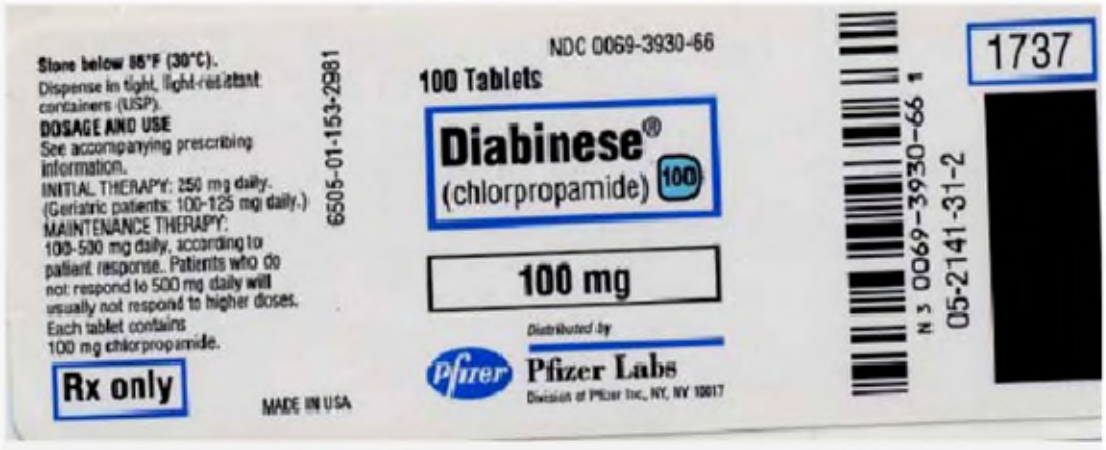
Giangrasso/Shrimpton, Dosage Calculations: A Dimensional Analysis Approach

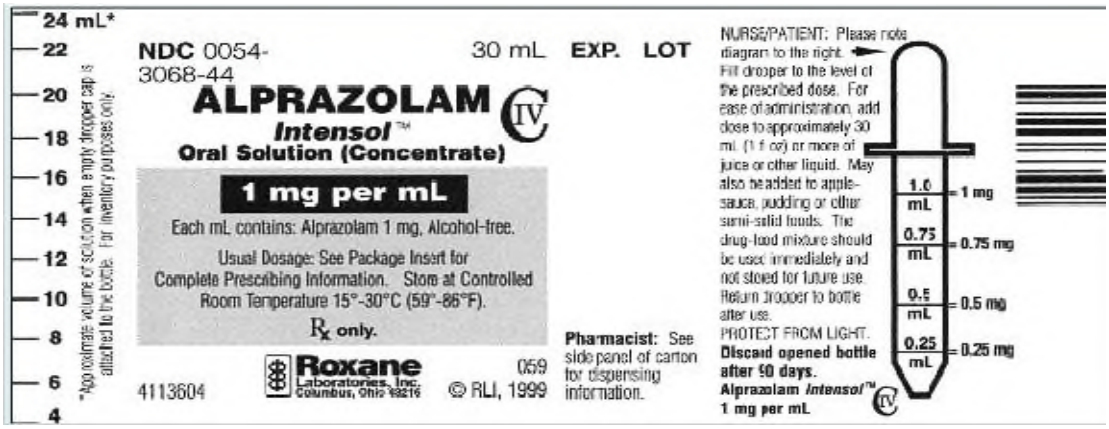
Chapter 2

Question 1
Type: MCSA
A client is prescribed an oral suspension. Which medication is available in this prescribed route?

1. 


2. 


3. 

4. 


Correct Answer: 2

Rationale 1: The only medication that is an oral suspension is the doxycycline monohydrate. The other medications are tablets or a concentrated oral solution.

Rationale 2: The only medication that is an oral suspension is the doxycycline monohydrate. The other medications are tablets or a concentrated oral solution.

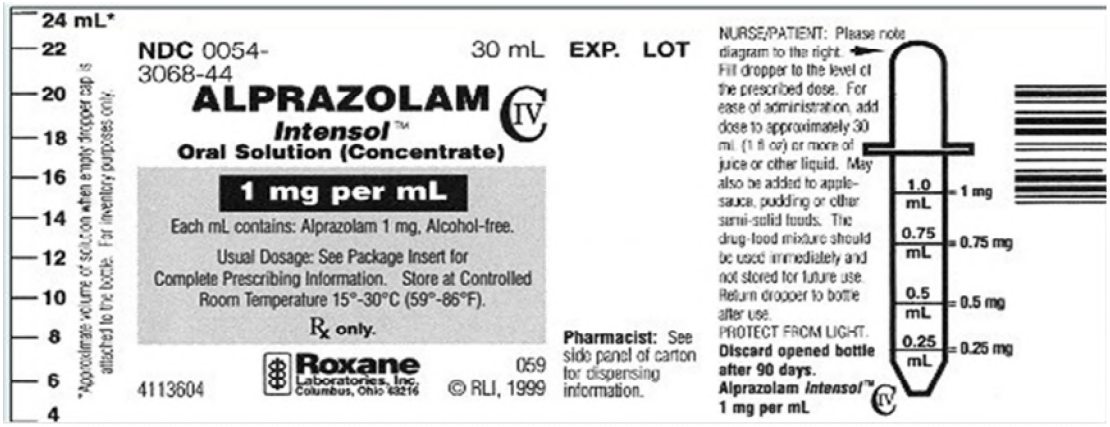
Rationale 3: The only medication that is an oral suspension is the doxycycline monohydrate. The other medications are tablets or a concentrated oral solution.

Rationale 4: The only medication that is an oral suspension is the doxycycline monohydrate. The other medications are tablets or a concentrated oral solution.

Global Rationale: The only medication that is an oral suspension is the doxycycline monohydrate. The other medications are tablets or a concentrated oral solution.

Cognitive Level: Analyzing
Client Need: Physiological Integrity
Client Need Sub: Pharmacological and Parenteral Therapies
Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Describe the six “rights” of safe medication administration.

Question 2
Type: MCSA
A client is prescribed 2 mg of alprazolam. The nurse reviews the order and the medication label in preparation for administration.




After administering 3 mLs of medication to this client, which action by the nurse is the most appropriate?

1. Assess the client's level of pain
2. Monitor the client's blood pressure
3. Document that the medication was provided
4. Report that the incorrect amount was provided

Correct Answer: 4

Rationale 1: The health care provider ordered 2 mg of medication. The medication is a 1 mg to `1 mL concentration; therefore, the nurse should have administered 2 mL, not 3 mL. Since the nurse made a medication error, the most appropriate action is to report that the wrong dose of medication was administered to the client. Alprazolam is a medication prescribed to treat anxiety, not pain or blood pressure. The nurse cannot document that the medication was administered because the wrong dose was given to the client.

Rationale 2: The health care provider ordered 2 mg of medication. The medication is a 1 mg to `1 mL concentration; therefore, the nurse should have administered 2 mL, not 3 mL. Since the nurse made a medication error, the most appropriate action is to report that the wrong dose of medication was administered to the client. Alprazolam is a medication prescribed to treat anxiety, not pain or blood pressure. The nurse cannot document that the medication was administered because the wrong dose was given to the client.

Rationale 3: The health care provider ordered 2 mg of medication. The medication is a 1 mg to `1 mL concentration; therefore, the nurse should have administered 2 mL, not 3 mL. Since the nurse made a medication error, the most appropriate action is to report that the wrong dose of medication was administered to the client. Alprazolam is a medication prescribed to treat anxiety, not pain or blood pressure. The nurse cannot document that the medication was administered because the wrong dose was given to the client.

Rationale 4: The health care provider ordered 2 mg of medication. The medication is a 1 mg to `1 mL concentration; therefore, the nurse should have administered 2 mL, not 3 mL. Since the

nurse made a medication error, the most appropriate action is to report that the wrong dose of medication was administered to the client. Alprazolam is a medication prescribed to treat anxiety, not pain or blood pressure. The nurse cannot document that the medication was administered because the wrong dose was given to the client.

Global Rationale: The health care provider ordered 2 mg of medication. The medication is a 1 mg to `1 mL concentration; therefore, the nurse should have administered 2 mL, not 3 mL. Since the nurse made a medication error, the most appropriate action is to report that the wrong dose of medication was administered to the client. Alprazolam is a medication prescribed to treat anxiety, not pain or blood pressure. The nurse cannot document that the medication was administered because the wrong dose was given to the client.

Cognitive Level: Applying
Client Need: Safe and Effective Care Environment
Client Need Sub: Management of Care
Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Explain the legal implications of medication administration.

Question 3
Type: MCSA
The healthcare provider prescribes 2 milligrams of diazepam (Valium) to be administered through intravenous push as needed for anxiety. How should this medication order be written?

1. Diazepam 2 mg IVP prn
2. Diazepam 2 mcg IV ac
3. Diazepam 2 mcg IVP prn
4. Diazepam 2 mg IVPB ad lib

Correct Answer: 1

Rationale 1: The order diazepam 2 mg IVP prn means that 2 mg of diazepam is to be given intravenous push as needed. The order for diazepam 2 mcg IV ac includes the wrong dose, route, and frequency. The order for diazepam 2 mcg IVP prn is the wrong dose. The order for diazepam 2mg IVPB ad lib is the wrong route and the wrong frequency.

Rationale 2: The order diazepam 2 mg IVP prn means that 2 mg of diazepam is to be given intravenous push as needed. The order for diazepam 2 mcg IV ac includes the wrong dose, route, and frequency. The order for diazepam 2 mcg IVP prn is the wrong dose. The order for diazepam 2mg IVPB ad lib is the wrong route and the wrong frequency.

Rationale 3: The order diazepam 2 mg IVP prn means that 2 mg of diazepam is to be given intravenous push as needed. The order for diazepam 2 mcg IV ac includes the wrong dose, route, and frequency. The order for diazepam 2 mcg IVP prn is the wrong dose. The order for diazepam 2mg IVPB ad lib is the wrong route and the wrong frequency.

Rationale 4: The order diazepam 2 mg IVP prn means that 2 mg of diazepam is to be given intravenous push as needed. The order for diazepam 2 mcg IV ac includes the wrong dose, route, and frequency. The order for diazepam 2 mcg IVP prn is the wrong dose. The order for diazepam 2mg IVPB ad lib is the wrong route and the wrong frequency.

Global Rationale: The order diazepam 2 mg IVP prn means that 2 mg of diazepam is to be given intravenous push as needed. The order for diazepam 2 mcg IV ac includes the wrong dose, route, and frequency. The order for diazepam 2 mcg IVP prn is the wrong dose. The order for diazepam 2mg IVPB ad lib is the wrong route and the wrong frequency.

Cognitive Level: Analyzing
Client Need: Safe and Effective Care Environment
Client Need Sub: Management of Care
Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: Identify common abbreviations used in medication administration.

Question 4
Type: MCSA

The nurse is preparing to administer a medication to the client and must find the generic name of the medication on the label to compare to the medication administration record. What is the generic name for this medication?


1. Vibramycin
2. Doxycycline monohydrate
3. Pfizer labs
4. Raspberry

Correct Answer: 2

Rationale 1: The generic name of a medication is usually found in parenthesis on the drug label. The generic name for this medication is doxycycline monohydrate. Vibramycin is the trade or

brand name for this medication. Pfizer labs is the manufacturer and raspberry is the flavor of the medication.

Rationale 2: The generic name of a medication is usually found in parenthesis on the drug label. The generic name for this medication is doxycycline monohydrate. Vibramycin is the trade or brand name for this medication. Pfizer labs is the manufacturer and raspberry is the flavor of the medication.

Rationale 3: The generic name of a medication is usually found in parenthesis on the drug label. The generic name for this medication is doxycycline monohydrate. Vibramycin is the trade or brand name for this medication. Pfizer labs is the manufacturer and raspberry is the flavor of the medication.

Rationale 4: The generic name of a medication is usually found in parenthesis on the drug label. The generic name for this medication is doxycycline monohydrate. Vibramycin is the trade or brand name for this medication. Pfizer labs is the manufacturer and raspberry is the flavor of the medication.

Global Rationale: The generic name of a medication is usually found in parenthesis on the drug label. The generic name for this medication is doxycycline monohydrate. Vibramycin is the trade or brand name for this medication. Pfizer labs is the manufacturer and raspberry is the flavor of the medication.

Cognitive Level: Understanding
Client Need: Physiological Integrity
Client Need Sub: Pharmacological and Parenteral Therapies
Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Compare the trade name and generic name of drugs

Question 5
Type: MCSA
The nurse is preparing to administer this medication order: cyclobenzaprine hydrochloride (Amrix) 7.5 mg PO tid. How often will the nurse provide the medication?

1. Once a day
2. Every 6 hours
3. Every 12 hours
4. Three times a day

Correct Answer: 4

Rationale 1: The abbreviation tid means three times a day. This medication should be provided three times a day and not once a day, or every 6 or 12 hours.

Rationale 2: The abbreviation tid means three times a day. This medication should be provided three times a day and not once a day, or every 6 or 12 hours.

Rationale 3: The abbreviation tid means three times a day. This medication should be provided three times a day and not once a day, or every 6 or 12 hours.

Rationale 4: The abbreviation tid means three times a day. This medication should be provided three times a day and not once a day, or every 6 or 12 hours.

Global Rationale: The abbreviation tid means three times a day. This medication should be provided three times a day and not once a day, or every 6 or 12 hours.

Cognitive Level: Applying
Client Need: Safe and Effective Care Environment
Client Need Sub: Management of Care
Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Identify and interpret the components of a Drug Prescription, Physician's Order, and Medication Administration Record.

Question 6
Type: MCSA
The health care provider prescribes the following for the client: prochlorperazine (Compazine) 25 mg PR bid. Which route should the nurse prepare to administer this medication?

1. Oral
2. Rectal
3. Buccal
4. Topical

Correct Answer: 2

Rationale 1: PR is the abbreviation for per rectum; therefore, the nurse will plan to provide a rectal suppository twice per day. The abbreviation for the oral route is PO. There is no abbreviation for the buccal or topical routes.

Rationale 2: PR is the abbreviation for per rectum; therefore, the nurse will plan to provide a rectal suppository twice per day. The abbreviation for the oral route is PO. There is no abbreviation for the buccal or topical routes.

Rationale 3: PR is the abbreviation for per rectum; therefore, the nurse will plan to provide a rectal suppository twice per day. The abbreviation for the oral route is PO. There is no abbreviation for the buccal or topical routes.

Rationale 4: PR is the abbreviation for per rectum; therefore, the nurse will plan to provide a rectal suppository twice per day. The abbreviation for the oral route is PO. There is no abbreviation for the buccal or topical routes.

Global Rationale: PR is the abbreviation for per rectum; therefore, the nurse will plan to provide a rectal suppository twice per day. The abbreviation for the oral route is PO. There is no abbreviation for the buccal or topical routes.

Cognitive Level: Applying
Client Need: Safe and Effective Care Environment
Client Need Sub: Management of Care
Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Identify and interpret the components of a Drug Prescription, Physician's Order, and Medication Administration Record.

Revised Questions
Question 7
Type: Exhibit/Graphic

| Red Check Initial | Order Date | Initial | Exp. Date | Medication, Dosage, Frequency, and Route | Hours | 9/10/08 | 9/11/08 | 9/13/08 |
|---|---|---|---|---|---|---|---|---|
| | 9/10/08 | DM | 10/10/08 | LANOXIN (DIGOXIN) 0.125MG P.O. DAILY | 1000 | DM | DM | DM |
| | | | | | | | | |
| | 9/10/08 | DM | 10/10/08 | LASIX (FUROSEMIDE) 40 MG IV STAT AND THEN Q AM | 0800 | DM | DM | DM |
| | | | | | | | | |
| | 9/10/08 | DM | 10/10/08 | K-DUR (POTASSIUM CHLORIDE) 40 MEQ P.O. DAILY | 1000 | DM | DM | DM |
| | | | | | | | | |
| | 9/12/08 | DM | 9/19/08 | REGLAN (METOCLOPRAMIDE HYDROCHLORIDE) 10 MG AC AND HS | 0900 | | | |
| | | | | | 1300 | | | DM |
| | | | | | 1800 | | | DM |
| | | | | | 2200 | | | DM |

Figure C1 - MAR

The nurse is reviewing the medication administration record (MAR) for a client being cared for on the medical-surgical unit. When should the next dose of metoclopramide hydrochloride (Reglan) be provided to the client?

1. 0900 9/14/08
2. 1300 9/14/08
3. 1800 9/14/08
4. 2200 9/14/08

Correct Answer: 1

Rationale 1: The medication is prescribed to be given ac, or before meals, and at hs or hour of sleep. The last dose documented was 2200 on 9/13/08. The next dose should be provided at 0900 9/14/08 before breakfast.

Rationale 2: The medication is prescribed to be given ac, or before meals, and at hs or hour of sleep. The last dose documented was 2200 on 9/13/08. The next dose should be provided at 0900 9/14/08 before breakfast.

Rationale 3: The medication is prescribed to be given ac, or before meals, and at hs or hour of sleep. The last dose documented was 2200 on 9/13/08. The next dose should be provided at 0900 9/14/08 before breakfast.

Rationale 4: The medication is prescribed to be given ac, or before meals, and at hs or hour of sleep. The last dose documented was 2200 on 9/13/08. The next dose should be provided at 0900 9/14/08 before breakfast.

Global Rationale: The medication is prescribed to be given ac, or before meals, and at hs or hour of sleep. The last dose documented was 2200 on 9/13/08. The next dose should be provided at 0900 9/14/08 before breakfast.

Cognitive Level: Analyzing
Client Need: Safe and Effective Care Environment
Client Need Sub: Management of Care
Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: Identify and interpret the components of a Drug Prescription, Physician's Order, and Medication Administration Record.

Question 8
Type: Exhibit/Graphic

| Red Check Initial | Order Date | Initial | Exp. Date | Medication, Dosage, Frequency, and Route | Hours | 9/10/08 | 9/11/08 | 9/13/08 |
|---|---|---|---|---|---|---|---|---|
| | 9/10/08 | DM | 10/10/08 | LANOXIN (DIGOXIN) 0.125MG P.O. DAILY | 1000 | DM | DM | DM |
| | | | | | | | | |
| | 9/10/08 | DM | 10/10/08 | LASIX (FUROSEMIDE) 40 MG IV STAT AND THEN Q AM | 0800 | DM | DM | DM |
| | | | | | | | | |
| | 9/10/08 | DM | 10/10/08 | K-DUR (POTASSIUM CHLORIDE) 40 MEQ P.O. DAILY | 1000 | DM | DM | DM |
| | | | | | | | | |
| | 9/12/08 | DM | 9/19/08 | REGLAN (METOCLOPRAMIDE HYDROCHLORIDE) 10 MG AC AND HS | 0900 | | | |
| | | | | | 1300 | | | DM |
| | | | | | 1800 | | | DM |
| | | | | | 2200 | | | DM |

Figure C1 - MAR

The nurse is planning to provide medications after receiving morning report. Which medication should the nurse provide first in the morning?

1. Lasix
2. K-dur
3. Reglan
4. Lanoxin

Correct Answer: 1

Rationale 1: Lasix is ordered to be given every AM or morning. This is the medication that the nurse should provide first as it is due at 0800. K-dur is prescribed to be given daily. This medication can be given any time during the day and is ordered for 1000. Reglan is prescribed to be given before meals and at bedtime. This medication should be provided immediately before breakfast and is ordered for 0900. Lanoxin is prescribed to be given daily. This medication can be given any time during the day and is ordered for 1000.

Rationale 2: Lasix is ordered to be given every AM or morning. This is the medication that the nurse should provide first as it is due at 0800. K-dur is prescribed to be given daily. This medication can be given any time during the day and is ordered for 1000. Reglan is prescribed to be given before meals and at bedtime. This medication should be provided immediately before breakfast and is ordered for 0900. Lanoxin is prescribed to be given daily. This medication can be given any time during the day and is ordered for 1000.

Rationale 3: Lasix is ordered to be given every AM or morning. This is the medication that the nurse should provide first as it is due at 0800. K-dur is prescribed to be given daily. This medication can be given any time during the day and is ordered for 1000. Reglan is prescribed to be given before meals and at bedtime. This medication should be provided immediately before breakfast and is ordered for 0900. Lanoxin is prescribed to be given daily. This medication can be given any time during the day and is ordered for 1000.

Rationale 4: Lasix is ordered to be given every AM or morning. This is the medication that the nurse should provide first as it is due at 0800. K-dur is prescribed to be given daily. This medication can be given any time during the day and is ordered for 1000. Reglan is prescribed to be given before meals and at bedtime. This medication should be provided immediately before breakfast and is ordered for 0900. Lanoxin is prescribed to be given daily. This medication can be given any time during the day and is ordered for 1000.

Global Rationale: Lasix is ordered to be given every AM or morning. This is the medication that the nurse should provide first as it is due at 0800. K-dur is prescribed to be given daily. This medication can be given any time during the day and is ordered for 1000. Reglan is prescribed to be given before meals and at bedtime. This medication should be provided immediately before breakfast and is ordered for 0900. Lanoxin is prescribed to be given daily. This medication can be given any time during the day and is ordered for 1000.

Cognitive Level: Applying
Client Need: Safe and Effective Care Environment
Client Need Sub: Management of Care
Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Identify and interpret the components of a Drug Prescription, Physician's Order, and Medication Administration Record.

Question 9
Type: Exhibit

| Medication | Hours | 9/11 | 9/12 | 9/13 | 9/14 | 9/15 | 9/16 | 9/17 |
|---|---|---|---|---|---|---|---|---|
| ampicillin 1 g IVPB q.6h. | 0600 | X | CF | CF | CR | CR | | |
| | 1200 | X | CK | CK | CR | CR | | |
| | 1800 | X | CK | CK | CK | CK | | |
| | 2400 | CF | CR | CR | CK | CF | | |
| digoxin 0.125 mg p.o. daily | 0900 | SS | CK | CK | CR | CR | | |
| Coumadin 5 mg p.o. daily | 0900 | SS | CK | CK | CR | CR | | |
| furosemide 40 mg IM stat. | 1900 | X | X | CK | X | X | | |

The nurse is reviewing a client's medication administration record (MAR). Which nurse provided the client with ampicillin 1 g IVPB at 1800 hours on 9/12?

1. SS
2. CF
3. CK
4. CR

Correct Answer: 3

Rationale 1: CK provided the client with ampicillin at 1200 and 1800 on 9/12. SS did not provide the client with any ampicillin. CF provided the client with ampicillin at 0600 on 9/12. CR provided the client with ampicillin at 2400 on 9/12.

Rationale 2: CK provided the client with ampicillin at 1200 and 1800 on 9/12. SS did not provide the client with any ampicillin. CF provided the client with ampicillin at 0600 on 9/12. CR provided the client with ampicillin at 2400 on 9/12.

Rationale 3: CK provided the client with ampicillin at 1200 and 1800 on 9/12. SS did not provide the client with any ampicillin. CF provided the client with ampicillin at 0600 on 9/12. CR provided the client with ampicillin at 2400 on 9/12.

Rationale 4: CK provided the client with ampicillin at 1200 and 1800 on 9/12. SS did not provide the client with any ampicillin. CF provided the client with ampicillin at 0600 on 9/12. CR provided the client with ampicillin at 2400 on 9/12.

Global Rationale: CK provided the client with ampicillin at 1200 and 1800 on 9/12. SS did not provide the client with any ampicillin. CF provided the client with ampicillin at 0600 on 9/12. CR provided the client with ampicillin at 2400 on 9/12.

Cognitive Level: Analyzing
Client Need: Safe and Effective Care Environment
Client Need Sub: Management of Care
Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: Identify and interpret the components of a Drug Prescription, Physician's Order, and Medication Administration Record.

Question 10
Type: Exhibit

| Medication | Hours | 11/01 Sun | 11/02 Mon | 11/03 Tues | 11/04 Wed | 11/05 Thur | 11/06 Fri | 11/07 Sat |
|---|---|---|---|---|---|---|---|---|
| amlodipine 5 mg p.o. daily | 10:00 a.m. | SL | SL | SL | LK | LK | | |
| Epogen 2,000 units subcutaneously three times a week (M/W/F) | 10:00 a.m. | X | SL | X | LK | X | X | |
| Humulin NPH insulin U-100 46 units subcut. AC breakfast | 6:30 a.m. | JL | JL | JL | MW | MW | | |
| Colace 100 mg p.o. b.i.d. | 10:00 a.m.<br>2:00 p.m. | SL<br>SL | SL<br>SL | SL<br>SL | LK<br>LK | LK<br>LK | | |
| acetaminophen 650 mg p.o. p.r.n. Temp 102°F or higher | | | | | | | | |

A client has a temperature of $102.6^0$F. When was the last dose of acetaminophen for a temperature provided to the client?

1. 6:30 am 11/05
2. 10 am 11/05
3. 2 pm 11/5
4. Not provided

Correct Answer: 4

Rationale 1: There is no documentation for acetaminophen being given to the client for an elevated temperature. Insulin was provided at 6:30 am on 11/5. Amlodipine, Epogen, and Colace were provided at 10 am on 11/5. Colace was provided at 2 pm on 11/5.

Rationale 2: There is no documentation for acetaminophen being given to the client for an elevated temperature. Insulin was provided at 6:30 am on 11/5. Amlodipine, Epogen, and Colace were provided at 10 am on 11/5. Colace was provided at 2 pm on 11/5.

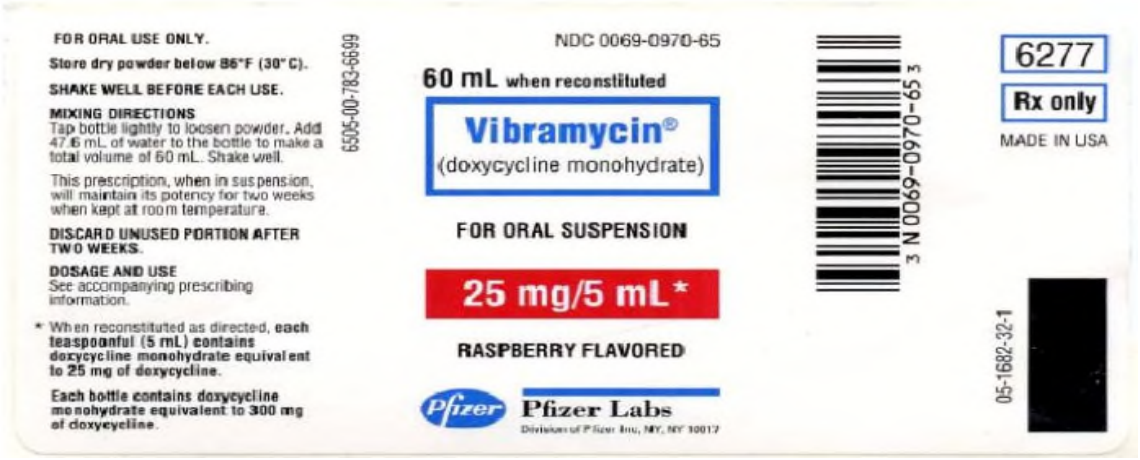
Rationale 3: There is no documentation for acetaminophen being given to the client for an elevated temperature. Insulin was provided at 6:30 am on 11/5. Amlodipine, Epogen, and Colace were provided at 10 am on 11/5. Colace was provided at 2 pm on 11/5.

Rationale 4: There is no documentation for acetaminophen being given to the client for an elevated temperature. Insulin was provided at 6:30 am on 11/5. Amlodipine, Epogen, and Colace were provided at 10 am on 11/5. Colace was provided at 2 pm on 11/5.

Global Rationale: There is no documentation for acetaminophen being given to the client for an elevated temperature. Insulin was provided at 6:30 am on 11/5. Amlodipine, Epogen, and Colace were provided at 10 am on 11/5. Colace was provided at 2 pm on 11/5.

Cognitive Level: Analyzing
Client Need: Safe and Effective Care Environment
Client Need Sub: Management of Care
Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: Identify and interpret the components of a Drug Prescription, Physician's Order, and Medication Administration Record.

Question 11
Type: FIB




A client is prescribed 12.5 mg of doxycycline monohydrate (Vibramycin) oral suspension every 8 hours. How many doses are available in this container?

Correct Answer: 24 doses

Global Rationale: The bottle contains 60 mL. Each dose is 12.5 mg in 2.5 mL. The nurse should divide the total number of mL or 60 by each dose or 2.5 to determine that there are 24 doses of medication available in this container.

Cognitive Level: Analyzing
Client Need: Safe and Effective Care Environment
Client Need Sub: Management of Care
Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Interpret information found on drug labels and in prescribing information.

Question 12
Type: MCSA

The nurse is reviewing documentation provided by a novice nursing during a shift. Which item would necessitate the need for the nurse to review correct documentation with the novice nurse?

1. Client is able to take medications po.
2. Client is NPO after midnight.
3. The NGT is patent and medication administered without difficulty.
4. .2 mg administered per order.

Correct Answer: 4

Rationale 1: When documenting the dose of a medication, doses less than a whole number require a zero prior to the decimal. The novice nurse should have documented 0.2 mg administered per order. The other pieces of documentation are appropriate.

Rationale 2: When documenting the dose of a medication, doses less than a whole number require a zero prior to the decimal. The novice nurse should have documented 0.2 mg administered per order. The other pieces of documentation are appropriate.

Rationale 3: When documenting the dose of a medication, doses less than a whole number require a zero prior to the decimal. The novice nurse should have documented 0.2 mg administered per order. The other pieces of documentation are appropriate.

Rationale 4: When documenting the dose of a medication, doses less than a whole number require a zero prior to the decimal. The novice nurse should have documented 0.2 mg administered per order. The other pieces of documentation are appropriate.

Global Rationale: When documenting the dose of a medication, doses less than a whole number require a zero prior to the decimal. The novice nurse should have documented 0.2 mg administered per order. The other pieces of documentation are appropriate.

Cognitive Level: Applying
Client Need: Safe and Effective Care Environment
Client Need Sub: Management of Care
Nursing/Integrated Concepts: Nursing Process: Evaluation
Learning Outcome: Identify common abbreviations used in medication administration.

Question 13
Type: MCMA

The nurse educator is preparing to teach a group of nursing students about the required components of a medication order. Which items will the educator include in the presentation?

Standard Text: Select all that apply.

1. Patient's full name
2. Patient's insurance
3. Patient's religion
4. The date the order was written.
5. The name of the medication.

Correct Answer: 1,4,5

Rationale 1: A medication order must include the patient's full name, date of birth, the date and time the order was written, the name of the medication, the dosage, the route of administration, time and frequency of administration, the signature of the prescriber and the signature of the person who is transcribing the order. Insurance information and patient religion are optional items that may be included, but they are not requirements.

Rationale 2: A medication order must include the patient's full name, date of birth, the date and time the order was written, the name of the medication, the dosage, the route of administration, time and frequency of administration, the signature of the prescriber and the signature of the person who is transcribing the order. Insurance information and patient religion are optional items that may be included, but they are not requirements.

Rationale 3: A medication order must include the patient's full name, date of birth, the date and time the order was written, the name of the medication, the dosage, the route of administration, time and frequency of administration, the signature of the prescriber and the signature of the person who is transcribing the order. Insurance information and patient religion are optional items that may be included, but they are not requirements.

Rationale 4: A medication order must include the patient's full name, date of birth, the date and time the order was written, the name of the medication, the dosage, the route of administration, time and frequency of administration, the signature of the prescriber and the signature of the person who is transcribing the order. Insurance information and patient religion are optional items that may be included, but they are not requirements.

Rationale 5: A medication order must include the patient's full name, date of birth, the date and time the order was written, the name of the medication, the dosage, the route of administration, time and frequency of administration, the signature of the prescriber and the signature of the

person who is transcribing the order. Insurance information and patient religion are optional items that may be included, but they are not requirements.

Global Rationale: A medication order must include the patient's full name, date of birth, the date and time the order was written, the name of the medication, the dosage, the route of administration, time and frequency of administration, the signature of the prescriber and the signature of the person who is transcribing the order. Insurance information and patient religion are optional items that may be included, but they are not requirements.

Cognitive Level: Applying
Client Need: Safe and Effective Care Environment
Client Need Sub: Management of Care
Nursing/Integrated Concepts: Nursing Process: Planning
Learning Outcome: Identify and interpret the components of a Drug Prescription, Physician's Order, and Medication Administration Record.

Question 14
Type: MCSA

The nurse is preparing to administer prescribed medications to a client with a gastrostomy tube (GT). Which medication is not appropriate to administer through a GT?

1. Capsule
2. Gel tab
3. Liquid suspension
4. Extended-release tablet

Correct Answer: 4

Rationale 1: Medications that are administered through a gastrostomy tube must be in the liquid form or be crushed and mixed with water. Extended-release tablets cannot be crushed; therefore, this medication order is not appropriate for this client. The contents of the capsule and gel tab can be mixed with water and administered to this client.

Rationale 2: Medications that are administered through a gastrostomy tube must be in the liquid form or be crushed and mixed with water. Extended-release tablets cannot be crushed; therefore, this medication order is not appropriate for this client. The contents of the capsule and gel tab can be mixed with water and administered to this client.

Rationale 3: Medications that are administered through a gastrostomy tube must be in the liquid form or be crushed and mixed with water. Extended-release tablets cannot be crushed; therefore, this medication order is not appropriate for this client. The contents of the capsule and gel tab can be mixed with water and administered to this client.

Rationale 4: Medications that are administered through a gastrostomy tube must be in the liquid form or be crushed and mixed with water. Extended-release tablets cannot be crushed; therefore,

this medication order is not appropriate for this client. The contents of the capsule and gel tab can be mixed with water and administered to this client.

Global Rationale: Medications that are administered through a gastrostomy tube must be in the liquid form or be crushed and mixed with water. Extended-release tablets cannot be crushed; therefore, this medication order is not appropriate for this client. The contents of the capsule and gel tab can be mixed with water and administered to this client.

Cognitive Level: Analyzing
Client Need: Physiological Integrity
Client Need Sub: Pharmacological and Parenteral Therapies
Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: Describe the forms in which medications are supplied.

Question 15
Type: MCSA

The nurse is assessing a client in an outpatient clinic. The client states the last dose of Coumadin was taken at 5:00 pm . When documenting this in the medical record, which military time entry is correct?

1. 1500 h
2. 1600 h
3. 1700 h
4. 1800 h

Correct Answer: 3

Rationale 1: The FDA prefers that the time of medication administration be documented using military time. 5:00 pm would be documented as 1700 hours, or 1700 h. 1500 h is 3:00pm, 1600 h is 4:00 pm, and 1800 h is 6:00 pm.

Rationale 2: The FDA prefers that the time of medication administration be documented using military time. 5:00 pm would be documented as 1700 hours, or 1700 h. 1500 h is 3:00pm, 1600 h is 4:00 pm, and 1800 h is 6:00 pm.

Rationale 3: The FDA prefers that the time of medication administration be documented using military time. 5:00 pm would be documented as 1700 hours, or 1700 h. 1500 h is 3:00pm, 1600 h is 4:00 pm, and 1800 h is 6:00 pm.

Rationale 4: The FDA prefers that the time of medication administration be documented using military time. 5:00 pm would be documented as 1700 hours, or 1700 h. 1500 h is 3:00pm, 1600 h is 4:00 pm, and 1800 h is 6:00 pm.

Global Rationale: The FDA prefers that the time of medication administration be documented using military time. 5:00 pm would be documented as 1700 hours, or 1700 h. 1500 h is 3:00pm, 1600 h is 4:00 pm, and 1800 h is 6:00 pm.

Cognitive Level: Applying
Client Need: Safe and Effective Care Environment
Client Need Sub: Management of Care
Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: Identify and interpret the components of a Drug Prescription, Physician's Order, and Medication Administration Record.