NCSBN
Leading Regulatory Excellence

REx-PN®

REx-PN® Test Plan

Effective January 2027

NCSBN
Leading Regulatory Excellence

Mission Statements

NCSBN® empowers and supports nursing regulators in their mandate to protect the public.

(Mission Statement Adopted by Delegate Assembly 2019)

The British Columbia College of Nurses and Midwives (BCCNM) is the regulator for all nurses in British Columbia, including licensed practical nurses (LPNs), nurse practitioners (NPs), registered nurses (RNs) and registered psychiatric nurses (RPNs). BCCNM meets its public protection mandate by setting standards of practice, assessing nursing education programs in B.C. and addressing complaints about BCCNM registrants.

The College of Nurses of Ontario (CNO) is the governing body for Registered Nurses (RNs), Registered Practical Nurses (RPNs) and Nurse Practitioners (NPs) in Ontario. CNO's mission is to regulate nursing in the public interest. CNO fulfills its role by: establishing requirements for entry to practice; articulating and promoting practice standards; administering its Quality Assurance Program and enforcing standards of practice and conduct.

Address inquiries in writing to NCSBN Permissions, 111 E. Wacker Drive, Suite 2900, Chicago, IL 60601-4277. Suggested Citation: National Council of State Boards of Nursing. (2026). *2027 REx-PN® Test Plan*. Chicago: Author.

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V. Appendix A

I. Background

This test plan contains detailed information about the content areas tested in British Columbia's and Ontario's Regulatory Exam-Practical Nurse (REx-PN®). Its purposes are to:

- Guide candidates preparing to write the exam;
- Direct REx-PN exam content writers in developing items (questions); and
- Provide a way to classify exam items.

This booklet contains:

- *2027 REx-PN® Test Plan:* a comprehensive list of content for each category and subcategory of items;
- Information on testing requirements with sample exam items;
- A guide with additional sample exam items to provide nurse educators with hands-on experience in writing REx-PN-style test items; and
- Bibliography and appendix.

British Columbia College of Nurses and Midwives (BCCNM) and the College of Nurses of Ontario (CNO) developed this document in collaboration with the National Council of State Boards of Nursing, Inc. (NCSBN®). With consideration of CNO and BCNNM standards of practice, the test plan is reviewed and approved by the REx-PN® Examination Committee (PNEC) every five years. Multiple resources are used in this review, including:

- BCCNM Entry-Level Competencies for LPNs (BCCNM, 2021);
- CNO Entry-to-Practice Competencies for RPNs (CNO, 2023);
- *2025 REx-PN® Practice Analysis* (NCSBN, 2025); and
- Expert opinions of PNEC, NCSBN content staff and nursing regulatory bodies to ensure that the test plan is consistent with nursing acts and legislation.

For up-to-date information on the REx-PN, visit rexpn.com.

II. 2027 REx-PN® Test Plan

Purpose of the REx-PN®

Entry into the practice of nursing is regulated in British Columbia by the British Columbia College of Nurses and Midwives (BCCNM) and in Ontario by the College of Nurses of Ontario (CNO). To protect the public, BCCNM and CNO require those candidates registering to practice to meet specific requirements. These include passing a regulatory examination to assess whether the candidate has the knowledge, skills and judgment essential for an entry-level nurse to safely meet clients' needs within the first year of practice. BCCNM and CNO use the Regulatory Examination-Practical Nurse (REx-PN®) for this purpose.

The first step in developing the REx-PN involved collecting data on the current practice of entry-level practical nurses (*2025 REx-PN® Practice Analysis*, NCSBN, 2025). A total of 5,033 newly licensed LPN/RPNs (738 LPNs in B.C. and 4,295 RPNs in Ontario) were asked about the frequency and importance of performing nursing care activities. These activities were analyzed based on:

- How often each is performed by PNs;
- The impact on client safety; and
- The client care settings where these activities are performed.

This practice analysis was then used to develop a framework for entry-level nursing practice that incorporates specific client needs and processes fundamental to the practice of nursing.

Next, this REx-PN Test Plan — a concise summary of the content and scope of the exam — was developed as a guide in selecting the content and behaviours to be tested. It is also a guide for candidates to use in preparing to write the exam.

Assumptions

- People are unique; live according to their own set of values, motives and lifestyles; and function in society to varying capacities.
- People have the right to make decisions regarding their health care needs and to participate in meeting those needs. The nurse-client relationship is the foundation of nursing practice across all practice settings. It is always client focused, based on clients' care needs and maintains professional boundaries.
- A client's right to safe, competent and ethical care is of the highest importance.
- Nurses advocate for and educate their clients.
- PNs must have the knowledge, skills and judgment (competencies) required to provide clients with safe, competent, ethical and compassionate care.
- Graduates of PN education programs achieve the competencies required for entry-level practice through a variety of learning experiences including theory courses, lab, simulation and practice placements.
- PNs provide care across the lifespan and continuum of clients' care as members of a health care team. Client care is consistent with the client's unique cultural and spiritual preferences and adheres to provincial standards, regulations, legislation and employer policies.
- Nursing is a dynamic, continuously evolving discipline. PNs must think critically to integrate complex knowledge, skills, technologies and client care activities into evidence-based nursing practice.

- The goals of nursing in client care are:
  - Preventing illness and potential complications.
  - Protecting, promoting, restoring and facilitating comfort, health and dignity in dying.

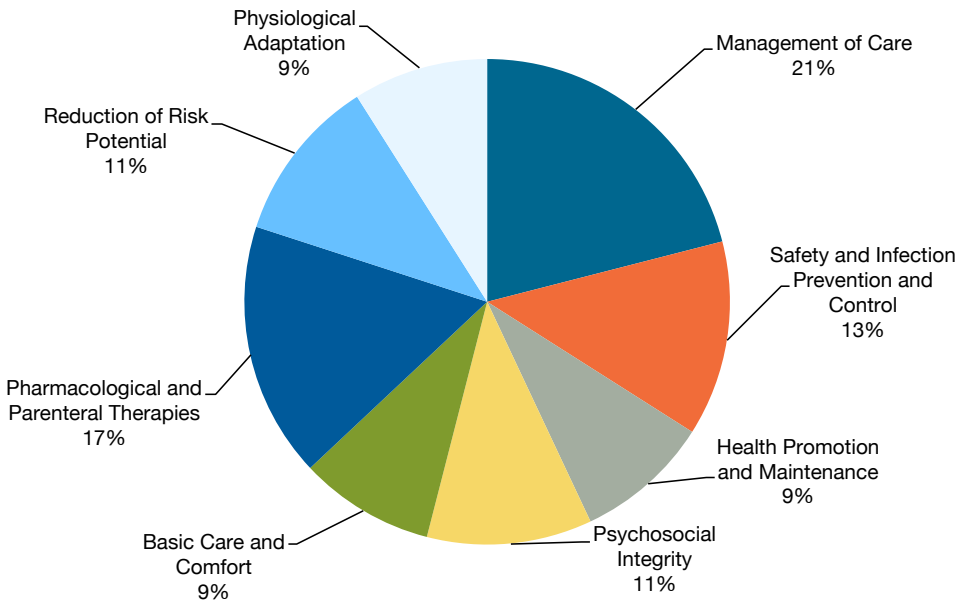
Test Plan Structure Based on Client Care Needs

Client care needs are the framework for the REx-PN. They provide a universal structure for defining entry-level nursing actions and competencies, while focusing on clients in all settings.

The REx-PN Test Plan is organized as follows, with a percentage of test items assigned to each Client Needs category and subcategory. They are based on the results of the *2025 REx-PN® Practice Analysis* (NCSBN, 2025) and expert review from members of the REx-PN Examination Committee (PNEC).

Client Needs	Percentage of Items from Each Category/Subcategory
Safe and Effective Care Environment	
· Management of Care	18–24%
· Safety and Infection Prevention and Control	10–16%
Health Promotion and Maintenance	6–12%
Psychosocial Integrity	8–14%
Physiological Integrity	
· Basic Care and Comfort	6–12%
· Pharmacological and Parenteral Therapies	14–20%
· Reduction of Risk Potential	8–14%
· Physiological Adaptation	6–12%

Distribution of Content for the REx-PN® Test Plan



REx-PN is administered adaptively in varying lengths to target a candidate's specific ability. To accommodate this, the distribution of content in individual examinations may differ up to ±3% in each category.

Integrated Processes

The following processes are fundamental to the practice of nursing and are integrated throughout the Client Needs categories and subcategories.

- *Nursing Process* – using a scientific, clinical reasoning approach to client care based on assessment, analysis, planning, implementation and evaluation.
- *Caring* – interacting with clients in an atmosphere of mutual respect and trust. In this collaborative environment, the nurse provides encouragement, hope, support and compassion to help achieve the client's desired outcomes.
- *Communication and Documentation* – engaging in verbal and nonverbal interactions with the nurse and the client, the client's significant others and members of the health care team. Events and activities associated with client care are recorded in written and/or electronic records that adhere to the standards of practice and accountability in providing care.
- *Teaching/Learning* – empowering the client to make autonomous decisions to prevent illness, promote health and well-being, and foster lasting changes in behaviour.
- *Culture and Spirituality* – interacting with the client (individual, family or group, including significant others and populations) while considering the client's self-identified, unique and individual care preferences; the applicable standard of care; and legal considerations.
- *Client Safety* – creating a safe environment for the client by continually assessing, preventing, managing and treating unsafe and potentially unsafe acts within the care context.

Overview of Content

The activity statements used in the *2025 REx-PN® Practice Analysis* (NCSBN, 2025) preface each of the eight content categories/subcategories and are identified throughout the test plan by an asterisk(*). NCSBN performs an analysis of those activities used frequently and identified as important by entry-level nurses to ensure client safety. The practice analysis provides data to support the REx-PN as a reliable, valid measure of competent, entry-level nursing practice. The practice analysis is conducted every five years. Findings from the *2025 REx-PN® Practice Analysis* can be found at rexpn.com/about.page.

The practice analysis report is used in the development of the REx-PN Test Plan. All task statements in the *2027 REx-PN® Test Plan* require the nurse to apply the fundamental principles of clinical decision-making and critical thinking to nursing practice. The test plan also assumes that the nurse integrates concepts from social, biological and physical sciences.

Safe and Effective Care Environment

The nurse promotes achievement of client outcomes by providing and directing nursing care that enhances the care delivery setting in order to protect clients and health care personnel.

Management of Care

- **Management of Care** — the nurse provides and directs nursing care that enhances the care delivery setting to protect the client and health care personnel.

Management of Care Related Activity Statements from the *2025 REx-PN® Practice Analysis*
· Maintain client confidentiality and privacy · Provide care within the legislated scope of practice · Utilize resources to enhance client care (e.g., evidence-based research, information technology, policies and procedures) · Advocate for client rights and needs · Provide and receive handoff of care (report) on an assigned client · Initiate, evaluate and update a client care plan · Recognize ethical dilemmas and take appropriate action · Practice in a manner consistent with a code of ethics for nurses (e.g., nondiscriminatory, unbiased, do no harm) · Prioritize the delivery of client care · Organize workload to manage time effectively · Assign and supervise care of a client provided by others (e.g., unregulated care providers) · Assess the need for referrals/consults and obtain necessary orders · Receive and transcribe health care provider orders · Obtain consent for nursing care and procedures and provide appropriate client education · Integrate advance directives into a client's care plan · Collaborate with interprofessional team members when providing client care · Participate in conflict resolution · Recognize limitations of one's competence and seek assistance when needed · Report client information as required by law (e.g., abuse/neglect, communicable disease) · Perform procedures necessary to safely admit, transfer and/or discharge a client · Provide education to clients and staff about client rights and responsibilities · Participate in performance improvement projects and quality improvement processes · Use approved abbreviations and standard terminology when documenting care · Respond to the unsafe practice of a health care provider (e.g., intervene, report) · Involve a client in care decision-making · Assess and develop professional competence (e.g., self-reflection, professional activities) · Provide support and facilitate learning for new staff and health care students · Incorporate the use of Indigenous health knowledge and practices when planning and providing care to an Indigenous client · Provide care for a client to support unbiased treatment and equal access to care, regardless of sexual orientation, gender identity and/or gender expression

Related content includes but is **not limited** to:

Advance Directives/Self-Determination/Life Planning

- **Integrate advance directives into a client's care plan***
  - Assess client and/or staff member knowledge of legally documented advance directives
  - Provide a client with information about advance directives, self-care determination, life planning

Advocacy

- **Advocate for client rights and needs***
  - Discuss identified treatment options with a client and respect their decisions
  - Provide information on advocacy to staff members
  - Act in the role of client advocate
  - Use advocacy resources appropriately (e.g., social worker, chain of command, interpreter)
- **Incorporate the use of Indigenous health knowledge and practices when planning and providing care to an Indigenous client***
- **Provide care for a client to support unbiased treatment and equal access to care, regardless of sexual orientation, gender identity and/or gender expression***

Assignment and Supervision

- **Assign and supervise care of a client provided by others (e.g., unregulated care providers)***
  - Identify tasks for assignment based on client needs
  - Assign appropriate task, based on client's needs, to personnel with competency to perform task
  - Communicate tasks to be completed and report client concerns immediately
  - Evaluate assigned tasks to ensure correct completion of activity
  - Evaluate ability of staff members to perform assigned tasks considering personnel's allowable tasks/duties, competency and ability to use sound judgment and decision-making
- **Organize workload to manage time effectively***
  - Evaluate effectiveness of staff members' time management skills

Case Management

- **Initiate, evaluate and update a client care plan***
  - Plan individualized care for a client based on need (e.g., client diagnosis, self-care ability, prescribed treatments)
  - Evaluate and update plan of care as needed
  - Explore resources available to assist a client with achieving or maintaining independence
  - Assess a client's need for materials and equipment (e.g., oxygen, suction machine, wound care supplies)

Client Rights

- **Provide education to clients and staff about client rights and responsibilities***
  - Discuss treatment options/decisions with a client

**Activity statement used in the 2025 REx-PN® Practice Analysis*

- Evaluate a client's/staff members' understanding of client rights
- **Involve a client in care decision-making***
  - Recognize a client's right to informed consent including the right to refuse treatments/procedures

Collaboration with Interprofessional Team

- **Collaborate with interprofessional team members when providing client care***
  - Identify the need for interdisciplinary conferences
  - Identify significant information to report to other interprofessional teams (e.g., health care provider, pharmacist, social worker, respiratory therapist)
  - Review plan of care to ensure continuity across interprofessional teams

Concepts of Management

- **Provide support and facilitate learning for new staff and health care students***
  - Serve as resource person to other staff members
  - Identify roles/responsibilities of health care team members
  - Evaluate management outcomes
- **Participate in conflict resolution***
  - Plan overall strategies to address client problems
  - Act as liaison between a client and others (e.g., coordinate or manage care)

Confidentiality/Information Security

- **Maintain client confidentiality and privacy***
  - Assess staff member and client understanding of confidentiality requirements
  - Intervene appropriately when staff members have breached confidentiality

Continuity of Care

- **Provide and receive handoff of care (report) on an assigned client***
  - Use documents to record and communicate client information (e.g., medical record, referral/transfer form)
  - Follow up on unresolved issues regarding client care (e.g., laboratory results, client requests)
- **Use approved abbreviations and standard terminology when documenting care***
- **Perform procedures necessary to safely admit, transfer and/or discharge a client***
  - Educate a client about discharge procedures to home or community setting

Establishing Priorities

- **Prioritize the delivery of client care***
  - Apply nursing knowledge of environment and pathophysiology when establishing priorities for interventions with multiple clients
  - Evaluate plans of care for multiple clients

**Activity statement used in the 2025 REx-PN® Practice Analysis*

Ethical Practice

- **Recognize ethical dilemmas and take appropriate action***
  - Inform a client/staff members of ethical issues affecting client care
  - Evaluate outcomes of interventions to promote ethical practice
- **Practice in a manner consistent with a code of ethics for nurses (e.g., nondiscriminatory, unbiased, do no harm)***
- **Assess and develop professional competence (e.g., self-reflection, professional activities)***

Informed Consent

- **Obtain consent for nursing care and procedures and provide appropriate client education***
  - Identify appropriate person to provide informed consent for a client
  - Provide written materials in a client's spoken language, when possible
  - Describe components of informed consent
  - Participate in obtaining informed consent

Information Technology

- **Receive and transcribe health care provider orders***
  - Enter computer documentation accurately, completely and in a timely manner
- **Utilize resources to enhance client care (e.g., evidence-based research, information technology, policies and procedures)***

Legal Rights and Responsibilities

- **Provide care within the legislated scope of practice***
  - Apply knowledge of facility policy and relevant legislation when accessing client records
  - Review legal considerations prior to agreeing to serve as an interpreter for a staff member or primary health care provider
  - Identify legal issues affecting a client (e.g., refusing treatment)
  - Educate a client/staff members on legal issues
- **Recognize limitations of one's competence and seek assistance when needed***
- **Report client information as required by law (e.g., abuse/neglect, communicable disease)***
- **Respond to the unsafe practice of a health care provider (e.g., intervene, report)***

Quality Improvement

- **Participate in performance improvement projects and quality improvement processes***
  - Identify quality improvement opportunities
  - Report identified client care issues/problems to appropriate personnel
  - Use research and other references for quality improvement actions
  - Evaluate the impact of quality improvement measures on client care and resource use

**Activity statement used in the 2025 REx-PN® Practice Analysis*

Referrals

- **Assess the need for referrals/consults and obtain necessary orders***
  - Assess the need to refer a client for assistance with actual or potential problems (e.g., physical therapy, speech therapy)
  - Identify community resources for a client (e.g., respite care, social services, shelters)
  - Identify which documents to include when referring a client (e.g., medical record, referral form)

Sample Item

The nurse has received the following information about assigned clients. The nurse should **first** assess the client with

1. atrial fibrillation who has an irregular pulse of 90
2. pericarditis who has a temperature of 37.8° C
3. peripheral vascular disease (PVD) who has a capillary refill time of 4 seconds
4. end-stage renal disease (ESRD) who has a serum potassium level of 6.0 mmol/L **(key)**

(Key) is used throughout this document to denote the correct answer(s) for the exam item.

**Activity statement used in the 2025 REx-PN® Practice Analysis*

Safety and Infection Prevention and Control

- **Safety and Infection Prevention and Control** — the nurse protects clients and health care personnel from health and environmental hazards.

Safety and Infection Prevention and Control Related Activity Statements from the *2025 REx-PN® Practice Analysis*
· Ensure proper identification of a client when providing care · Assess a client for allergies and sensitivities and intervene as needed · Verify appropriateness and accuracy of health care provider orders · Identify practice errors/near misses and intervene · Educate client and staff regarding infection prevention and control measures · Use ergonomic principles when providing care (e.g., safe client handling, proper body mechanics) · Safely and appropriately use equipment and associated technology · Follow policies and procedures for use of restraints · Adhere to security procedures (e.g., newborn nursery security, controlled access) · Promote and educate clients on safety and injury prevention (e.g., falls, electrical hazards) · Participate in internal/external emergency response plans · Apply principles of infection prevention and control (e.g., hand hygiene, aseptic technique, universal precautions/routine practices) · Follow procedures for handling biohazardous and hazardous materials

Related content includes but is **not limited** to:

Accident/Error/Injury Prevention

- **Assess a client for allergies and sensitivities and intervene as needed***
- **Promote and educate clients on safety and injury prevention (e.g., falls, electrical hazards)***
  - Determine client/staff member knowledge of safety procedures
  - Identify factors that influence accident/injury prevention (e.g., age, developmental stage, lifestyle, mental status)
  - Identify deficits that may impede client safety (e.g., visual, hearing, sensory/perceptual)
  - Identify and verify orders for treatments that may contribute to an accident or injury (does not include medication)
  - Identify and facilitate correct use of infant and child car seats
  - Provide a client with appropriate method to signal staff members
  - Implement seizure precautions for an at-risk client
  - Make appropriate room assignments for cognitively impaired clients
- **Ensure proper identification of a client when providing care***
- **Verify appropriateness and accuracy of health care provider orders***

**Activity statement used in the 2025 REx-PN® Practice Analysis*

Emergency Response Plan

- **Participate in internal/external emergency response plans***
  - Determine which client(s) to recommend for discharge in a disaster situation
  - Identify nursing roles in disaster planning
  - Use clinical decision-making/critical thinking for emergency response plan
  - Participate in disaster planning activities/drills
  - Apply principles of triage and evacuation procedures/protocols

Ergonomic Principles

- **Use ergonomic principles when providing care (e.g., safe client handling, proper body mechanics)***
  - Assess a client's ability to balance, transfer and use assistive devices prior to planning care (e.g., crutches, walker)
  - Review necessary modifications with a client to reduce stress on specific muscle or skeletal groups (e.g., frequent changing of position, routine stretching of the shoulders, neck, arms, hands, fingers)

Handling Hazardous and Infectious Materials

- **Follow procedures for handling biohazardous and hazardous materials***
  - Identify biohazardous, flammable and infectious materials
  - Demonstrate safe handling techniques to staff members and a client
  - Ensure safe implementation of internal radiation therapy

Home Safety

- Assess need for client home modifications (e.g., lighting, handrails, kitchen safety)
- Apply knowledge of client pathophysiology to home safety interventions
- Encourage a client to use protective equipment when using devices that can cause injury
- Evaluate client care environment for fire/environmental hazards

Reporting of Incident/Event/Irregular Occurrence/Variance

- **Identify practice errors/near misses and intervene***
  - Identify need/situation where reporting of incident/event/irregular occurrence/variance is appropriate
  - Evaluate response to error/event/occurrence

Safe Use of Equipment

- **Safely and appropriately use equipment and associated technology***
  - Inspect equipment for safety hazards (e.g., frayed electrical cords, loose/missing parts)
  - Teach a client about the safe use of equipment needed for health care
  - Remove malfunctioning equipment from client care area and report the problem to appropriate personnel

Security Plan

- **Adhere to security procedures (e.g., newborn nursery security, controlled access)***
  - Use clinical decision-making/critical thinking in situations related to security planning

**Activity statement used in the 2025 REx-PN® Practice Analysis*

Standard Precautions/Transmission-Based Precautions/Surgical Asepsis

- **Apply principles of infection prevention and control (e.g., hand hygiene, aseptic technique, universal precautions/routine practices)***
  - Follow correct policy and procedures when reporting a client with a communicable disease
  - Use appropriate precautions for immunocompromised clients
  - Use appropriate technique to set up a sterile field/maintain asepsis
  - Identify signs, symptoms and incubation periods of infectious diseases
- **Educate client and staff regarding infection prevention and control measures***
  - Evaluate infection control precautions implemented by staff members
  - Evaluate whether aseptic technique is performed correctly

Use of Restraints/Safety Devices

- **Follow policies and procedures for use of restraints***
  - Assess appropriateness of the type of restraint/safety device used
  - Monitor/evaluate client response to restraints/safety device

Sample Item

The nurse is planning a staff education program about Clostridioides (Clostridium) difficile infection. Which of the following information should the nurse include?

1. "Clients who have Clostridioides (Clostridium) difficile infections should be placed on droplet precautions."
2. "After recovery from Clostridioides (Clostridium) difficile infections, clients are immune from a recurrence of the infection."
3. "Items used in caring for clients who have Clostridioides (Clostridium) difficile infections should be cleaned with a household bleach solution." **(key)**
4. "After caring for clients who have Clostridioides (Clostridium) difficile infections, the nurse should cleanse the nurse's visibly soiled hands with an alcohol-based hand rub."

**Activity statement used in the 2025 REx-PN® Practice Analysis*

Health Promotion and Maintenance

- **Health Promotion and Maintenance** — the nurse provides and directs nursing care of the client that incorporates knowledge of expected growth and development, prevention and early detection of health problems, and strategies to achieve optimal health.

Health Promotion and Maintenance Related Activity Statements from the *2025 REx-PN® Practice Analysis*
· Provide prenatal care and education · Provide care and education for an antepartum client · Provide care and education for a client in labour (except during active labour) · Provide postpartum care and education · Provide care and education for newborn, infant and toddler clients from birth through 2 years · Provide care and education for preschool, school-age and adolescent clients ages 3 through 17 years · Provide care and education for adult clients ages 18 through 64 years · Provide care and education for adult clients ages 65 years and over · Perform comprehensive health assessments · Assess a client's readiness to learn, learning preferences and barriers to learning · Perform preventive screening assessments (e.g., vision, hearing, cognitive, nutrition) · Educate a client about prevention and treatment of high-risk health behaviours (e.g., smoking cessation, safe sexual practice, needle exchange) · Educate a client about health promotion and maintenance recommendations (e.g., health care provider visits, immunizations) · Plan and/or participate in health care activities for a client in a community setting · Assess a client's ability to manage care in a home environment and plan care accordingly · Assess a client about determinants of health and implement interventions · Identify and facilitate access to community resources for a client · Identify barriers to communication · Assess a client's growth and development throughout the lifespan

Related content includes but is **not limited** to:

Aging Process

- **Provide care and education for newborn, infant and toddler clients from birth through 2 years***
- **Provide care and education for preschool, school age and adolescent clients ages 3 through 17 years***
- **Provide care and education for adult clients ages 18 through 64 years***
- **Provide care and education for adult clients ages 65 years and over***
  - Assess client's reactions to expected age-related changes

Ante/Intra/Postpartum and Newborn Care

- **Provide prenatal care and education***

**Activity statement used in the 2025 REx-PN® Practice Analysis*

- Calculate expected delivery date
- Identify signs of potential prenatal complications

- **Provide care and education for an antepartum client***
  - Assess a client's psychosocial response to pregnancy (e.g., support systems, perception of pregnancy, coping mechanisms)
  - Recognize cultural differences in childbearing practices
- **Provide care and education for a client in labour (except during active labour)***
  - Identify, assess and refer a client in labour (except during active labour)
- **Provide postpartum care and education***
  - Assess a client for symptoms of postpartum complications (e.g., hemorrhage, infection)
  - Assist a client with performing/learning newborn care (e.g., feeding)
  - Provide discharge instructions (e.g., postpartum and newborn care)
  - Evaluate a client's ability to care for the newborn

Community Resources

- **Identify and facilitate access to community resources for a client***
  - Assist and/or participate in community health education
  - Reinforce teaching with a client about health risks based on family, population and/or community characteristics

Developmental Stages and Transitions

- **Assess a client's growth and development throughout the lifespan***
  - Identify expected physical, cognitive and psychosocial stages of development
  - Identify expected body image changes associated with client developmental age (e.g., aging, pregnancy)
  - Compare client development to expected age/developmental stage and report any deviations
  - Assess impact of change on family system (e.g., single-parent family, divorce, ill family member)
  - Assist a client to cope with life transitions (e.g., attachment to newborn, parenting, puberty, retirement)
  - Modify approaches to care in accordance with client developmental stage (use age-appropriate explanations of procedures and treatments)
  - Provide education to a client/staff members about expected age-related changes and age-specific growth and development (e.g., developmental stages)
  - Evaluate a client's achievement of expected developmental level (e.g., developmental milestones)
  - Evaluate impact of expected body image changes on a client and family
- **Identify barriers to communication***

Health Promotion/Disease Prevention

- **Assess a client about determinants of health and implement interventions***
  - Identify risk factors for disease/illness (e.g., age, gender, ethnicity, lifestyle)
  - Integrate complementary therapies into health promotion activities for a well client

**Activity statement used in the 2025 REx-PN® Practice Analysis*

- Provide follow-up to a client after participation in health promotion program (e.g., diet counselling)
- Assist a client in maintaining an optimum level of health

- **Assess a client's readiness to learn, learning preferences and barriers to learning***
- **Plan and/or participate in health care activities for a client in a community setting***
- **Educate client about health promotion and maintenance recommendations (e.g., health care provider visits, immunizations)***
  - Evaluate client understanding of health promotion behaviours/activities (e.g., weight control, exercise actions)
  - Educate a client on actions to promote/maintain health and prevent disease (e.g., smoking cessation, diet, weight loss)

Health Screening

- **Perform preventive screening assessments (e.g., vision, hearing, cognitive, nutrition)***
  - Apply knowledge of pathophysiology to health screening
  - Identify risk factors linked to ethnicity (e.g., hypertension, diabetes)
  - Perform health history/health and risk assessments (e.g., lifestyle, family and genetic history)
  - Use appropriate procedure and interviewing techniques when taking a client's health history

High-Risk Behaviors

- **Educate a client about prevention and treatment of high-risk health behaviours (e.g., smoking cessation, safe sexual practice, needle exchange)***
  - Assess client lifestyle practice risks that may impact health (e.g., excessive sun exposure, lack of regular exercise)
  - Assist a client to identify behaviours/risks that may impact health

Lifestyle Choices

- Assess a client's lifestyle choices
- Assess a client's attitudes/perceptions on sexuality
- Assess a client's need/desire for contraception
- Identify contraindications to chosen contraceptive method (e.g., smoking, adherence, medical conditions)
- Identify expected outcomes for family planning methods
- Recognize a client who is socially or environmentally isolated
- Educate a client on sexuality changes (e.g., family planning, safe sexual practices, menopause, impotence)

Self-Care

- **Assess a client's ability to manage care in a home environment and plan care accordingly***
  - Consider client self-care needs before developing or revising care plan
  - Assist primary caregivers working with a client to meet self-care goals
  - Identify family structures and roles of family members (e.g., nuclear, blended, adoptive)

**Activity statement used in the 2025 REx-PN® Practice Analysis*

Techniques of Physical Assessment

- **Perform comprehensive health assessments***
  - Apply knowledge of nursing procedures and psychomotor skills to techniques of physical assessment
  - Apply knowledge of psychosocial assessment techniques
  - Choose physical assessment equipment and technique appropriate for the client (e.g., age of client, measurement of vital signs)

Sample Item

The nurse is teaching about recommended lifestyle modifications for a client who is at risk of hypertension. Which of the following information should the nurse include?

1. "Maintain a body mass index (BMI) of 25 to 30."
2. "Reduce daily cigarette smoking to one-half pack."
3. "Decrease salt intake by consuming only processed food products."
4. "Perform aerobic physical activity for at least 30 minutes daily for 5 days per week." **(key)**

**Activity statement used in the 2025 REx-PN® Practice Analysis*

Psychosocial Integrity

- **Psychosocial Integrity** — the nurse provides and directs nursing care that promotes and supports the emotional, mental and social well-being of the client experiencing stressful events, as well as clients with acute or chronic mental illness.

Psychosocial Integrity Related Activity Statements from the *2025 REx-PN® Practice Analysis*
· Use therapeutic communication techniques · Assess a client's ability to cope with life changes and provide support · Manage and support a client with emotional/behavioural challenges · Assess the potential for violence/aggression and use safety precautions · Assess a client for substance misuse, dependency, withdrawal or toxicities, and intervene · Provide care for a client experiencing sensory and/or cognitive disturbances · Incorporate a client's cultural practices and beliefs when planning and providing care · Provide end-of-life care for a client · Assess a client for abuse or neglect and intervene · Provide care and support to clients with acute and chronic mental health disorders · Assess family dynamics to determine care plans · Recognize nonverbal cues to physical and/or psychological stressors · Provide care for a client experiencing grief or loss · Assist a client to cope/adapt to stressful events and changes in health status · Recognize client stressors that affect care · Recognize health care provider stressors that affect client care · Explore reasons for client nonadherence with a treatment plan · Provide care for a cognitively impaired client

Related content includes but is **not limited** to:

Abuse/Neglect

- **Assess a client for abuse or neglect and intervene***
  - Identify risk factors for domestic, child, elder abuse/neglect and sexual abuse
  - Plan interventions for victims/suspected victims of abuse
  - Counsel victims/suspected victims of abuse and their families on coping strategies
  - Provide a safe environment for the abused/neglected client
  - Evaluate a client's response to interventions

Behavioural Interventions

- **Manage and support a client with emotional/behavioural challenges***
  - Assess a client's appearance, mood and psychomotor behaviour and identify/respond to inappropriate/abnormal behaviour
  - Assist a client with achieving and maintaining self-control of behaviour (e.g., behaviour modification)

**Activity statement used in the 2025 REx-PN® Practice Analysis*

- Assist a client to develop and use strategies to decrease anxiety
- Orient a client to reality
- Participate in group sessions (e.g., support groups)
- Evaluate a client's response to treatment plan

Coping Mechanisms

- **Assess a client's ability to cope with life changes and provide support***
  - Assess a client's support systems and available resources
  - Assess a client's ability to adapt to temporary/permanent role changes
  - Assess a client's reaction to a diagnosis of acute or chronic mental illness (e.g., rationalization, hopefulness, anger)
  - Evaluate the constructive use of defense mechanisms by a client
  - Evaluate whether a client has successfully adapted to situational role changes (e.g., accept dependency on others)
- **Assist a client to cope/adapt to stressful events and changes in health status***
  - Identify situations that may necessitate role changes for a client (e.g., spouse with chronic illness, death of parent)
  - Provide support to the client with an unexpected altered body image (e.g., alopecia, amputation, burns)

Crisis Intervention

- **Assess the potential for violence/aggression and use safety precautions***
  - Identify a client in crisis
  - Use crisis intervention techniques to assist a client in coping
  - Apply knowledge of client psychopathology to crisis intervention
  - Guide a client to resources for recovery from crisis (e.g., social supports)

Cultural Awareness/Cultural Influences on Health

- **Incorporate a client's cultural practices and beliefs when planning and providing care***
  - Evaluate and document how client language needs were met
  - Assess the importance of client culture/ethnicity when planning/providing/evaluating care
  - Recognize cultural issues that may impact a client's understanding/acceptance of disease/illness
  - Respect cultural background/practices of a client
  - Recognize cultural and religious influences that may impact family functioning

End-of-Life Care

- **Provide end-of-life care for a client***
  - Assess a client's ability to cope with end-of-life interventions
  - Identify end-of-life needs of a client (e.g., financial concerns, fear, loss of control, role changes)
  - Recognize the need for and provide psychosocial support to the family/caregiver
  - Assist a client in resolution of end-of-life issues

**Activity statement used in the 2025 REx-PN® Practice Analysis*

Family Dynamics

- **Assess family dynamics to determine care plans***
  - Assess barriers/stressors that impact family functioning (e.g., meeting client care needs, divorce)
  - Assess parental techniques related to discipline
  - Encourage a client's participation in group/family therapy
  - Assist a client to integrate new members into family structure (e.g., new infant, blended family)
  - Evaluate resources available to assist family functioning

Grief and Loss

- **Provide care for a client experiencing grief or loss***
  - Support a client in anticipatory grieving
  - Inform a client of expected reactions to grief and loss (e.g., denial, fear)
  - Provide a client with resources to adjust to loss/bereavement (e.g., individual counseling, support groups)
  - Evaluate a client's coping and fears related to grief and loss

Mental Health Concepts

- **Provide care for a cognitively impaired client***
  - Identify signs and symptoms of impaired cognition (e.g., memory loss, poor hygiene)
- **Provide care and support to clients with acute and chronic mental health disorders***
  - Recognize signs and symptoms of acute and chronic mental illness (e.g., schizophrenia, depression, bipolar disorder)
  - Recognize client use of defense mechanisms
  - Assess a client for alterations in mood, judgment, cognition and reasoning
  - Apply knowledge of client psychopathology to mental health concepts applied in individual/group/family therapy
  - Evaluate a client's abnormal response to the aging process (e.g., depression)
- **Explore reasons for client nonadherence with a treatment plan***
  - Assess client adherence to treatment plan
  - Evaluate a client's ability to adhere to treatment plan

Religious and Spiritual Influences on Health

- Identify the emotional problems of a client or client needs that are related to religious/spiritual beliefs (e.g., spiritual distress, conflict between recommended treatment and beliefs)
- Assess and plan interventions that meet a client's emotional and spiritual needs
- Evaluate whether a client's religious/spiritual needs are met

Sensory/Perceptual Alterations

- **Provide care for a client experiencing sensory and/or cognitive disturbances***
  - Identify time, place and stimuli surrounding the appearance of symptoms

**Activity statement used in the 2025 REx-PN® Practice Analysis*

- Assist a client to develop strategies for dealing with sensory and thought disturbances
- Provide care in a nonthreatening and nonjudgmental manner
- Provide reality-based diversions

Stress Management

- **Recognize client stressors that affect care***
  - Provide information to client on stress management techniques (e.g., relaxation techniques, exercise, meditation)
  - Evaluate a client's use of stress management techniques
- **Recognize nonverbal cues to physical and/or psychological stressors***
- **Recognize health care provider stressors that affect client care***

Substance Use and Other Disorders and Dependencies

- **Assess a client for substance misuse, dependency, withdrawal or toxicities, and intervene***
  - Assess a client's reactions to the diagnosis/treatment of substance-related disorder
  - Plan and provide care to a client experiencing substance-related withdrawal or toxicity (e.g., nicotine, opioid, sedative)
  - Educate a client on substance use diagnosis and treatment plan
  - Provide care and/or support for a client with non-substance–related dependencies (e.g., gambling, sexual addiction)
  - Provide symptom management for a client experiencing withdrawal or toxicity
  - Encourage a client to participate in support groups
  - Evaluate a client's response to a treatment plan and revise as needed

Support Systems

- Assist a family to plan care for a client with impaired cognition (e.g., Alzheimer disease)
- Encourage client involvement in the health care decision-making process
- Evaluate a client's feelings about the diagnosis/treatment plan

Therapeutic Communication

- **Use therapeutic communication techniques***
  - Assess verbal and nonverbal client communication needs
  - Respect a client's personal values and beliefs
  - Allow time to communicate with a client
  - Encourage a client to verbalize feelings (e.g., fear, discomfort)
  - Evaluate the effectiveness of communications with a client

Therapeutic Environment

- Identify external factors that may interfere with client recovery (e.g., stressors, family dynamics)
- Make client room assignments that support the therapeutic milieu

**Activity statement used in the 2025 REx-PN® Practice Analysis*

Sample Item

The nurse is planning care for a client with moderate Alzheimer disease (AD) who is experiencing difficulty meeting basic physiologic needs. Which of the following interventions should the nurse include in the client's plan of care? **Select all that apply.**

1. Weigh the client monthly.
2. Monitor the client's food and fluid intake. **(key)**
3. Provide the client with a wide range of choices at mealtimes.
4. Offer the client finger foods that can be taken away from the table. **(key)**
5. Minimize the client's exposure to noise and distraction at mealtimes. **(key)**

Physiological Integrity

The nurse promotes physical health and wellness by providing care and comfort, reducing client risk potential and managing health alterations.

Basic Care and Comfort

- **Basic Care and Comfort** — the nurse provides comfort and assistance in the performance of activities of daily living.

Basic Care and Comfort Related Activity Statements from the *2025 REx-PN® Practice Analysis*
· Monitor a client's nutritional status · Provide enteral nutrition · Assess client elimination and intervene · Assess client intake and output and intervene · Assess client sleep/rest patterns and intervene · Assess client ability to perform activities of daily living and intervene · Educate and assist a client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques) · Perform irrigations (e.g., bladder, wound, eye) · Perform postmortem care · Perform skin assessment and/or implement measures to maintain skin integrity · Identify use of client alternative therapies and potential contraindications (e.g., aromatherapy, acupressure, supplements) · Provide nonpharmacological comfort measures · Assess a client for pain and intervene · Apply, maintain or remove orthopedic devices (e.g., traction, splints, braces) · Implement measures to promote circulation and venous return (e.g., active or passive range of motion, antiembolism stockings, sequential compression devices, positioning and mobilization) · Assess and maintain site care for a client with enteral tubes

Related content includes but is **not limited** to:

Assistive Devices

- **Educate and assist a client to compensate for a physical or sensory impairment (e.g., assistive devices, positioning, compensatory techniques)***
  - Assess a client for actual/potential difficulty with communication and speech/vision/hearing problems
  - Assess a client's use of assistive devices (e.g., prosthetic limbs, hearing aid)
  - Manage a client who uses assistive devices or prostheses (e.g., eating utensils, telecommunication devices, dentures)
  - Evaluate correct use of assistive devices by a client

**Activity statement used in the 2025 REx-PN® Practice Analysis*

Elimination

- **Assess client elimination and intervene***
  - Provide skin care to a client who is incontinent (e.g., wash frequently, barrier creams/ointments)
  - Use alternative methods to promote voiding
  - Evaluate whether a client's ability to eliminate is restored/maintained

Mobility/Immobility

- **Apply, maintain or remove orthopedic devices (e.g., traction, splints, braces)***
  - Assess a client for mobility, gait, strength and motor skills
  - Apply knowledge of nursing procedures and psychomotor skills when providing care to a client with immobility
  - Maintain a client's correct body alignment
  - Maintain/correct the adjustment of a client's traction device (e.g., external fixation device, halo traction, skeletal traction)
  - Evaluate a client's response to interventions to prevent complications from immobility
- **Perform skin assessment and/or implement measures to maintain skin integrity***
  - Identify complications of immobility (e.g., skin breakdown, contractures)
  - Educate a client regarding proper methods used when repositioning the immobilized client
- **Implement measures to promote circulation and venous return (e.g., active or passive range of motion, antiembolism stockings, sequential compression devices, positioning and mobilization)***

Nonpharmacological Comfort Interventions

- **Provide nonpharmacological comfort measures***
  - Evaluate a client's response to nonpharmacological interventions (e.g., pain rating scale, verbal reports)
  - Apply knowledge of pathophysiology to nonpharmacological comfort/palliative care interventions
- **Assess a client for pain and intervene***
  - Plan measures to provide comfort interventions to a client with anticipated or actual impaired comfort
  - Assess a client's need for palliative care/symptom management or noncurative treatments
  - Respect a client's palliative care/symptom management or noncurative treatment choices
  - Assist a client in receiving appropriate end-of-life physical symptom management
  - Evaluate outcome of palliative care/symptom management or noncurative treatments
- **Perform irrigations (e.g., bladder, wound, eye)***
- **Identify use of client alternative therapies and potential contraindications (e.g., aromatherapy, acupressure, supplements)***
  - Incorporate alternative/complementary therapies into client plan of care (e.g., music therapy, relaxation therapy)
  - Evaluate the outcomes of alternative and/or complementary therapy practice

**Activity statement used in the 2025 REx-PN® Practice Analysis*

Nutrition and Oral Hydration

- **Monitor a client's nutritional status***
  - Assess a client's ability to eat (e.g., chew, swallow)
  - Assess a client for actual/potential specific food and medication interactions
  - Consider client choices regarding meeting nutritional requirements and/or maintaining dietary restrictions, including mention of specific food items
  - Monitor client hydration status (e.g., edema, signs and symptoms of dehydration)
  - Initiate calorie counts for a client
  - Apply knowledge of mathematics to client nutrition (e.g., body mass index)
  - Promote a client's independence in eating
  - Provide/maintain special diets based on a client's diagnosis/nutritional needs and cultural considerations (e.g., low sodium, high protein, calorie restrictions)
  - Provide nutritional supplements as needed (e.g., high-protein drinks)
  - Evaluate the impact of disease/illness on nutritional status of a client
- **Provide enteral nutrition***
  - Evaluate side effects of client tube feedings and intervene as needed (e.g., diarrhea, dehydration)
- **Assess and maintain site care for a client with enteral tubes***
- **Assess client intake and output and intervene***

Personal Hygiene

- **Assess client ability to perform activities of daily living and intervene***
  - Assess a client for personal hygiene habits/routine
  - Provide information to a client on required adaptations for performing activities of daily living (e.g., shower chair, handrails)

Postmortem Care

- **Perform postmortem care***
  - Provide psychosocial support to family
  - Incorporate cultural practices in postmortem care
  - Prepare a client for viewing by the family
  - Ensure proper identification of a client prior to transport to the morgue/funeral home

Rest and Sleep

- **Assess client sleep/rest patterns and intervene***
  - Apply knowledge of client pathophysiology to rest and sleep interventions
  - Schedule client care activities to promote adequate rest

**Activity statement used in the 2025 REx-PN® Practice Analysis*

Sample Item

The nurse is teaching a client about reporting and relieving pain. Which of the following information should the nurse include? **Select all that apply.**

1. "The use of multiple pain scales helps to prove the severity of your pain."
2. "The use of a pain scale helps me understand the quality of the pain you are having."
3. "You will be asked regularly if you have pain and to rate your pain by using a pain scale." **(key)**
4. "You should report when you are having pain so that I will know when you are uncomfortable." **(key)**
5. "You will consistently receive the strongest pain medication to ensure as much pain relief as possible."

Pharmacological and Parenteral Therapies

- **Pharmacological and Parenteral Therapies** — the nurse provides care related to the administration of medications and parenteral therapies.

Pharmacological and Parenteral Therapies Related Activity Statements from the *2025 REx-PN® Practice Analysis*
• Participate in the medication reconciliation process • Handle and maintain medication in a safe and controlled environment • Educate a client about medications • Perform calculations needed for medication administration • Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions) • Prepare and administer medications using rights of medication administration • Monitor a client receiving blood products • Evaluate a client's response to medication • Handle and/or administer controlled substances within legislated guidelines • Monitor intravenous infusion and maintain site • Access peripheral venous access devices • Titrate dosage of medication based on assessment and ordered parameters • Monitor a client receiving parenteral nutrition and evaluate the client's response • Handle and/or administer high-alert medications • Administer medication by oral route • Administer medication by enteral/gastrointestinal tube • Administer a subcutaneous, intradermal or intramuscular medication • Administer medication by ear, eye, nose, inhalation, rectum, vagina or skin route • Administer intravenous medication via secondary line • Calculate and monitor intravenous flow rate • Maintain pain control devices (e.g., patient-controlled analgesia, peripheral nerve catheter) • Initiate, maintain and remove a continuous subcutaneous infusion

Related content includes but is **not limited** to:

Adverse Effects/Contraindications/Side Effects/Interactions

- Identify a contraindication to the administration of a medication to a client
- Identify actual and potential incompatibilities of ordered client medications
- Identify symptoms/evidence of an allergic reaction to medications
- Assess a client for actual or potential side effects and adverse effects of medications (e.g., prescribed, over-the-counter, herbal supplements, preexisting condition)
- Provide information to a client on common side effects/adverse effects/potential interactions of medications and inform the client when to notify the primary health care provider

**Activity statement used in the 2025 REx-PN® Practice Analysis*

- Notify the primary health care provider of side effects, adverse effects and contraindications of medications and parenteral therapy
- Document side effects and adverse effects of medications and parenteral therapy
- Monitor for anticipated interactions among a client's ordered medications and fluids (e.g., oral, topical, subcutaneous, intramuscular, intravenous)
- Evaluate and document a client's response to actions taken to counteract side effects and adverse effects of medications and parenteral therapy

Blood and Blood Products

- **Monitor a client receiving blood products***
  - Identify a client according to facility/agency policy prior to administration of red blood cells/blood products (e.g., order for administration, correct type, correct client, crossmatching complete, consent obtained)
  - Check a client for appropriate venous access for red blood cell/blood product administration (e.g., correct gauge needle, integrity of access site)
  - Document necessary information on the administration of red blood cells/blood products
  - Provide care for a client receiving blood products and evaluate client response

Expected Actions/Outcomes

- **Evaluate a client's response to medication***
  - Obtain information on a client's prescribed medications (e.g., review formulary, consult pharmacist)
  - Use clinical decision-making/critical thinking when addressing expected effects/outcomes of medications (e.g., oral, intradermal, subcutaneous, intramuscular, topical)
  - Evaluate a client's use of medications over time (e.g., prescription, over-the-counter, home remedies)

Medication Administration

- **Perform calculations needed for medication administration***
- **Educate a client about medications***
- **Prepare and administer medications using rights of medication administration***
- **Review pertinent data prior to medication administration (e.g., contraindications, lab results, allergies, potential interactions)***
- **Administer medication by oral route***
- **Administer medication by enteral/gastrointestinal tube***
- **Administer a subcutaneous, intradermal or intramuscular medication***
- **Administer medication by ear, eye, nose, inhalation, rectum, vagina or skin route***
- **Administer intravenous medication via secondary line***
- **Initiate, maintain and remove a continuous subcutaneous infusion***
- **Participate in the medication reconciliation process***
- **Titrate dosage of medication based on assessment and ordered parameters***
- **Handle and maintain medication in a safe and controlled environment***
- **Handle and/or administer high-alert medications***

**Activity statement used in the 2025 REx-PN® Practice Analysis*

- **Handle and/or administer controlled substances within legislated guidelines***

Parenteral/Intravenous Therapies

- **Access peripheral venous access devices***
  - Educate a client on the reason for and care of a venous access device
  - Identify appropriate veins that should be accessed for various therapies
  - Prepare a client for intravenous catheter insertion
- **Monitor intravenous infusion and maintain site***
  - Evaluate a client's response to intermittent parenteral fluid therapy
  - Monitor the use of an infusion pump (e.g., intravenous, client-controlled analgesia device)
  - Educate a client on the need for intermittent parenteral fluid therapy
- **Calculate and monitor intravenous flow rate***
  - Apply knowledge and concepts of mathematics/nursing procedures/psychomotor skills when caring for a client receiving intravenous and parenteral therapy

Pharmacological Pain Management Devices

- **Maintain pain control devices (e.g., patient-controlled analgesia, peripheral nerve catheter)***
  - Evaluate and document a client's use and response to pain control devices
  - Identify signs and symptoms of complications of pain control devices

Total Parenteral Nutrition (TPN)

- **Monitor a client receiving parenteral nutrition and evaluate the client's response***
  - Identify side effects/adverse events related to TPN and intervene as appropriate (e.g., hyperglycemia, fluid imbalance, infection)
  - Educate a client on the need for and use of TPN
  - Apply knowledge of nursing procedures and psychomotor skills when caring for a client receiving TPN
  - Apply knowledge of client pathophysiology and mathematics to TPN interventions

Sample Item

The nurse is caring for a client who has a prescription for 0.9% sodium chloride (normal saline) with 5% dextrose in water, 1 L, IV, to be infused over 3 hours. The nurse has tubing with a drop factor of 10 available. How many gtt/min should the client receive? **Record your answer using a whole number.**

Answer: 56 gtt/min

**Activity statement used in the 2025 REx-PN® Practice Analysis*

Reduction of Risk Potential

- **Reduction of Risk Potential** — the nurse reduces the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures.

Reduction of Risk Potential Related Activity Statements from the *2025 REx-PN® Practice Analysis*
· Recognize trends and changes in a client's condition and intervene · Use precautions to prevent injury and/or complications associated with a procedure or diagnosis · Assess and respond to changes and/or trends in a client's vital signs · Perform focused assessments · Insert, maintain or remove a urinary catheter · Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine) · Monitor the results of diagnostic testing and intervene · Provide preoperative care · Evaluate responses to procedures and treatments and intervene · Educate a client about treatments and procedures · Maintain or remove a nasal/oral gastrointestinal tube · Insert a nasal/oral gastrointestinal tube · Perform diagnostic testing (e.g., bladder scanning, point-of-care testing) and intervene · Maintain or remove a peripheral intravenous line · Insert a peripheral intravenous line · Provide preoperative or postoperative education · Provide care for a client following a procedure with conscious sedation · Maintain a percutaneous feeding tube · Monitor continuous or intermittent suction of a nasogastric (NG) tube

Related content includes but is **not limited** to:

Changes/Abnormalities in Vital Signs

- **Assess and respond to changes and/or trends in a client's vital signs***
  - Apply knowledge needed to perform related nursing procedures and psychomotor skills when assessing vital signs
  - Apply knowledge of client pathophysiology when measuring vital signs

Diagnostic Tests

- **Perform diagnostic testing (e.g., bladder scanning, point-of-care testing) and intervene***
  - Apply knowledge of related nursing procedures and psychomotor skills when caring for a client undergoing diagnostic testing
- **Monitor the results of diagnostic testing and intervene***
  - Compare client diagnostic findings with pre-test results
  - Monitor results of maternal and fetal diagnostic tests (e.g., nonstress test, amniocentesis, ultrasound)

**Activity statement used in the 2025 REx-PN® Practice Analysis*

- **Obtain specimens other than blood for diagnostic testing (e.g., wound, stool, urine)***

Laboratory Values

- Identify laboratory values for arterial blood gases (pH, PO_2, PCO_2, SaO_2, HCO_3), blood urea nitrogen (BUN), total cholesterol, creatinine, glucose, glycosylated hemoglobin ($HgbA_1C$), hematocrit, hemoglobin, international normalized ratio (INR), platelets, potassium, prothrombin time, partial thromboplastin time, activated partial thromboplastin time, sodium, white blood cell count
- Compare client laboratory values to normal laboratory values
- Educate a client about the purpose and procedure of ordered laboratory tests
- Monitor client laboratory values (e.g., glucose testing results for a client with diabetes)
- Notify the appropriate health care team member about laboratory test results

Potential for Alterations in Body Systems

- Identify a client's potential for aspiration (e.g., feeding tube, sedation, swallowing difficulties)
- Identify a client's potential for skin breakdown (e.g., immobility, nutritional status, incontinence)
- Identify a client with increased risk for insufficient vascular perfusion (e.g., immobilized limb, post surgery, diabetes)
- Educate a client on methods to prevent complications associated with activity level/diagnosed illness/disease (e.g., contractures, foot care for client with diabetes mellitus)
- Compare current client data to baseline client data (e.g., symptoms of illness/disease)
- Monitor client output for changes from baseline (e.g., NG tube, emesis, stool, urine)

Potential for Complications of Diagnostic Tests/Treatments/Procedures

- **Use precautions to prevent injury and/or complications associated with a procedure or diagnosis***
  - Assess a client for an abnormal response following a diagnostic test/procedure (e.g., dysrhythmia following cardiac catheterization)
  - Apply knowledge of nursing procedures and psychomotor skills when caring for a client with potential for complications
  - Monitor a client for signs of bleeding
  - Position a client to prevent complications following tests/treatments/procedures (e.g., elevate head of bed, immobilize extremity)
- **Evaluate responses to procedures and treatments and intervene***
  - Intervene to manage potential circulatory complications (e.g., hemorrhage, embolus, shock)
  - Intervene to prevent aspiration (e.g., check NG tube placement)
  - Intervene to prevent potential neurological complications (e.g., foot drop, numbness, tingling)
  - Apply knowledge of pathophysiology to monitoring for complications (e.g., recognize signs of thrombocytopenia)
  - Evaluate the client's response to postoperative interventions to prevent complications (e.g., prevent aspiration, promote venous return, promote mobility)
  - Provide care for a client undergoing electroconvulsive therapy (e.g., monitor airway, assess for side effects, teach client about procedure)

**Activity statement used in the 2025 REx-PN® Practice Analysis*

- **Insert a nasal/oral gastrointestinal tube***
  - Apply knowledge of skill of inserting a nasal/oral gastrointestinal tube
- **Maintain or remove a nasal/oral gastrointestinal tube***
- **Monitor continuous or intermittent suction of a nasogastric (NG) tube***
- **Insert, maintain or remove a urinary catheter***
- **Insert a peripheral intravenous line***
- **Maintain or remove a peripheral intravenous line***
- **Maintain a percutaneous feeding tube***

System-Specific Assessments

- **Perform focused assessments***
  - Assess a client for abnormal peripheral pulses after a procedure or treatment
  - Assess a client for abnormal neurological status (e.g., level of consciousness, muscle strength, mobility)
  - Assess a client for peripheral edema
  - Assess a client for signs of hypoglycemia or hyperglycemia
  - Identify factors that result in delayed wound healing
  - Perform a risk assessment (e.g., sensory impairment, potential for falls)
- **Recognize trends and changes in a client's condition and intervene***

Therapeutic Procedures

- **Educate a client about treatments and procedures***
  - Educate a client about home management of care
  - Apply knowledge of related nursing procedures and psychomotor skills when caring for a client undergoing therapeutic procedures
- **Provide preoperative or postoperative education***
- **Provide preoperative care***
- **Provide care for a client following a procedure with conscious sedation***

Sample Item

The nurse is caring for a client who had a colonoscopy 20 minutes ago. The nurse should understand which of the following findings are to be expected?

1. weakness and dizziness
2. flatulence and abdominal cramps **(key)**
3. frequent and bloody bowel movements
4. abdominal distention and the urge to defecate

**Activity statement used in the 2025 REx-PN® Practice Analysis*

Physiological Adaptation

- **Physiological Adaptation** — the nurse manages and provides care for clients with acute, chronic or life-threatening physical health conditions.

Physiological Adaptation Related Activity Statements from the *2025 REx-PN® Practice Analysis*
• Identify pathophysiology related to an acute or chronic condition • Recognize signs and symptoms of a client's complications and intervene • Educate a client regarding an acute or chronic condition • Perform wound care and/or dressing changes • Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy) • Perform emergency care procedures (e.g., cardiopulmonary resuscitation, respiratory support, automated external defibrillator) • Manage the care of a client with impaired ventilation/oxygenation • Manage the care of a client with a fluid and electrolyte imbalance • Maintain optimal temperature of a client • Provide ostomy care and/or education (e.g., tracheal, enteral) • Perform suctioning (oral, tracheal, nasopharyngeal) • Manage the care of a client with a permanent pacing device • Assist with invasive procedures (e.g., central line, thoracentesis) • Provide postoperative care • Manage the care of a client with alteration in hemodynamics, tissue perfusion and/or hemostasis • Evaluate the effectiveness of the treatment plan for a client with an acute or chronic diagnosis • Perform wound drainage device removal • Remove wound sutures or staples • Identify basic cardiac rhythm strip abnormalities (e.g., sinus bradycardia, ventricular tachycardia, ventricular fibrillation)

Related content includes but is **not limited** to:

Alterations in Body Systems

- **Assist with invasive procedures (e.g., central line, thoracentesis)***
- **Maintain optimal temperature of a client***
- **Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)***
  - Assess tube drainage during the time the client has an alteration in body systems (e.g., amount, colour)
- **Perform suctioning (oral, tracheal, nasopharyngeal)***
- **Perform wound care and/or dressing changes***
  - Monitor wounds for signs and symptoms of infection
- **Perform wound drainage device removal***

**Activity statement used in the 2025 REx-PN® Practice Analysis*

- **Remove wound sutures or staples***
- **Provide ostomy care and/or education (e.g., tracheal, enteral)***
- **Provide postoperative care***
  - Evaluate a client's response to surgery

Fluid and Electrolyte Imbalances

- **Manage the care of a client with a fluid and electrolyte imbalance***
  - Identify signs and symptoms of fluid and/or electrolyte imbalance
  - Apply knowledge of pathophysiology when caring for a client with a fluid or electrolyte imbalance
  - Evaluate a client's response to interventions to correct a fluid or electrolyte imbalance

Hemodynamics

- **Manage the care of a client with alteration in hemodynamics, tissue perfusion and/or hemostasis***
  - Apply knowledge of pathophysiology to interventions in response to a client with abnormal hemodynamics
  - Provide a client with strategies to manage decreased cardiac output (e.g., frequent rest periods, limit activities)
- **Manage the care of a client with a permanent pacing device***
  - Assess a client for decreased cardiac output (e.g., diminished peripheral pulses, hypotension)
  - Intervene to improve client cardiovascular status (e.g., initiate protocol to manage cardiac arrhythmias, monitor pacemaker functions)
- **Identify basic cardiac rhythm strip abnormalities (e.g., sinus bradycardia, ventricular tachycardia, ventricular fibrillation)***

Illness Management

- **Educate a client regarding an acute or chronic condition***
- **Manage the care of a client with impaired ventilation/oxygenation***
- **Evaluate the effectiveness of the treatment plan for a client with an acute or chronic diagnosis***
  - Implement interventions to manage a client's recovery from an illness
  - Promote and provide continuity of care in illness management activities
  - Identify client data that needs to be reported immediately
  - Apply knowledge of client pathophysiology to illness management
  - Implement interventions to address side/adverse effects of radiation therapy (e.g., dietary modifications, avoid sunlight)
  - Assess adaptation of a client to health alteration, illness and/or disease
  - Assess client for signs and symptoms of adverse effects of radiation therapy
  - Apply knowledge of nursing procedures, pathophysiology and psychomotor skills when caring for a client with an alteration in body systems
  - Promote client progress toward recovery from an alteration in body systems

**Activity statement used in the 2025 REx-PN® Practice Analysis*

Medical Emergencies

- **Perform emergency care procedures (e.g., cardiopulmonary resuscitation, respiratory support, automated external defibrillator)***
  - Apply knowledge of pathophysiology when caring for a client experiencing a medical emergency
  - Apply knowledge of nursing procedures and psychomotor skills when caring for a client experiencing a medical emergency
  - Explain emergency interventions to a client
  - Notify the primary health care provider about unexpected client response/emergency situation
  - Provide emergency care for wound disruption (e.g., dehiscence)
  - Evaluate and document a client's response to emergency interventions (e.g., restoration of breathing, pulse)

Pathophysiology

- **Identify pathophysiology related to an acute or chronic condition***
  - Understand general principles of pathophysiology (e.g., injury and repair, immunity, cellular structure)

Unexpected Response to Therapies

- **Recognize signs and symptoms of a client's complications and intervene***
  - Assess the client for unexpected adverse response to therapy (e.g., increased intracranial pressure, hemorrhage)
  - Promote recovery of a client from unexpected response to therapy (e.g., urinary tract infection)

Sample Item

The nurse is teaching a client who has gout. Which of the following information should the nurse reinforce? **Select all that apply.**

1. "Gout can cause deformity but is usually painless."
2. "Medications and a low-purine diet help to manage gout." **(key)**
3. "Gout is a metabolic disorder of excess uric acid production." **(key)**
4. "Gout attacks can be precipitated by increased ingestion of alcohol." **(key)**
5. "Supplemental vitamins and herbs should be eliminated to reduce gout attacks."

**Activity statement used in the 2025 REx-PN® Practice Analysis*

III. Administration of the REx-PN®

The REx-PN is administered to candidates by computerized adaptive testing (CAT). CAT is a method of delivering examinations using computer technology and measurement theory. With CAT, each candidate's examination is unique because it is assembled interactively as the examination proceeds. Computer technology selects items to administer that match the candidate's ability. The items, which are stored in a large item pool, are classified by test plan category and level of difficulty. After the candidate answers an item, the computer calculates an ability estimate based on all of the previous answers the candidate selected. The next item administered is chosen to measure the candidate's ability in the appropriate test plan category. This process is repeated for each item, creating an examination tailored to the candidate's knowledge, skills and judgment while fulfilling all test plan requirements. The examination continues with items selected and administered in this way until a pass or fail decision is made.

Computerized Adaptive Testing

The REx-PN is different from a traditional fixed-length examination, which administers the same items to every candidate. Fixed-length examinations ensure the difficulty of the examination is constant for every candidate; therefore, the percentage correct is the indicator of the candidate's ability. This approach requires high-ability candidates to answer all easy items on the examination and low-ability candidates to guess on difficult items. This method provides less accurate information about the candidate's true ability.

The REx-PN uses CAT to administer items. CAT produces exam results that are more precise and efficient, using fewer items by targeting them to the candidate's ability. The computer (that is, the CAT scoring algorithm) estimates the ability of the candidate in relation to the passing standard. Every time the candidate answers an item, the computer reestimates the candidate's ability. With each additional answered item, the ability estimate becomes more precise.

Each item the candidate receives is selected from a large pool using three criteria.

1. The item is limited to the content area that will produce the best match to the test plan percentages. CAT ensures that each candidate's exam contains enough items from each content area to match the required test plan percentages.
2. An item is selected that the candidate is expected to find challenging, aligning with their ability estimates. This ensures the next item should not be too easy or too difficult, and the examination can obtain maximum information about the candidate's ability from the item. After each response, the computer calculates the candidate's ability estimate based on all previous answers and the difficulty of those items. The next item administered is chosen based on that ability estimate and is selected from an appropriate test plan category to meet the test plan percentages.
3. The CAT program excludes any item that a repeat candidate has seen in previous examinations.

Examination Length

The REx-PN is a variable-length computerized adaptive test and can range from 90 to 150 items. Of these items, 30 are pretest items that are not scored. Regardless of the number of items administered, the time limit for this examination is four hours. The time allotted **includes** the tutorial, sample items, all breaks and the examination. All breaks are optional.

The length of the examination is determined by the candidate's responses to the items. Depending on the particular pattern of correct and incorrect responses, candidates receive different numbers of items and therefore use varying amounts of time. The candidate should select and maintain a reasonable pace that permits completion of the examination within the allotted time should the maximum number of items be administered.

Each candidate is given an examination that adheres to the test plan and is therefore given the opportunity to demonstrate their ability. The length of the candidate's examination is not an indication of a pass or fail result. A candidate may pass or fail regardless of the length of the examination. Additional information on passing and failing rules is included in further detail in this section.

Scoring the REx-PN®

Pretest Items

For CAT to function properly, the difficulty of each item must be known in advance. The degree of difficulty is determined by administering the items as pretest items to a large sample of REx-PN candidates. Pretest items are not included when estimating the candidate's ability or when making pass-fail decisions. When enough responses are collected, the pretest items are statistically analyzed and calibrated. If the pretest items meet REx-PN statistical standards, they can be administered on future examinations as operational items. There are 30 pretest items included each time a candidate writes the REx-PN. Pretest items appear identical to operational items; therefore, it is recommended that candidates give their best effort for every item.

Passing and Failing

The decision whether a candidate passes or fails the REx-PN is governed by three different scenarios.

Scenario #1: The 95% Confidence Interval Rule

This scenario is the most common for REx-PN candidates. The computer will stop administering items when it is 95% certain that the candidate's ability is either clearly above or clearly below the passing standard.

Scenario #2: Maximum-Length Exam

Some candidates' ability levels will be very close to the passing standard. When this is the case, the computer continues to administer items until the maximum number of items is reached. At this point, the computer disregards the 95% confidence interval rule and considers only the final ability estimate, which is computed based on all scored items responded to.

- If the final ability estimate is at or above the passing standard, the candidate passes.
- If the final ability estimate is below the passing standard, the candidate fails.

Scenario #3: Run-Out-of-Time Rule (R.O.O.T.)

If a candidate runs out of time before reaching the maximum number of items and the computer has not determined with 95% certainty whether the candidate has passed or failed, alternate criteria are used.

- If the candidate has not answered the minimum number of required items, the candidate automatically fails.
- If at least the minimum number of required items were answered, the computer looks at the final ability estimate computed from responses to all completed, scored items.
  - If the final ability estimate is at or above the passing standard, the candidate passes.
  - If the final ability estimate is below the passing standard, the candidate fails.

Types of Items on the REx-PN®

During the administration of the REx-PN, candidates will be required to respond to items in a variety of formats. These formats may include multiple choice, multiple response, fill-in-the-blank calculation, exhibit and graphics.

Scoring Items

REx-PN items have multiple item formats. Items with one key are scored correct or incorrect. There is partial credit scoring for items for which more than one key exists (e.g., multiple response items). Updated information on the administration of the exam is available at rexpn.com.

The Passing Standard

The REx-PN® Examination Committee (PNEC) reevaluates the passing standard once every five years. The criterion that PNEC uses to set the standard is the minimum level of ability required for safe and effective entry-level nursing practice. To make the final decision on the passing standard, PNEC is provided the results of a standard setting workshop performed by a panel of experts.

Once the passing standard is set, it is applied uniformly to every examination according to the procedures laid out in the Scoring the REx-PN section. To pass the REx-PN, a candidate must perform **at or above** the passing standard. There is no fixed percentage of candidates that pass or fail each examination.

Similar Items

Occasionally, a candidate may receive an item that seems to be very similar to one received earlier in the examination. This may happen for a variety of reasons. Items may contain content pertaining to similar symptoms, diseases or disorders yet address different phases of the nursing process. Alternatively, a pretest (unscored) item may contain content similar to an operational (scored) item. Candidates should not assume they received a second item similar in content to a previously administered item because they answered the first one incorrectly. The candidate is instructed to always select the answer believed to be correct for each item administered.

Reviewing Answers and Guessing

Examination items are presented to the candidate one at a time on a computer screen. There is no time limit for a candidate to spend on each individual item. Once an answer to an item is selected, the candidate can consider the answer and change it, if necessary. However, once the candidate confirms the answer and proceeds to the next item by pressing the <NEXT> button, the candidate can no longer return to a previous item. Every item must be answered even if the candidate is not sure of the correct answer. If the candidate is unsure of the correct answer, the candidate should consider all response options and provide their best answer to proceed to the next item. The computer will not allow the candidate to proceed to the next item without answering the current item. The best advice is to maintain a reasonable pace and carefully read and consider each item before answering.

REx-PN® Terminology

Advance directive: A legal document in which a client specifies what actions should be taken for their health if they are no longer able to make decisions for themselves because of illness or incapacity.

Client: Individual, family or group, including significant others and populations.

Do not resuscitate (DNR): A legal document stating a client does not want cardiopulmonary resuscitation if their heart stops beating.

Licensed: Registration with the regulatory body.

Order: Intervention, remedy or treatment as directed by an authorized primary health care provider.

Prescription: Intervention as it relates to medication specifically as directed by an authorized primary health care provider.

Primary Health Care Provider: Members of the health care team who are licensed and authorized to formulate prescriptions and orders on behalf of the client, as well as receive notifications of client status, are referred to as primary health care provider, medical physician (or other specialty, e.g., surgeon, nephrologist) or advanced practice nurse.

Supervision: The monitoring and directing of specific activities or procedures.

Unregulated care provider (UCP): Any unregulated, paid care provider trained to function in a supportive role, regardless of title. They are neither registered nor licensed by a regulatory body. They have no legally defined scope of practice. Unregulated care providers do not have mandatory education or practice standards. Unregulated care providers include, but are not limited to, personal support workers, resident care attendants, home support workers, mental health workers, teaching assistants and community health representatives.

Examination Security and Confidentiality

Any candidate who violates test centre regulations or rules, engages in irregular behaviour or misconduct, and/or does not follow a test centre administrator's warning to discontinue inappropriate behaviour may be dismissed from the test centre. Additionally, exam results may be withheld or canceled and the nursing regulatory body may take other disciplinary action such as denial of a registration and/or disqualifying the candidate from future registrations. Refer to the current candidate bulletin at rexpn.com/prepare.page for more information.

Candidates should be aware and understand that the disclosure of examination items before, during or after the examination is a violation of law. Violations of confidentiality and/or candidates' rules can result in criminal prosecution or civil liability and/or disciplinary actions by the nursing regulatory body, including the denial of registration.

Tutorial

Each REx-PN candidate is provided information on how to answer examination items. A tutorial is given at the beginning of the examination explaining the various formats that candidates may see on the examination. More information on alternate item formats is available at rexpn.com.

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V. Appendix A

Item Writing Exercises for Educators

The following written exercises are designed to provide nurse educators with hands-on experience with writing REx-PN® style items. Please note, not all item types are provided in the item writing exercises. Refer to rexpn.com/faqs.page for answers to frequently asked questions and additional information on alternate item formats.

Steps to Item Writing

A well-designed, multiple choice item consists of three main components: a stem (asks a question or poses a statement that requires completion), key (the correct answer/s) and distractor(s) (incorrect option/s). The following section is designed to enhance the writer's understanding of the REx-PN item writing process. Steps are provided below to assist in creating a well-designed item.

Step 1. Select an area of the test plan for the focus of the item.

Step 2. Select a subcategory from the chosen area of the test plan.

Step 3. Select an important concept within that subcategory.

Step 4. Use the concept selected and write the stem.

Step 5. Write a key to represent important information the entry-level nurse should know.

Step 6. Identify common errors, misconceptions or irrelevant information.

Step 7. Use the previous information and write the distractors.

Step 8. Complete the item using the stem, key and distractors.

Example Using the Steps to Item Writing

Please find below an example of how to write an item using the steps provided.

1. Select an area of the test plan for the focus of the item.

- Pharmacological and Parenteral Therapies

2. Select a subcategory from the chosen area of the test plan.

- Medication Administration

3. Select an important concept within that subcategory.

- Educate a client about medications.

4. Use the selected concept and write the stem.

- The nurse is teaching a client who is using a bronchodilator via a metred-dose inhaler (MDI) without a spacer. Which of the following statements by the client indicate a correct understanding of the teaching?

5. Write a key to represent important information the entry-level nurse should know.

- Correct understanding of metred-dose inhaler use:
  - "I should shake the canister for 5 seconds to mix the medication before using the MDI."

6. Identify common errors, misconceptions or irrelevant information.

- Lack of understanding of metred-dose inhaler use
- Uncertainty of metred-dose inhaler preparation

7. Use the previous information and write the distractors.

- "After inhaling the medication, I should hold my breath for 30 seconds."
- "Before taking the second puff of the medication, I should wait at least 15 minutes."
- "After inhaling the medication, I should exhale through my nose when I let my breath out."

8. Complete the item using the stem, key and distractors.

The nurse is teaching a client who is using a bronchodilator via a metred-dose inhaler (MDI) without a spacer. Which of the following statements by the client indicates a correct understanding of the teaching?

1. "After inhaling the medication, I should hold my breath for 30 seconds."
2. "Before taking the second puff of the medication, I should wait at least 15 minutes."
3. "I should shake the canister for 5 seconds to mix the medication before using the MDI." **(key)**
4. "After inhaling the medication, I should exhale through my nose when I let my breath out."

Exercises

Item writing topics: Using the steps listed above to create an item based on the following situations. Example items based on these topics are provided later in this section.

Management of Care

The nurse is caring for assigned clients. Write an item with four different client scenarios in which one client should be the priority to assess first.

Safety and Infection Prevention and Control

The nurse is assessing a client for allergies. Write an item indicating correct understanding of potential risk factors for an allergic reaction.

Health Promotion and Maintenance

The nurse is assessing an older adult client. Write an item that includes expected age-related findings.

Psychosocial Integrity

The nurse is caring for a school-age client. Write an item in which the nurse provides therapeutic communication techniques based on a client statement.

Basic Care and Comfort

The nurse is teaching a client about sleep hygiene. Write an item in which the nurse provides correct information to the client.

Pharmacological and Parenteral Therapies

The nurse is preparing to administer a medication to a client. Write an item that indicates correct understanding of side effects of the medication.

Reduction of Risk Potential

The nurse is teaching a client who is postoperative day 1. Write an item that indicates that the client has correct understanding of the teaching for the surgical procedure.

Physiological Adaptation

The nurse is caring for a client with a chest tube. Write an item that indicates correct understanding of client complications related to chest tubes.

Additional Sample Items

Management of Care

The nurse has received the following information about assigned clients. The nurse should **first** assess the client who had a

1. subtotal thyroidectomy 1 day ago and is experiencing tingling of the toes **(key)**
2. thoracotomy 1 day ago and is experiencing serosanguineous drainage from the chest tube
3. repair of an aortic aneurysm 4 hours ago and has had urine output of 125 ml within the past 2 hours
4. removal of an impaled object from the left eye 2 hours ago and requires application of an eye patch

Safety and Infection Prevention and Control

The nurse is planning a staff education program about latex allergies and associated food allergies. Which of the following foods are associated with latex allergies?

1. bananas **(key)**
2. broccoli
3. plums
4. cauliflower

Health Promotion and Maintenance

The nurse is assessing an older adult client's genitourinary system. Which of the following is an expected age-related finding?

1. nocturia **(key)**
2. renal calculi
3. glomerulonephritis
4. overflow incontinence

Psychosocial Integrity

The nurse is talking with a 9-year-old client who states, "I do not like school." Which of the following responses would be appropriate for the nurse to make?

1. "I did not like school when I was your age."
2. "You must enjoy seeing your friends at school."
3. "I am interested in hearing more about your feelings." **(key)**
4. "You may begin to like school if you can find a favourite subject."

Basic Care and Comfort

The nurse is teaching a group of older adult clients about sleep hygiene. Which of the following information should the nurse include?

1. "Use an over-the-counter (OTC) sleep medication to stay asleep during the night."
2. "Eat a snack that contains L-tryptophan, such as milk, at bedtime to induce sleep." **(key)**
3. "Exercise for at least 30 minutes prior to going to sleep to ensure that you are tired."
4. "Avoid taking over-the-counter (OTC) melatonin because it is unlikely to help with insomnia."

Pharmacological and Parental Therapies

The nurse is caring for a client who is receiving gentamicin. Which of the following findings should the nurse recognize as a side effect of the medication?

1. vertigo **(key)**
2. constipation
3. increased serum sodium level
4. decreased blood urea nitrogen (BUN) level

Reduction of Risk Potential

The nurse is teaching a client who had a total hip replacement by posterior approach 1 day ago. Which of the following statements by the client would indicate a correct understanding of the teaching?

1. "I will lie on the operative side."
2. "I should avoid crossing my legs." **(key)**
3. "I will begin jogging again after a few weeks."
4. "I should elevate my affected leg when sitting in a chair."

Physiological Adaptation

The nurse is caring for a client who has a chest tube connected to a closed-chest drainage system and observes continuous bubbling in the water seal chamber. The nurse should recognize that this could indicate that

1. there may be an air leak **(key)**
2. the tubing may be occluded
3. the suction pressure is too high
4. there are blood clots in the tubing

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