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**Question: 1046**

When discussing end-of-life preferences, which of the following documents should be emphasized to ensure patients' wishes are respected? (Select All That Apply)

- A. Living wills outlining treatment preferences
- B. Physician Orders for Life-Sustaining Treatment (POLST)
- C. General hospital admission forms
- D. Advance healthcare directives

Answer: A, B, D

Explanation: Living wills, POLST forms, and advance healthcare directives are crucial for ensuring that patients' end-of-life preferences are honored. General hospital admission forms do not provide specific directives regarding treatment preferences.

**Question: 1047**

A nurse is reviewing the discharge procedures for a patient with diabetes who has been hospitalized for an infection. Which of the following actions is most critical during medication reconciliation to prevent adverse outcomes after discharge?

- A. Ensuring the patient understands the purpose and dosage of each medication
- B. Providing the patient with a printed list of medications
- C. Verifying the patient's allergies to medications before discharge
- D. Scheduling a follow-up appointment with the primary care provider

Answer: A

Explanation: Ensuring the patient understands the purpose and dosage of each medication is crucial for adherence and preventing medication errors, which can lead to adverse outcomes after discharge.

**Question: 1048**

While preparing for organ donation, the nurse must consider the ethical implications of the process. Which of the following statements reflects an ethical consideration that must be taken into account?

- A. Organ donation is always in the best interest of the donor's family

- B. The process of organ donation should only be discussed after the family has grieved
- C. All healthcare providers must advocate for organ donation regardless of personal beliefs
- D. The donor's wishes must be prioritized over family opinions

Answer: D

Explanation: The ethical principle of autonomy dictates that the wishes of the donor must take precedence, highlighting the importance of honoring the individual's preferences regarding organ donation.

### Question: 1049

As part of your unit's focus on improving patient safety, you learn about a recent study suggesting that hourly rounding by nursing staff can reduce falls. What is your first step in implementing this evidence-based practice?

- A. Discuss the findings with the nursing team
- B. Evaluate existing fall rates to establish a baseline
- C. Conduct a pilot program on one shift
- D. Develop a schedule for hourly rounding

Answer: B

Explanation: Evaluating existing fall rates establishes a baseline, allowing for measurable comparisons after implementing the hourly rounding practice to assess its effectiveness.

### Question: 1050

During a care coordination meeting, which two factors should the nurse emphasize to address the complex needs of a patient with mental health issues?

- A. The importance of medication adherence and routine follow-ups
- B. The necessity of avoiding discussions about the patient's feelings
- C. The role of community resources in supporting recovery
- D. Relying on family members to manage the patient's care

Answer: A, C

Explanation: Emphasizing medication adherence and the role of community resources fosters a comprehensive approach to managing both mental and physical health needs.

### Question: 1051

A nurse is caring for a patient who has just been diagnosed with a chronic illness. The patient expresses feelings of hopelessness and uncertainty about their future. How should the nurse prioritize their approach to address these emotional concerns?

- A. Refer the patient to a mental health specialist immediately
- B. Encourage the patient to focus on positive aspects of their life
- C. Provide information about the illness and treatment options to empower the patient
- D. Schedule a follow-up appointment to reassess the patient's emotional state

Answer: C

Explanation: Providing information about the illness and treatment options empowers the patient and addresses their feelings of hopelessness by giving them a sense of control over their health journey.

**Question: 1052**

A nurse is caring for an elderly patient who has multiple comorbidities and is at risk for malnutrition. Which assessment finding would be the most significant indicator of impending malnutrition in this patient?

- A. Increased appetite and weight gain
- B. Consistent dietary intake with no reported symptoms
- C. Normal laboratory values for albumin and prealbumin
- D. Unintentional weight loss and muscle wasting

Answer: D

Explanation: Unintentional weight loss and muscle wasting are significant indicators of impending malnutrition, particularly in elderly patients with comorbidities, and warrant immediate intervention.

**Question: 1053**

Which of the following are crucial considerations for nurses when addressing implicit bias in patient care? (Select All That Apply)

- A. Regularly attending workshops on diversity and inclusion
- B. Assuming a universal approach to patient care
- C. Engaging with patients to understand their unique backgrounds
- D. Reviewing and reflecting on personal biases during patient interactions

Answer: A, C, D

Explanation: Ongoing education and engagement with patients help reduce implicit bias, while assuming a universal approach can alienate patients and lead to suboptimal care.

**Question: 1054**

What are the critical considerations for nurses when implementing infection control standards in a facility, particularly concerning transmission-based precautions? (Select All That Apply)

- A. Utilizing contact precautions for patients with known or suspected multi-drug resistant infections
- B. Assuming droplet precautions are unnecessary if the patient is not exhibiting symptoms
- C. Ensuring proper signage is posted on the door of patients requiring transmission-based precautions
- D. Providing appropriate PPE to all staff and visitors entering the patient's room

Answer: A, C, D

Explanation: Contact precautions are essential for patients with multi-drug resistant infections, and proper signage ensures awareness of precautions. Providing appropriate PPE is critical for protecting staff and visitors. Assuming droplet precautions are unnecessary without symptoms is incorrect, as transmission can occur even before symptoms appear.

**Question: 1055**

In managing multiple patients, a nurse must prioritize care for a patient who is exhibiting signs of sepsis. What should the nurse do first?

- A. Administer prescribed antibiotics
- B. Notify the healthcare provider immediately
- C. Obtain blood cultures before antibiotics
- D. Monitor vital signs every 15 minutes

Answer: C

Explanation: Obtaining blood cultures before administering antibiotics is vital for accurate diagnosis and treatment of sepsis, as it allows for identification of the causative organism, which is critical for effective antimicrobial therapy.

**Question: 1056**

During a coaching session, a nurse expresses that she feels unprepared to handle complex patient situations. What is the most effective response a coach can provide to empower her to develop her skills?



- A. Advise her to avoid such situations until she feels ready
- B. Reassure her that many nurses feel the same way and it's normal
- C. Suggest specific resources and strategies to build her confidence and skills
- D. Discourage her from pursuing complex cases in the future

Answer: C

Explanation: Providing specific resources and strategies empowers the nurse to take proactive steps toward skill development, enhancing her confidence and preparedness for complex situations.

**Question: 1057**

In preparation for a patient's discharge to home health care, which two actions should the nurse take to ensure continuity of care?

- A. Provide generic discharge instructions without personalization
- B. Confirm that home health services are scheduled and ready to begin
- C. Discuss the patient's post-discharge needs with the home health nurse
- D. Assume the patient will remember all verbal instructions given

Answer: B, C

Explanation: Confirming home health services and discussing needs with the home health nurse are essential for continuity of care and ensuring the patient receives appropriate follow-up.

**Question: 1058**

A nurse is providing post-mortem care and needs to ensure the patient's body is prepared for transfer to the morgue. Which action should the nurse take to maintain the body's dignity?

- A. Notify the family that they cannot view the body until after transfer
- B. Leave the body uncovered until the family arrives
- C. Place the body in a standard hospital gown without any additional care
- D. Close the eyes and place a clean cloth over the face

Answer: D

Explanation: Closing the eyes and placing a clean cloth over the face helps to maintain the dignity of the deceased, preparing them respectfully for transfer to the morgue.

**Question: 1059**

In the context of patient advocacy, which of the following scenarios best illustrates the nurse's role in ensuring informed consent is adequately obtained?

- A. The nurse ensures the patient has all their questions answered before signing.
- B. The nurse witnesses the patient signing the consent form without discussing the procedure.
- C. The nurse explains the procedure to the patient before they see the physician.
- D. The nurse summarizes the procedure only after the patient has consented.

Answer: A

Explanation: Ensuring that the patient has all their questions answered before signing the consent form is crucial for patient advocacy and informed consent, allowing the patient to make an informed decision.

### Question: 1060

During a routine assessment, a nurse discovers that a patient has not been following their diabetes management plan. The patient cites confusion over dietary recommendations as the primary reason. What is the most effective intervention the nurse can implement to address this issue?

- A. Provide a comprehensive diet manual for the patient to read
- B. Schedule a one-on-one teaching session focused on dietary management
- C. Assume the patient understands and move on to medication education
- D. Refer the patient to a dietitian without further discussion

Answer: B

Explanation: A one-on-one teaching session allows for personalized education, addressing the specific confusion the patient has regarding dietary recommendations and improving management.

### Question: 1061

In the context of abuse reporting in healthcare, which of the following practices are essential to ensure effective intervention? Select All That Apply.

- A. Training staff to recognize signs of various types of abuse.
- B. Establishing a clear protocol for reporting and documentation.
- C. Discussing suspected abuse cases openly in staff meetings.
- D. Providing support resources for victims of abuse.

Answer: A, B, D

Explanation: Training, clear protocols, and support resources are vital for effective intervention. Open discussions about cases can violate confidentiality.

**Question: 1062**

A nurse is reviewing a patient's chart and notices that the patient's medications include a high-risk anticoagulant. The patient is scheduled for a procedure that requires temporary discontinuation of the medication. What should the nurse prioritize to ensure patient safety before the procedure?

- A. Contact the physician to confirm the medication cessation
- B. Educate the patient about the risks of discontinuing the medication
- C. Document the medication change in the patient's chart
- D. Monitor the patient for any signs of clotting issues

Answer: A

Explanation: Contacting the physician to confirm the medication cessation is critical to ensuring that the patient receives appropriate care and management of their anticoagulant therapy prior to the procedure.

**Question: 1063**

Which two elements are critical in the documentation of patient care to ensure compliance with legal and ethical standards?

- A. Using subjective language to enhance the narrative
- B. Ensuring accuracy and timeliness of entries
- C. Documenting only significant events and ignoring routine care
- D. Regularly updating documentation based on new assessments

Answer: B, D

Explanation: Ensuring accuracy and timeliness protects against legal issues, while regularly updating documentation reflects the current status of the patient and supports continuity of care.

**Question: 1064**

In reviewing a medication list for a patient experiencing polypharmacy, which of the following should the nurse prioritize in their assessment?

- A. Ensuring that all medications are taken at the same time daily.



- B. Identifying potential drug-drug interactions and assessing the patient's understanding of their medications.
- C. Advising the patient to stop taking all medications that are not effective.
- D. Focusing solely on prescription medications and disregarding over-the-counter drugs.

Answer: B

Explanation: Assessing for potential drug-drug interactions and evaluating the patient's understanding of their medications are critical for ensuring safe medication management in patients experiencing polypharmacy.

### Question: 1065

A nurse is assessing a patient's pain level using the Numeric Rating Scale. The patient rates their pain as an 8 out of 10. What is the most appropriate nursing intervention based on this assessment?

- A. Consult the physician for potential changes in the pain management plan.
- B. Document the pain level and continue with the care plan.
- C. Reassure the patient that pain will diminish with time.
- D. Administer the prescribed pain medication and reassess in 30 minutes.

Answer: D

Explanation: Administering prescribed pain medication and reassessing ensures that the patient's acute pain is managed promptly and effectively.

### Question: 1066

After conducting a patient satisfaction survey, your department receives feedback indicating dissatisfaction with wait times. What is the most effective approach to enhance patient customer experience based on this data?

- A. Increase the number of staff during peak hours
- B. Reduce appointment slots to manage time better
- C. Conduct follow-up interviews with dissatisfied patients
- D. Implement a patient tracking system to provide real-time updates

Answer: D

Explanation: Implementing a patient tracking system can significantly enhance the customer experience by keeping patients informed about their wait times, thereby reducing frustration and improving overall satisfaction.

**Question: 1067**

During a routine assessment, the nurse notes that a patient on parenteral nutrition has developed signs of hyperglycemia. What is the most appropriate nursing intervention?

- A. Increase the rate of parenteral infusion
- B. Switch to enteral nutrition
- C. Discontinue the parenteral nutrition immediately
- D. Administer insulin as prescribed

Answer: D

Explanation: Administering insulin as prescribed is the appropriate intervention for managing hyperglycemia in patients receiving parenteral nutrition, ensuring blood glucose levels are maintained within a safe range.

**Question: 1068**

A patient is prescribed a new medication regimen that includes an opioid analgesic and an antibiotic. What is the most critical nursing assessment for this patient?

- A. Assessing the patient's pain level frequently.
- B. Monitoring for signs of constipation.
- C. Ensuring the patient understands how to take the medications.
- D. Evaluating renal function due to potential drug interactions.

Answer: D

Explanation: Monitoring renal function is critical because both opioids and certain antibiotics can affect kidney function. Adverse interactions can occur, especially in patients with preexisting conditions.

**Question: 1069**

In preparing a care plan for a patient with chronic pain, which component is essential to include in the evaluation phase to measure the effectiveness of the interventions?

- A. Assessment of the patient's range of motion.
- B. Documentation of medication administration times.

- C. Review of the patient's medical history for previous treatments.
- D. Patient's report of pain level post-intervention.

Answer: D

Explanation: The patient's self-report of pain level post-intervention directly measures the effectiveness of the pain management strategies implemented in the care plan.

**Question: 1070**

When conducting a patient hand-off, which two practices are essential to minimize the risk of miscommunication and ensure safety?

- A. Engaging the receiving nurse in an interactive discussion of the patient's status
- B. Providing information solely through electronic documentation
- C. Summarizing key points and inviting questions for clarity
- D. Limiting the hand-off duration to avoid taking too much time

Answer: A, C

Explanation: Engaging the receiving nurse and summarizing key points with opportunities for questions fosters clear communication and reduces the likelihood of errors.





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