comes to learning?

What are your strengths when it comes to overcoming adversity?

Are you willing to give yourself the best opportunity to pass this exam?

What guarantee are you willing to make to yourself?

Before moving forward - You may need some time to reflect on your personal assessment from the previous page. If so, please take the time to do so before coming back to this section!

If you feel the need to do so please feel free to shoot me a quick email to Support@ReMarReview.com about your journey, where you are, and let's see what's best.