#### WELCOME TO THE

# LOVE YOUR CONTENT EVENT

A REMAR REVIEW NCLEX ADVANCED STUDY SESSION

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# February 13th & 14th & 8PM EST NCLEX VIRTUAL TRAINER

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NCLEX RN Virtual Trainer

SCAN ME



### A MESSAGE FROM YOUR INSTRUCTOR

**Welcome to the ReMar Nurse NCLEX Virtual Trainer** - My name is Regina M. Callion MSN, RN and I will be your instructor to help you complete this journey of passing NCLEX. I started my nursing career very early, at the age of 16! I was given the challenge to take care of my grandparents.

My grandmother – she was a double amputee she lost her legs and vision to diabetes. My grandfather had a stroke and couldn't talk, swallow or walk. Some might think I would feel helpless in this new environment but I was empowered because of a home health nurse named Linda. She taught me how to practice bedside nursing in a simple straight to the point way. She turned my challenge into an opportunity.

Nurse Linda wasn't afraid of my age or lack of experience. She believed in me. As we begin our journey together I want you to see the challenge of passing NCLEX as the opportunity of your lifetime.

#### I'M GOING TO MAKE YOU A BOLD PROMISE.

Your success in nursing will be determined by your ability to think, plan, decide, and act. The actions you take will be based upon your core content knowledge of the fundamental practice of nursing.

These same skills are necessary as you prepare to take NCLEX<sup>®</sup>. The stronger you are with the fundamentals, the faster you will learn how to critically think and make the right decisions.

I have personally beaten the odds and as a ReMar Nurse I expect you to do the same.

I've helped thousands of nurses pass NCLEX - from new grads, foreign nurses, to repeat-testers. It doesn't matter if you've tested 10 times, I want to encourage you to stay focused on this one goal and believe in yourself because if you study this content in the NCLEX Virtual Trainer You Will Pass NCLEX.

I created the NCLEX Virtual Trainer to give you complete control of your studies.

During the Love Your Content Event I'm going to take what's in my head and put it in yours as we study the topics of labor, delivery, and sexually transmitted diseases. During this event I'm also going to give you the full opportunity to have all of my content inside of the NCLEX Virtual Trainer.

#### Stay focused; put FAITH over fear and invest in yourself - YOU CAN, YOU WILL, and YOU MUST Pass NCLEX!



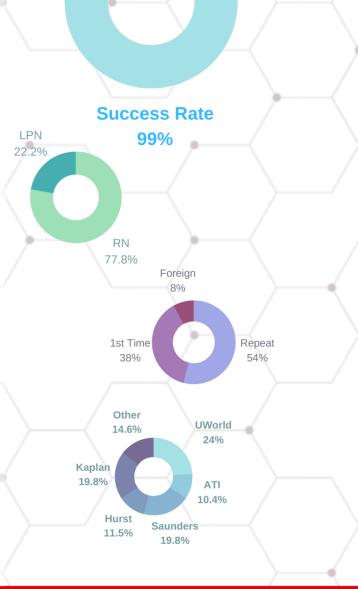
# PREPARED FOR SUCCESS!

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 your 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.



We Care About the 1%

# WHAT'S THE DIFFERENCE ?

We asked more than 5,000 repeat-testers "What resources have you previously used?" More than half of these students reported using UWorld, Kaplan, & Saunders; many also self identified as having experienced test anxiety.

Doing questions along with complicated strategies takes away from learning the core-content. More than anything, you need simple, easy to understand content. When you focus on the content - your confidence grows because you are better equipped to answer any question NCLEX gives you!

Our goal is to help you to become a ReMar Nurse because ReMar Nurses KNOW the Content! Start your journey today at www.ReMarNurse.com!



Watch both NCLEX Review Episodes on either Facebook.com/ReMarReview or YouTube.com/ReMarReview

FEB 5 <sup>RD</sup>	<b>BEGIN - LOVE YOUR CONTENT NCLEX REVIEW SALE</b> Order the NCLEX Virtual Trainer on Sale for \$189
FEB 13 <sup>™</sup>	<ul> <li>DAY #1 - LOVE YOUR CONTENT NCLEX REVIEW (Wednesday – 8:00 PM EST)</li> <li>Sexually Transmitted Disease (Page 6 - 8)</li> <li>Maternity (Page 9 - 13)</li> <li>Danger Sign in Pregnancy (Page 14)</li> <li>Labor / Delivery (Page 15 - 16)</li> </ul>
FEB 14 <sup>TH</sup>	<ul> <li>DAY #2 - LOVE YOUR CONTENT NCLEX REVIEW (Thursday – 8:00 PM EST)</li> <li>Normal &amp; High-Risk Newborns (Pages 17 - 19)</li> <li>Newborns Nursing Interventions (Page 20)</li> <li>Advanced Homework Questions (Page 21 - 22)</li> <li>How to use NCLEX Virtual Trainer (Page 23)</li> </ul>
🛁 FEB 15 <sup>тн</sup>	END - LOVE YOUR CONTENT VT SALE

(Sale may end early – while supplies last)

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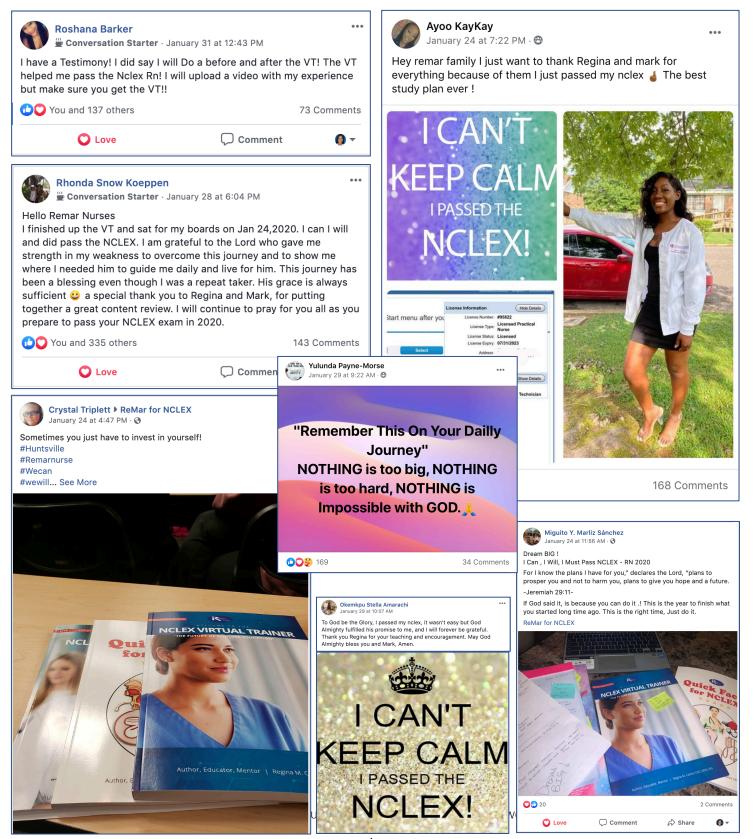
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# ReMar Nurse Advanced Study Session

A. Sexually Transmitted Diseases (STDs) -

STDs can either be \_\_\_\_\_\_or \_\_\_\_\_.

Bacteria	
Virus	

The four ways \_\_\_\_\_\_ are \_\_\_\_\_.

- 1.
- 2.
- 3.
- 4.

Sores	Drips

#### 1. Sores:

Α.

Incubation	
Signs	
518115	
Treatment	

#### Β.

	HS1-
Incubation	HS2-
	HS1-
Signs	HS2-
Treatment	
neatment	

What is the difference between herpes \_\_\_\_\_and herpes?

?

# C.

It is half	and half	<u> </u>
Incubation		
Signs		
Treatment		

# 2. Drips:

#### Α.

Incubation	
Signs	
Treatment	

#### Β.

Incubation	
Signs	
Treatment	

# Maternity

#### The Childbearing Cycle

#### A. Conception

Conception is the penetration of:

Sperm is also called	Male
Ovum is also called	Female

Where does conception take place?

Remember the number 23 for chromosomes.

#### 1. Gender

Sex is determined by: What are the letters for a female child: What are the letters for a male child:

Where does nidation take place?

NCLEX Emergency:

Condition:	
Signs:	
Laboratory values	
Treatment:	

#### **B.** Developmental Stages

B. Developmental Stages	
1. Fertilized Ovum	
2. Embryo	Also, called:
3. Fetus	

# C. Special Structures of Pregnancy

1. Amniotic Fluid	Functions of amniotic fluid • •
	Can be used for: What is the pH:
2. Umbilical Cord	Wharton's Jelly-Mucoid substance that surrounds the umbilical cord. Critical Thinking: When the umbilical cord is cut does the baby feel discomfort?
3. Placenta	<u>The placenta is an endocrine gland that is</u> <u>present only during pregnancy.</u> <i>Critical Thinking:</i> <i>Why is the placenta a part of the endocrine</i> <i>system?</i>

#### D. GTPAL number system & Obstetric Assessment

#### 1. GTPAL

Gravida	Number of
Term	Number of
Pre-Term	Number of
Abortion	Number of
Living	Number of

### \*Parity-number of pregnancies after 20 weeks

#### Critical thinking:

A pregnant client provides the following obstetric history to the nurse during a prenatal visit: Scheduled abortion at age 14; an 8-year-old daughter born at 39 weeks' gestation; and 5-year-old twin girls born at 33 weeks gestation. Using the GTPAL system, which option is correct?

 $\begin{array}{l} 1. \ G_3, \ T_1, \ P_2, \ A_1, \ L_3 \\ 2. \ G_4, \ T_1, \ P_1, \ A_1, \ L_3 \\ 3. \ G_4, \ T_1, \ P_2, \ A_1, \ L_4 \\ 4 \ G_3, \ T_1, \ P_1, \ A_1, \ L_3 \end{array}$ 

#### 2. Estimated due date

Length of Pregnancy:

Nagele's rule:

Find 1<sup>st</sup> Day of Last normal menstrual period

Add	
Subtract	
Add	

Critical Thinking:

1<sup>st</sup> day of LNMP: September 16, 2020 Using Nagele's rule when is the estimated delivery date:



#### Self-Study Reading Assignment

Read and study the information below to gain content knowledge concerning prenatal care:

#### Prenatal Care Client Educational Points



Estimated Gestational Age	Doctor's Visit Schedule
Up to 28 weeks	
	15-19 Weeks-
28-36 weeks	Every 2 Weeks Visits
	Tdap can be given
36 to 40+ weeks	Every Week
	Group B strep screening
	Start Herpes simplex virus suppression if there is a
	history of genital herpes

#### Nutritional Client Education

Weight gain	Trimester
1-4 lbs.	First
1 lb. per week	Second and Third

### F. <u>Diagnostic Procedures:</u>

1.	
Indication	
Administration	
Patient Education	

2.

۷.	
Indication	
Administration	
Patient Education	

3.

Indication	
Administration	
Patient Education	

If the baby is not full term these signs indicate a woman needs to go to the hospital immediately!

# R REMAR NCLEX VIRTUAL TRAINER WORKSHEET

So - Are you loving the content so far? Now I'm going to take you inside of the ReMar NCLEX Virtual Trainer! If you love the content get full access for 3-months now through Valentine's Day February 15th while supplies last at ReMarNurse.com/NCLEX-VT.

The Danger Signs in pregnancy	н.	Dangei	<sup>,</sup> signs	in	pregnancy
-------------------------------	----	--------	--------------------	----	-----------

1.			
2.			
3.			
4.			

If danger signs are present never assess client \_\_\_\_\_\_.

# **Complications of Pregnancy**

#### 1. Preterm Labor

Medications to stop premature labor

f you Give:	Watch for:

If you Give: \_\_\_\_\_\_ Watch for: \_\_\_\_\_

A.)	Less than
В.)	Less than
C.)	

If you give: Ritodrine	Watch for:
------------------------	------------

If you Give: \_\_\_\_\_ Watch for:\_\_\_\_\_

- 2. Preeclampsia-\_\_\_\_\_\_
  The three defining characteristics are:
- 1.
- 2.
- 3.

#### **Risk Factors**

- 1.
- 2.
- 3.
- 4.

***NCLEX Maternal***	
Emergency	

Nursing Care for	or Preeclampsia:		
Treatment:	Only cure is to _	 the	 

# Labor & Delivery Overview

#### J. Labor

- 1. Want to help labor along?
- 2. When you give oxytocin when do you Stop it?

#### K. Stages of Labor

#### 1. First Stage

Stage of Labor	Description
A. Pre-Labor	Days before Labor Begins
В.	Cervix dilates
С.	Cervix dilates
D.	Cervix dilates

#### NCLEX Pharmacology Tips: Pain Management During Labor

Medication	Notes
1. Regional Blocks	
2. Hydromorphone	See Quick Facts
3. Morphine	See Quick Facts

#### 2. Second Stage:

#### 3. Third Stage:

#### 4. Recovery Stage:



**REMAR NCLEX VIRTUAL TRAINER PAGE** 

# Normal & High-Risk Newborn

Welcome to Day #2 of the Love Your Content Review! We're starting today inside of the NCLEX Virtual Trainer! If you love your content and you're ready to pass NCLEX sign up now for full access for only \$189 (a \$396 MSRP).

The Love Your Content sale ends tomorrow February 15<sup>th</sup>, while supplies last at ReMarNurse.com/NCLEX-VT.

1. Apgar Scoring is done at \_\_\_\_\_\_and \_\_\_\_\_minutes.

Sign	Score = 0	Score=1	Score=2
Heart Rate		Below	
Respirations			
Muscle tone		Some	Well
Appearance (color)		Body normal	Body and
Reflex (Irritability)			

Score at \_\_\_\_\_\_ minutes is more valuable.

Eyes:\_\_\_\_\_

Temperature: \_\_\_\_\_

Pulse:	Respirations:
ruise.	

Abdomen:\_\_\_\_\_

Cord Care	
Allow to	
By cord should have	
Monitor for signs	

1. \_\_\_\_\_Addicted Newborn

Symptoms:

What is the best way to test for illegal drugs in infants?\_\_\_\_\_

Nursing care: Cluster Care

Cluster Care Examples:

Turn the baby on:

Elevating

Decrease

#### 2. HIV Mother Interventions

- 1. Use
- 2.
- 3. Can the baby stay in the mother's room?
- 4. Teach mother do not give

Examples of live vaccination:

5. Can you give Vitamin K shot?

#### 3. Fetal

Characteristics to know
1.
2.
3.
4.
Risk for:
Treatment:
4.
Definition:
Watch for:
Treatment:
may be required.
Client Safety Point Position:
5.
Treatment:
Client Education for Parents:

NCLEX Tip: Nutrition is a major concern for these birth defects.

# Nursing Interventions for Newborns:

Priority Nursing Action:	
	Too much oxygen:
Cord Care	
Eyes	
Temperature	
Breastfeeding	
breastreeunig	
Head Circumference	



- 1. A nursing student would need follow-up teaching if she stated which of these is a sexually transmitted disease?
  - A.) Hepatitis A
  - B.) Hepatitis B
  - C.) Hepatitis C
  - D.) Candidiasis
- 2. Which of the following is a recommended term for men who have sexual intercourse with other men? Select all that apply.
  - A.) Transsexual B.) Gay C.) Bisexual
  - D.) Man who has sex with men
  - E.) Transgender
- 3. A nurse is reviewing the laboratory results of a 27-year-old male client who had a painless open sore on his penis that healed. The laboratory results show the client is still infected with syphilis. The nurse is aware the client has which form of syphilis?
  - A.) Primary
  - B.) Secondary
  - C.) Latent
  - D.) Incurable
- 4. A nurse is caring for a 16-year-old female client diagnosed with chlamydia. Which of the following statements is **most** accurate to include in patient education?
  - A.) Avoid all forms of sex for seven days after taking the medication, and then be retested for the sexually transmitted infection.
  - B.) Do not have sex with your current partner until they are tested and treated.
  - C.) Do not have sex until all sexual partners are tested and treated.
  - D.) Do not have sex until your doctor re-evaluates your condition as permanent damage can be expected.
- 5. Pubic lice and head lice are the same sexually transmitted infection and they live on both the head and genitals together.
  - A.) True B.) False
- 6. Which of the following is not at risk for a sexually transmitted disease? Select all that apply.
  - A.) A 26-year-old college student who is not sexually active but is in a long-term relationship.
  - B.) A 35-year-old married man who has one sexual partner but uses a condom.
  - C.) A 40-year-old female who has multiple sexual partners but uses a condom.
  - D.) A 70-year-old male who has multiple sexual partners but does not use a condom.
  - E.) A 72-year-old male who has one sexual partner and uses a condom infrequently.
- 7. Match the word in column II with the associated definition in column I.

Column I	Column II
1Intense burning and inflammation of the vulva.	A. Acyclovir
2A preferred treatment for candidiasis.	B. Pap smear
3A drug of choice for herpes genitalis.	C. Vulvodynia
4This test is used to diagnose cervical cancer.	D. Mycostatin

- 8. Mary Jane, a 21-year-old college student, has recently noticed increased vaginal discharge that is grey to yellowish white in color. After examination, the nurse prepares a wet mount vaginal smear. When potassium hydroxide is added to the smear, a fishy odor is noted. Mary probably has:
  - A.) Bacterial vaginosis
  - B.) Candidiasis
  - C.) Atopic vaginitis
  - D.) Herpes Simplex 1

9. Metronidazole is prescribed to be taken twice-a-day for one week. While taking this medication, Mary Jane should be instructed to:

A.) Avoid dairy products.

- B.) Avoid sunlight.
- C.) Avoid alcohol.
- D.) Lie down flat for at least 30 minutes after taking the medication.
- 10. Jennifer, a 39-year-old mother of two, has just been recently diagnosed with herpes genitalis; a reoccurring, lifelong viral infection on the.

A.) Cervix

- B.) External genitalia
- C.) Vagina
- D.) All the above areas.
- 11. The herpes virus that is accountable for about 80% of genital and perineal lesions is:
  - A.) Epstein-Barr virus.
  - B.) Herpes simplex type 2.
  - C.) Cytomegalovirus
  - D.) Varicella zoster
- 12. Which of the following is a positive sign of pregnancy? Select all that apply.
  - A.) Positive pregnancy test
  - B.) Enlargement of the uterus
  - C.) Fetal movement
  - D.) Positive ultrasound
  - E.) Goodell's sign
- 13. If the last menstrual period is September 9, 2019, the expected delivery date is:
  - A.) May 16, 2020
  - B.) January 16, 2020C.) July 16, 2020
  - C.) July 10, 2020
  - D.) June 16, 2020
- 14. A mother is preparing for an abdominal ultrasound to monitor her seventh month of pregnancy. The nurse should instruct her to:
  - A.) Remain NPO eight hours before the examination.
  - B.) Provide a clean urine specimen before the examination.
  - C.) Drink at least 32 oz. of water before the examination.
  - D.) Do not eat breakfast but instruct the patient to drink a cup of coffee.

15. . Rachel 33, is at her prenatal visit. She has 2 living children born as preterm twins in her first pregnancy. She has a set of triplets born at

38 weeks. She has an 8-year-old child born at 39 weeks. She had a spontaneous abortion at 16 weeks. She also had another child who

died at 3 years old who was born to term. What is her current obstetric history?

- A. G<sub>9</sub> T<sub>4</sub> P<sub>1</sub> A<sub>1</sub> L<sub>6</sub>
- B. G<sub>6</sub> T<sub>4</sub> P<sub>1</sub> A<sub>1</sub> L<sub>5</sub>
- C. G<sub>4</sub> T<sub>3</sub> P<sub>1</sub> A<sub>1</sub> L<sub>6</sub>
- $D. \quad G_5 \, T_3 \, P_1 \, A_1 \, L_6$
- $E. \qquad G_6 \, T_3 \, P_1 \, A_1 \, L_6$

# PASS THE NCLEX WITH REMAR REVIEW

# **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



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# NCLEX Virtual Trainer Table of Content FREE 3-DAY TRIAL CONTENT

A MESSAGE FROM YOUR INSTRUCTOR III
HOW TO USE THE NCLEX-VT STUDENT WORKBOOK IV
HOW TO USE YOUR SIX-WEEK NCLEX STUDY CALENDAR4
VIRTUAL TRAINER CALENDAR1 - 6
BEFORE WE START - AFFIRMATION7
PREGNANCY8
COMPLICATIONS OF PREGNANCY
LABOR & DELIVERY OVERVIEW14
FETAL HEART STRIP ORIENTATION15
LABOR & DELIVERY OVERVIEW16
CLINICAL JUDGEMENT ACTIVITY #120
CLINICAL JUDGEMENT ACTIVITY #221
FETAL HEART MONITORING 21
NORMAL & HIGH RISK NEWBORN 22
INFANT HEART DEFECTS25
PEDIATRIC DEVELOPMENTAL MILESTONES27
NCLEX PRACTICE QUESTIONS
CLINICAL JUDGEMENT ACTIVITY #3
CLINICAL JUDGEMENT ACTIVITY #4
CLINICAL JUDGEMENT ACTIVITY #5
MATERNAL & CHILD HEALTH PROGRESS EXAM
AGE SPECIFIC NURSING CARE
EXPECTED CHANGES DURING AGING
CLINICAL JUDGEMENT ACTIVITY #643
PHYSIOLOGICAL CHANGES HOMEWORK EXAM
QUICK FACTS FOR NCLEX QUIZ PAGES 1-20
PHYSIOLOGICAL ASSESSMENT PROGRESS EXAM
CLINICAL JUDGEMENT ACTIVITY #752
DIETS
BASIC CARE & COMFORT
CLINICAL JUDGMENT ACTIVITY #8 60
ORTHOPEDICS
BASIC CARE & COMFORT HOMEWORK EXAM
BASIC CARE & COMFORT PROGRESS EXAM69
MEDICATION ADMINISTRATION71
ANTIBIOTICS
INTRAVENOUS (IV) THERAPY74
IV COMPLICATIONS
TOTAL PARENTERAL NUTRITION76
PAIN MANAGEMENT77
QUICK FACTS FOR NCLEX 21-40 QUIZ
SUBSTANCE ABUSE
IV FLUIDS
CLINICAL MATH
CLINICAL MATH PRACTICE QUESTIONS
PHARMACOLOGICAL & PARENTERAL THERAPIES HOMEWORK EXAM
PHARMACOLOGICAL & PARENTERAL PROGRESS EXAM
EASY NCLEX LABS
CLINICAL JUDGEMENT ACTIVITY #994
EASY ELECTROLYTES
DIABETES INSIPIDUS VS. SYNDROME OF INAPPROPRIATE ANTIDIURETIC
HORMONE SECRETION
POSITIONS
DISASTER MANAGEMENT
CLINICAL JUDGEMENT ACTIVITY #10 101

QUICK FACTS FOR NCLEX PAGES 40-66 QUIZ	02
HERBAL MEDICATIONS 1	04
CLINICAL JUDGEMENT ACTIVITY #111	05
BLOOD GAS INTERPRETATION BY NUMBERS 1	06
BLOOD GAS INTERPRETATION BY DIAGNOSIS	06
CHEST TUBES 10	07
VENT ALARMS1	10
CONGESTIVE HEART FAILURE 1	11
CONGESTIVE HEART FAILURE PRACTICE QUESTIONS	12
DIAGNOSTIC PROCEDURES 1	13
LOWERING CHOLESTEROL 1	15
PHYSIOLOGICAL ADAPTATION HOMEWORK EXAM	16
PHYSIOLOGICAL ADAPTATION PROGRESS EXAM	17
FAR SPOTLIGHT 1	19
DIABETES OVERVIEW 1	20
ENDOCRINE REVIEW	27
PHYSIOLOGICAL ADAPTATION PROGRESS EXAM	30
CLINICAL JUDGEMENT ACTIVITY #121	31
"NCLEX NEXT-GEN STYLE QUESTIONS" 1	31
THERAPEUTIC COMMUNICATION	32
PSYCHOLOGICAL CONCEPTS	34
PSYCH MEDICATIONS	38
PSYCHOSOCIAL INTEGRITY HOMEWORK EXAM	44
PSYCHOSOCIAL INTEGRITY PROGRESS EXAM	45
CLINICAL JUDGEMENT ACTIVITY #1314	47
ECG OVERVIEW	48
ISOLATION PRECAUTIONS	54
ISOLATION PRACTICE QUESTIONS	56
CLINICAL JUDGEMENT ACTIVITY #141	57
ACCIDENT & ERROR PREVENTION1	58
MANAGEMENT OF CARE	60
CLINICAL JUDGEMENT ACTIVITY #151	61
LEGAL ISSUES IN NURSING	62
DELEGATION & ASSIGNMENT1	63
DELEGATION PRACTICE QUESTIONS	65
CLINICAL JUDGEMENT ACTIVITY #16	66
CLINICAL JUDGEMENT ACTIVITY #171	66
PRIORITIZATION	
REVERSE PRIORITY	
PRIORITY PRACTICE QUESTIONS	
MANAGEMENT OF CARE HOMEWORK EXAM	
MANAGEMENT OF CARE PROGRESS EXAM	



# **Blood Gas Interpretation Numbers**

ReMar Review		
рН	HCO₃	
Below 7.35=		
Above 7.45 =		

## *THINK R.O.M.E.!* **R**espiratory **O**pposite **M**etabolic **E**qual

A.) How would you interpret this blood gas? pH 7.53 PaCO<sub>2</sub> 33 HCO<sub>3</sub> 33 PaO<sub>2</sub> 72

рН 7.53
B.) How would you interpret this blood gas? pH 7.10 $PaCO_2 24 HCO_3 45 BE 3$
pH 7.10 HCO <sub>3</sub> 45 =
C.) How would you interpret this blood gas? pH 7.32 PaCO <sub>2</sub> 35 HCO <sub>3</sub> 17 PaO <sub>2</sub> 89

pH 7.32 \_\_\_\_\_HCO3 17\_\_\_\_\_= \_\_\_\_\_

# **Blood Gas Interpretation by Diagnosis**

ReMarNurse.com

1<sup>st</sup> question: Is this a breathing problem?

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

ReMarNurse.com

A.) Chest tube is a	drain that allow fluids or air to
escape the pleural space	

Remember normal breathing works on \_\_\_\_\_\_

Negative pressure is the idea that when humans inhale it is a result of the diaphragm contracting and moving down and the rib muscles move out. This causes the lungs to expand. The pressure inside the lungs drops. And it is the negative pressure that sucks the air in.

Chest tubes are needed whenever the	 	_in the
pleural space is disrupted.		



Tension pneumothorax-	is in b	etween
a	ind	which
can be caused by trauma, surge	ry, 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	Allow a to exist from pleural space during	Both water seal and suction control have water in them.
1. 2.	& air to enter the pleural space during	
	·	Bubbling/Tidaling
	Bubbling/Tidaling	Continuous-
	Continuous Intermittent	Intermittent-

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 an \_\_\_\_\_\_dressing at the insertion 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 opening with an \_\_\_\_\_\_.

\_\_\_\_\_·

C. \_\_\_\_\_ the dressing on \_\_\_\_\_ sides only so that you can allow:

#### Critical Think:

What is the difference between a regular sterile dressing & occlusive dressing?

- 3. Complains of pain won't comply-medicated and have the client to cough and deep breath
- Α.
- Β.

For NCLEX you have at the bedside of a client 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.
- 2. Wheezes
- 3. Crackles
- 4. Stridor
- 5. Diminished
- 6. 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 then:	Disconnect the client and manually resuscitate them.

#### H.O.L.D. Help

н	High Alarm
0	Obstruction
L	Low Alarm
D	Disconnection

# **Congestive Heart Failure**

ReMarNurse.com

When the	_cannot pump enough blood and nutrients to meet the needs of
the organs.	

#### Big Problem:

Side	Side
L think	R think
Signs:	Signs:

Most clients will have failure \_\_\_\_\_\_.

B.) Diagnostic Tests

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**

### ReMarNurse.com

1. Lumbar puncture

Position:

Client Teaching:

2. \_\_\_\_\_\_ non-invasive test that uses \_\_\_\_\_\_ to create a detailed picture.

Position:

Client Teaching:

3.

Position -Client teaching:

4. E	sopl	hagoga	stroduoo	denoscop	зy
------	------	--------	----------	----------	----

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**

ReMarNurse.com

6. Position -

Client Teaching:

## 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 *Niacin*?

### 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**

ReMarNurse.com

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!**

### ReMarNurse.com

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! give you full VT access, study calendar, and send out your physical workbook!



To upgrade your account to the full version of the RN NCLEX Virtual Trainer visit ReMarNurse.com to select your review complete your purchase.

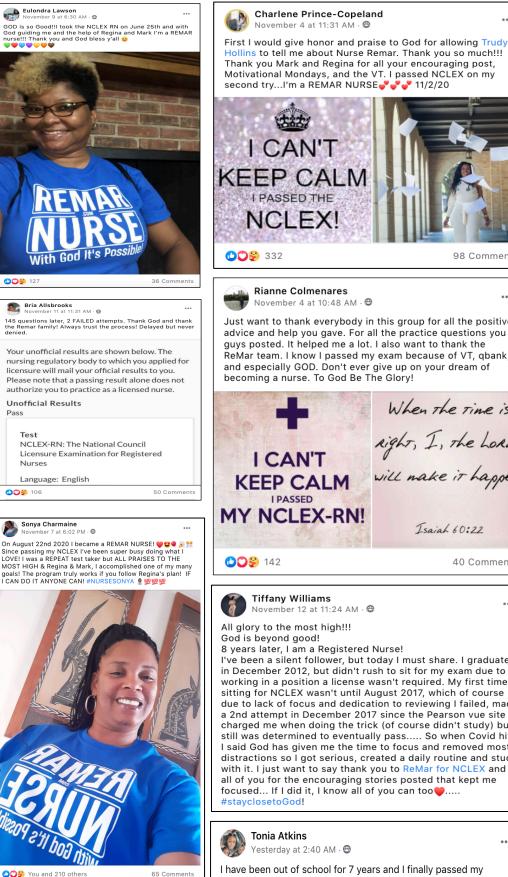


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# IS THE REMAR NCLEX VIRTUAL TRAINER WORTH IT?

Charlene Prince-Copeland

November 4 at 11:31 AM - 🕾





Mauzie Shelton November 19 at 11:39 AM · 😁

#ReMarNurse After being denied testing for legal reasons 4 vears ago, I officially became a LPN on 11/6/20 and today is my first day of work!! Thank you ReMar for making my dreams come true.. #RNnext



276

61 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! God has never left my side and guided me every step of the way. It was not in my time but in HIS time! Thank you to Remar for the awesome study guide. You are blessing to so many!!!!! I CAN, I WILL and I DID PASS NCLEX!

55 Comments

### K Denise Jefferson November 19 at 10:39 AM · 😁

I got my test results this morning . I would like to thank I got my test results this morning. I would like to thank everyone in this group that gave me the motivation to study and just being positive individuals as we all are striving to do what "We"were called to do... Thank you to Regina and Mark for their amazing program. Continued blessings on the two of you. Again a million thanks... I am officially a Remar Nurse... Kimberly Jefferson, RN..



# NCLEX RN Virtual Trainer Study Calendar

# WEEK ONE Sample Calendar Weeks 1 of 6

### Monday

# Tuesday

	wonday			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			Mark this task as done
	Wednesday			Thursday
	TOPIC/LOCATION	DONE		TOPIC/LOCATION DONE
8:00	R		8:00	Enter the VT Center & Open "Student Workbook"
9:00	E			
10:00	S			
11:00	т			
	*Think about a potential test date 6 weeks from			
	now			Complete Clinical Judgement Activities 1 & 2
			9:20	Open the "Quick Facts for NCLEX" book Complete Pretest, Planner Page #1, & pages 1-10
				Study Allergy, Analgesics, Antibiotics, Anticoagulants in
				the pharmacology section in back of the book.
			11:00	End study session and mark task as done.
	Friday			Saturday/Sunday
	TOPIC/LOCATION	DONE		TOPIC/LOCATION DONE
8:00	Watch Normal & High Risk Newborn		8:00	REST
8:20	Watch Infant Heart Defects		9:00	
8:35	Watch Pediatric Developmental Milestones			
9:10	Complete Clinical Judgement Activities 3 - 5			The times listed are suggestions.
9:40	Complete Maternal & Child Health Progress Exam			*Study times should be changed to fit your daily life.
10:00	Open the "Quick Facts for NCLEX" book			
	Study the Pharmacology Section Anticonvulsants,			

Antidotes, Antineoplastics & Anti-Parkinsons

11:00 End study session and mark as done.



# **NCLEX Mental Preparedness & Grief Form**

Regina M. Callion MSN, RN



Dear ReMar Nurse,

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.

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.