Introduction

Welcome to the Ambulatory Care Nursing Review Questions, 3rd Edition, published by the American Academy of Ambulatory Care Nursing (AAACN). This set of mock test items is designed to assist ambulatory care nurses in assessing their knowledge of the practice of ambulatory care nursing. Professional nurses should take every opportunity to advance their expertise, skill, and knowledge, using tools such as this publication to assess their knowledge gaps and learn from studying the answers.

All the review questions and their answers are drawn from and referenced in one of five publications of the AAACN: Core Curriculum for Ambulatory Care Nursing, 2nd Edition (2006), Ambulatory Care Nursing Administration and Practice Standards, 7th Edition (2007), Telehealth Nursing Practice Administration and Practice Standards, 4th Edition (2007), Telehealth Nursing Practice Essentials (2009), and Guide to Ambulatory Care Nursing Orientation and Competency Assessment (2005). The reference, chapter, and/or page numbers and other hints are listed with the answers in the back of the booklet. Using the AAACN publications as companions to this set of review questions is highly recommended.

The content of this edition of the Review Questions has been updated to reflect the expanded telehealth and other new content of the American Nurses Credentialing Center (ANCC) Ambulatory Care Nursing Certification Exam released in 2009. This publication consists of 225 multiple choice items that follow the same format as the items on the ANCC Ambulatory Care Nursing Certification Exam. The multiple choice items are grouped into five domains of practice corresponding to those on examination.

The content in each of the categories and the percentage of questions in each category are drawn directly from the test content outline as published by ANCC at the time of this writing (see Table 1).

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<thead>
<tr>
<th>Category</th>
<th>Domains of Practice</th>
<th>Percent</th>
<th>Number of Exam Questions</th>
<th>Number of Questions in Booklet</th>
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</thead>
<tbody>
<tr>
<td>I</td>
<td>Clinical Practice</td>
<td>25.33%</td>
<td>38</td>
<td>57</td>
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<tr>
<td>II</td>
<td>Communication</td>
<td>20.00%</td>
<td>30</td>
<td>45</td>
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<tr>
<td>III</td>
<td>Issues and Trends</td>
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<td>22</td>
<td>33</td>
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<td>IV</td>
<td>Systems</td>
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<td>Education</td>
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Exam Information

For further information about the Ambulatory Care Nurse Specialty Certification Exam offered through ANCC, contact ANCC at 800-284-2378 or you can learn more on the ANCC Web site, www.nursecredentialing.org.

The exam is a computer-based exam containing 175 questions, 150 scored and 25 pilot questions. Nurses can apply all year long and test during a 90-day window at Prometric testing centers (www.prometric.com/ancc).

Complete information about the application and testing process may be found in the General Testing and Renewal Handbook available at www.nursecredentialing.org. From this Web site you can type into and print your application. Information to prepare for the exam, such as a detailed test content outline, references, and additional sample questions, may be found on the ANCC Web site.

Study Resources

The American Academy of Ambulatory Care Nursing offers an array of exam preparation resources, including self-study, CD-ROMs, and on-the-road courses. Visit www.aaacn.org to order your study materials.
Directions for Using These Review Questions

1. Complete all multiple choice items or focus upon the items specific to one or more of the above categories.
2. Read each multiple choice item carefully and circle your answer on the Answer Sheets provided at the end of this publication.
   • Try to answer the question before reading options.
   • Underline key words.
   • Do not read anything more into the question or options than what is there; do not over analyze.
   • If unsure of the answer, use logic to rule out options that could be correct versus those that are definitely incorrect.
   • Select options that reflect a nursing judgment.
   • If two answers are correct, choose the one that causes the other to occur.
   • Select options that are correct without exception.
   • When evaluating difficult test questions, mark out the options you think are wrong.
   • Avoid options that are true statements, but do not answer the question.
3. Check for the correct answers using the Answer Key located at the end of this publication. For further information about the topic addressed in the question and the rationale for the answer given, reference the publication and the page or section listed.
4. There is no passing score for this assessment. Reward yourself for the items you answer correctly. Review those items that you answer incorrectly to determine your areas for further study.

Disclaimer: These review questions provide an opportunity to assess your knowledge of selected components of ambulatory care nursing practice and to practice answering multiple choice items. They do not represent a comprehensive compilation of all content comprising ambulatory care nursing practice. Completion of these test questions does not guarantee the examinee will pass the certification exam. The authors and reviewers of these study questions are NOT item writers or content expert panel members for the Ambulatory Care Nursing Certification Examination offered by the American Nurses Credentialing Center.

References
Clinical Practice

Questions 1 through 3 pertain to the same scenario.

1. Christopher, a 4-year-old with mild persistent asthma, presents in clinic with an acute upper respiratory infection. He is accompanied by his mother. Which of the following is true about asthma?
   A. Air exchange into the blood stream in the alveoli is impaired by mucus.
   B. Chronically inflamed airways are hyper-responsive to triggers.
   C. Pulse oximetry is the best method for assessing asthma control at home.
   D. Symptoms include continual wheezing, coughing, and chest discomfort.

2. Christopher’s mother reports that his symptoms had been significantly better for the past month, so she has not refilled his costly medications for several weeks. What is the medication that was most likely to have been prescribed daily for Christopher’s mild persistent asthma?
   A. Oral corticosteroid.
   B. Oral bronchodilator.
   C. Low-dose inhaled corticosteroid.
   D. High-dose inhaled corticosteroid with long-acting bronchodilator.

3. Christopher’s peak flow rate today is 70% of his personal best rate. What does this indicate?
   A. Green zone – good control of asthma.
   B. Blue zone – moderate control of asthma. Continue long-acting drug and monitor closely.
   C. Yellow zone – caution. Take quick relief medication and monitor.
   D. Red zone – danger. Take quick relief drug and seek medical care if no immediate response.

4. Which of the following is an example of primary prevention?
   A. Sex education.
   B. Biopsies.
   C. Mammogram.
   D. Use of lipid-lowering drugs.

5. An adult patient with symptoms of sinusitis calls the clinic for advice about self-care. The nursing intervention might include:
   A. Advising increased fluids and humidification.
   B. Determining the color and amount of nasal drainage.
   C. Assessing facial pain using a 10-point scale.
   D. Determining the effectiveness of OTC decongestants.

Questions 6 through 8 pertain to the same scenario.

6. Vincent, age 46, has recently been diagnosed with tuberculosis. He stated he has been feeling ill for several weeks, but sought medical attention when he began coughing up bloody secretions. Which of the following symptoms are commonly experienced by persons with active tuberculosis?
   A. Increased appetite and weight gain.
   B. Fatigue, malaise, and night sweats.
   C. Slow pulse rate, edema, and warm dry skin.
   D. High fever and shaking chills.

7. Vincent’s household members and co-workers are required to have tuberculin skin tests. Which of the following accurately describes the appropriate testing?
   A. Injection of 0.1 ml of PPD intradermally with results interpreted in 48-72 hours.
   B. Injection of 0.5 ml of PPD subcutaneously with results interpreted in 48-72 hours.
   C. Injection of 0.1 ml PPD using the multi-prong Tine method with results interpreted in 48-72 hours.
   D. Injection of 0.1 ml of PPD intradermally, repeated in 3 days to check for the “booster” effect.

8. Vincent’s 12-year-old son, Mario, has a positive reaction to his tuberculin skin test. He has no symptoms of active tuberculosis and a chest x-ray is clear. The health department recommends that Mario be placed on isoniazid, because:
   A. He is not currently infected, but is at high risk of contracting tuberculosis from his father.
   B. He has active tuberculosis, but it has not yet manifested lesions and symptoms.
   C. He has an inactive tuberculosis infection, but is too young to take rifampin, which is the drug of choice for prophylaxis.
   D. He has inactive tuberculosis infection, and isoniazid is the drug of choice for prophylaxis.

9. When performing a guaiac test, two drops of developing solution is placed on each box of guaiac paper. The results are read:
   A. Between 30-60 seconds.
   B. After 1 minute.
   C. After 3 minutes.
   D. Between 1-15 seconds.
64. Mr. Hall has completed a referral form for a patient to be seen in the Neurosurgery Associates office across town. He is going to use a facsimile machine ("fax") to send the information to the other office. Which of the following statements is a true and important consideration when using a fax in this situation?

A. Faxing protected health information to another clinician involved in the patient's care is a violation of HIPAA, unless Mr. Hall has authorization to do so from the patient.
B. It is best to verify the fax number before using it.
C. A physician’s signature on a fax is not an accepted legal signature.
D. If the information includes protected psychiatric or sensitive information, such as HIV status, it should be sent by regular mail, along with the patient’s release of information.

65. Several factors make effective communication difficult at the end of life. Which of the following is true?

A. Most families do not have any difficulty providing for the physical and psychological needs of their dying family member.
B. The interdisciplinary team may assume that previous coping and support systems will be effective, although they will need to be intensified in the situation of a dying family member.
C. The patient’s physical condition may affect his/her comprehension and ability to communicate.
D. The palliative care plan is best developed collaboratively by physicians, nurses, and other professionals involved in the patient’s care and communicated to the patient and family at their literacy level.

66. Which of the following would most likely result in a communication barrier for an ambulatory care nurse working with a terminally ill patient?

A. Avoidance of difficult topics by the nurse due to fear of expressing emotion.
B. Lack of knowledge about the medical management options for the patient.
C. Inability to assess and provide care for symptoms such as pain, constipation, and lack of appetite.
D. Inexperience with considering patients’ nonverbal communications, since these are not often important in the care of other patients.

67. All of the following nurse actions would encourage free conversation with a patient and family, except:

A. Applying principles of attentive listening.
B. Providing an atmosphere which is private and free of distractions.
C. Expressing interest in talking with the patient and family.
D. Having a clinical care guideline for treatment of their primary diagnosis.

68. Which of the following is true related to the care of terminally ill children?

A. The nurse should avoid communicating directly with the child about his/her illness and its progression, because he/she needs hope.
B. The child usually knows she/he has a terminal illness even if she/he has not directly been told.
C. The other children in the family will naturally want to scale back on their needs and expectations of the parents, such as involvement in extracurricular activities.
D. In the presence of the child, the nurse might want to use words the child does not understand in communicating with the parents about the child’s care, in order to not alarm or discourage the child.

69. Quality improvement processes for telehealth nursing might include which of the following?

A. Orientation, ongoing staff education, and competency validation.
B. Having third-party nurses auditing nurse-patient calls to identify trends, issues, and outcomes.
C. Writing policies and procedures specific to telehealth services.
D. Asking administrative staff to monitor the length of nursing calls and the volume of notes generated by the nurses.

70. The nursing diagnoses reflect the:

A. Proposed plan of care.
B. Patient’s health problems.
C. Assessment of patient data.
D. Actual nursing interventions.

71. The most significant influences on most patients’ perceptions of pain are their:

A. Sex and age.
B. Overall physical health and age.
C. Intelligence and economic status.
D. Previous experience and cultural values.