Vicky Murat

*Complete and submit to the corresponding dropbox by 1600 on the assigned clinical day.

To Be Completed Before the Simulation

** Blue boxes should be completed using textbook information. What do you expect to find? This information should be collected before you start the ATI simulation.

Medical Diagnosis/ Disease: Myocardial Infarction (MI)

NCLEX IV *(8)*: Physiological Integrity/Physiological Adaptation
Reduction of Risk

NCLEX IV *(7)*:

Anatomy and Physiology Normal Structures	Pathophysiology of Disease	Anticipated Diagnostics Labs
-Rt atrium -Rt ventricle -L atrium -L ventricle -tricuspid valve -pulmonary valve -mitral valve -aortic valve -SVC -IVC -pulmonary art -pulmonary vein -aorta	Occlusion of a coronary vessel caused by rupture of a vulnerable plaque. Ischemia occurs when heart muscle doesn't get enough oxygen.	•myoglobin •troponin I or T •creatine kinase **Additional Diagnostics** •CXR •echocardiogram •CT scan •MRI •coronary catheterization •ECG •Hx

-L anterior descending artery
-diagonal arteries
•Rt coronary artery
-Rt marginal artery
-L coronary artery
-circumflex artery
-L marginal artery

NCLEX II *(3)*: Health Promotion and Maintenance

NCLEX IV *(7)*: Reduction of Risk

Contributing Risk Factors	Signs and Symptoms	Possible Therapeutic Procedures Non-surgical Surgical	Prevention of Complications (What are some potential complications associated with this disease process)
•smoking •high fat diet •OM •high cholesterol •HTN •obese	•angina •dizziness •sweating •Nausea •Vomiting •coughing •wheezing •SOB •anxiety	CABG coronary angioplasty	-arrhythmias -AMI -heart failure -cardiogenic shock

NCLEX IV *(6)*: Pharmacological and Psychosocial/Holistic
Parenteral Therapies

NCLEX IV *(5)*: Basic Care and Comfort

NCLEX III *(4)*:

Care Needs

Anticipated Medication Management	Non-Pharmacologic Care Measures	What stressors might a patient with this diagnosis be experiencing?
-nitroglycerin -low-dose aspirin -antiplatelets -anticoagulants -thrombolytics -fibrinolytics -morphine -oxygen	-rest -balanced healthy diet -smoke cessation -regular exercise -decrease OH consumption -lose weight	-anxiety -coping

Client/Family Education

NCLEX I *(1)*: Safe and Effective Care Environment

(Blood flow)
physiology - SVC & IVC → R. atrium → tricuspid valve → R. ventricle → pulmonary valve → pulmonary arteries → lungs for oxygenation → pulmonary veins → L atrium → mitral valve → L ventricle → aortic valve → aorta
coronary arteries supply oxygen to heart muscles

List 3 potential teaching topics/areas	Multidisciplinary Team Involvement (Which other disciplines do you expect to share in the care of this patient)
• Maintain healthy weight. • Eat healthy foods. • Exercise regularly.	• PCP • radiology • dietitian • RN • cardiologist • social worker • Lab • Home health

Anticipated Patient Problems, Goals, & Interventions Based on Medical Diagnosis

** This worksheet should be completed before you begin the ATI simulation.

Problem #1:

Decreased Cardiac Output

Patient Goals:

1. Demonstrate adequate cardiac output as evidenced by BP WNL 120/80 mmHg or baseline, HR WNL 60-100 bpm, and peripheral pulses WNL +2 during my care.
2. Explains one action or precaution to take for cardiac disease during my care.

Assessments: Assess weight daily.

- Assess vitals HR, BP, peripheral pulses, cap refill, heart sounds, skin temp, skin color, skin moisture, LOC, RR, breath rhythm, breath sounds, pulse ox, chest pain (quality, severity, duration, intensity), and fatigue q4 or prn.

Interventions (In priority order):

- Apply oxygen 2L NC q2h or as needed.
- Position to high fowlers q2h or as needed.
- Apply nitroglycerin as prescribed.
- Administer aspirin as prescribed.
- Maintain patient on bedrest qshift.
- Educate patient on risk factors such as diet, smoking, and lack of exercise qshift or as needed.

Problem #2:

Acute Pain

Patient Goals:

1. Verbalize chest pain 0 on 0-10 scale during my care.
2. Verbalize one lifestyle modification to reduce risk during my care.

Assessments:

- Assess pain location, duration, and intensity q2h prn. Assess hx of chest pain, diagnostic results q8hr shift as prn.

Interventions (In priority order):

- Administer morphine as prescribed.
- Evaluate effectiveness of analgesic using numeric pain scale q4h prn.
- Educate on adverse effects of unrelieved chest pain during my care.
- Educate on lifestyle modification to reduce risks during my care. (ie diet, exercise)
- Support nonpharmalogical methods to control pain, such as music, during my care.
- Assist to identify resources for coping with psychological impact of pain during my care.

At this time, complete assigned ATI Real Life Simulation

Actual Patient Problems & Goals

** The following should be completed after the ATI simulation.

Problem #1:

Decreased Cardiac Output r/t MI

Patient Goals:

Demonstrate adequate cardiac output as evidenced by BP WNL 120/80 mmHg or baseline, HR 60-100 bpm during my care. 1.

_ Met ✓
_ Unmet

Explains one action or precaution to take for cardiac disease during my care. 2.

_ Met ✓
_ Unmet

Problem #2:

Acute Pain r/t MI

Patient Goals:

Patient will achieve a decrease in pain of 0/10 on a 0-10 scale during my care. 1.

_ Met ✓
_ Unmet

Patient will display improved well-being as evidenced by BP 120/80, RR 12-20, HR 60-100, and muscle tone relaxed (or baseline) during my care. 2.

Met ✓
Unmet

SOAP Notes Based on Priority Problems

Priority Patient Problem #1: Decreased Cardiac Output

Subjective: *This section explains the client symptoms. Include a narrative of the patient's complaints/concerns and/or information obtained from secondary sources.*	**Chief Complaint:** Unrelieved chest tightness/pain after shoveling snow. **PMH:** HTN, CAD w/ angina, asthma **Allergies:** PCN, peanuts, sulfa, shellfish, contrast dye **Current Medications:** nitro, lisinopril, albuterol, baby aspirin
Objective: *This section is your clinical observations. Include, pertinent vital signs, pertinent labs and diagnostics <u>related to priority problem.</u>*	**Vital Signs:** BP, HR, RR q5min pain 8/10 110/82, 96 HR, 28 RR, 92% O_2 **Labs:** troponin, Kf creatinine, CHO **Diagnostics:** ECG - prolonged Rwave, PVC, ST elevation tele CXR
Assessment: *Focused assessment on your priority problem.*	1715 110/82 96 HR 28 RR 92% O_2 1718 104/78 98 HR 24 RR 94% O_2 1720 100/68 104 HR 24 RR 95% O_2 PERRL NO CPR 4L/min NC Glasgow 15 Alert & oriented x3
Plan ***Based on priority problem only** *Include what your plan is for the client. What treatments or medications are needed. You can include procedures, consults, labs/diagnostics, etc. What nursing interventions are being performed?*	**Plan:** NS 1000mL (300mL bolus then 100mL/hr) - ECG stat - vitals every 5min - O_2 96% or greater - cardiac cath to open blocked artery - NPO - lisinopril 10mg daily - amlopidine 5mg daily - aspirin 325mg daily - clopidogrel 75mg daily **Teaching/Resources:** Cardiac cath unblocks clogged arteries. Keep leg straight after cardiac cath. Modifiable risk factors (ie obesity). - Nutrition, My plate

(2145) Labs
troponin T 0.14ng/mL
troponin I 0.07ng/mL
aPTT 38sec

(1745) Labs continued
aPTT 84sec
PT 12sec
INR 0.9
troponin I 0.06ng/mL
troponin T 0.2ng/mL
lactic acid venous 0.6mmol/L
CK 0mEq/L
CHO 324mg/dL

Plan continued
left cardiac cath with possible percutaneous transluminal coronary angioplasty with balloon inflation and stent placement

Priority Patient Problem #2: Acute Pain (r/t MI)

Subjective: *This section explains the client symptoms. Include a narrative of the patient's complaints/concerns and/or information obtained from secondary sources.*	**Chief Complaint:** "My chest is tight. The squeezing won't go away." Unrelieved chest pain/tightness after shoveling snow.
Objective: *This section is your clinical observations. Include vital signs, pertinent labs and diagnostics related to priority problem.*	**Vital Signs:** 110/62, 96 HR, 28 RR pain 8/10 (chest) **Labs:** troponin, K^+, creatinine, CTO **Diagnostics:** ECG - prolonged Pwave, PVC, ST elevation
Assessment: *Focused assessment on your priority problem.*	NO CPR → over heart pain squeezing, tight, unrelieved by rest and nitro. pain started at 1655. Pain is intense, "I feel dizzy, sick to my stomach."
Plan ***Based on priority problem only** *Include what your plan is for the client. What treatments or medications are needed. You can include procedures, consults, labs/diagnostics, etc. What nursing interventions are being performed?*	**Plan:** - morphine 2mg IVP - ECG STAT - morphine 2mg IVP prn - O_2 96% or greater **Teaching/Resources:** - teach non-pharmacological pain-relief strategies (ie breathing) to be utilized along with pharmacological pain relief strategies Resource - CBT

Reflection:

- Go back to your Preconference Template:
    - Indicate (circle, star, highlight, etc.) the components of your preconference template that you saw applied to the care of this virtual patient.

- What was your biggest "take-away" from participating in the care of this patient? How did this impact your nursing practice?

My biggest take away is to always ask patient about any allergies or hypersensitivities. This is important because allergies can develop over time and this information should be updated frequently. This will help me improve the quality of patient care by avoiding adverse reactions.

Time Allocation: 8 hours

Module Report

Tutorial: **Real Life RN Medical Surgical 4.0**

Module: **Myocardial Infarction Complications**

Individual Name: **Vicky Murat**

Institution: **Margaret H Rollins SON at Beebe Medical Center**

Program Type: **Diploma**

Standard Use Time and Score

	Date/Time	Time Use	Score
Myocardial Infarction Complications	2/9/2023 9:23:59 PM	1 hr 4 min	Strong

Reasoning Scenario Details
Myocardial Infarction Complications - Use on 2/9/2023 8:19:50 PM

Reasoning Scenario Performance Related to Outcomes:

*See Score Explanation and Interpretation below for additional details.

Body Function	Strong	Satisfactory	Needs Improvement
Cardiac Output and Tissue Perfusion	100%		
Cognition and Sensation	100%		
Integument	100%		
Oxygenation	100%		
Regulation and Metabolism	100%		

NCLEX RN	Strong	Satisfactory	Needs Improvement
RN Management of Care	100%		
RN Pharmacological and Parenteral Therapies	100%		
RN Reduction of Risk Potential	100%		
RN Physiological Adaptation	100%		

QSEN	Strong	Satisfactory	Needs Improvement
Safety	100%		
Patient-Centered Care	100%		
Evidence Based Practice	100%		

Decision Log:

Optimal Decision	
Scenario	Mr. Davis has taken an initial dose of nitroglycerin.
Question	Mr. Davis has taken the first dose of nitroglycerin. Which of the following actions should be taken next?
Selected Option	Mrs. Davis should call 911 if her husband's chest pain is not relieved within 5 minutes.
Rationale	Unresolved chest pain with the administration of nitroglycerin can indicate the client is having a myocardial infarction, so Mrs. Davis should call 911 if the pain continues. Mr. Davis should also take another dose of nitroglycerin. For unresolved chest pain, a total of three doses of nitroglycerin should be administered 5 minutes apart. Mr. Davis should also take a 325 mg dose of aspirin to inhibit platelet aggregation, which can reduce cardiac damage from the formation of a thrombus.

Optimal Decision	
Scenario	Nurse Christine reviews Mr. Davis's a 12-lead ECG.
Question	Nurse Christine is reviewing Mr. Davis' ECG strip, which was completed at 1725. Which pattern on the ECG strip is the priority finding? (You will find hot spots to select in the artwork below. Select only the hot spot that corresponds to your answer.)
Selected Option	137,36,147,36,137,49,147,48
Rationale	The priority finding is the ST-segment elevation possibly indicating an acute coronary event, which is the greatest risk to Mr. Davis.

Optimal Decision	
Scenario	Nurse Christine prepares to initiate prescriptions.
Question	Nurse Christine is preparing to initiate the prescriptions for Mr. Davis. Which of the following prescriptions should she expect to initiate? (Select all that apply.)
Selected Ordering	Chest x-rayTroponin levelMorphinePotassium and creatinine levels

Rationale	Nurse Christine should expect to initiate a bedside chest x-ray to rule out chest pain resulting from a dissecting aorta. A CAT-scan is ordered if the chest x-ray indicates the client has a dissecting aorta. Troponin is a cardiac enzyme, and when elevated, is an early indicator of myocardial cell damage. Morphine is administered to relieve pain, reduce myocardial oxygen consumption, and facilitate vasodilation. Potassium and creatinine are drawn for a baseline prior to the cardiac catheterization. A client having an ST-segment elevation myocardial infarction (STEMI) will not have an MRI before having a heart catheterization because this would delay the initiation of the cardiac catheterization and thus prohibit the provider meeting the 60-minute time-frame from the arrival to the facility to intervention.

Scenario	Nurse Carl is determining the priority action to take when Mr. Davis is itching.
Question	Mr. Davis is reporting itching over his arms and chest. What is the most appropriate action Nurse Carl should take? (Type your response in the field below and click "Submit" to compare your answer to the expert response.)
Selected Option	Ask about allergies. If allergic to shellfish can not use contrast. Monitor airway and treat with antihistamine or epi.
Rationale	The priority action nurse Carl should take is to check Mr. Davis's medical record for a shell fish allergy. Nurse Carl should recognize the possibility of an allergic reaction related to a shellfish allergy. Record the allergy to shellfish in the medical record and notify the provider of the allergy and Mr. Davis's report of itching. The provider can determine if Mr. Davis is having a delayed allergic reaction to the contrast dye used during cardiac catheterization. Nurse Carl should check the client's skin for a rash and request a prescription for diphenhydramine IV to decrease the itching.

Optimal Decision	
Scenario	Mr. Davis is having difficulty breathing, and Nurse Carl is assessing breath sounds.
Question	Nurse Carl is assessing Mr. Davis's breath sounds and suspects Mr. Davis is starting to experience a moderate systemic reaction to the contrast dye used for the heart catheterization. Which of the following breath sounds should the nurse expect to hear during auscultation?
Selected Option	Wheezing
Rationale	Nurse Carl should recognize that high-pitched wheezing following a heart catheterization using contrast dye indicates a moderate allergic reaction that can progress into anaphylactic shock. Anaphylactic reaction to the contrast dye requires immediate intervention. Wheezing is a continuous squeaky breath sound that arises from the small airways and is associated with inflammation and edema.

Optimal Decision	
Scenario	Nurse Carl is choosing the correct medication to administer for Mr. Davis's dyspnea and wheezing.

Question	Nurse Carl has listened to Mr. Davis's breath sounds and recognizes the manifestations of Mr. Davis's condition. Nurse Carl should expect a prescription for which of the following medications?
Selected Option	Epinephrine IM
Rationale	Nurse Carl should administer epinephrine IM to promote bronchodilation, vasoconstriction, and maintenance of the blood pressure and heart rate. Anaphylaxis is a life-threatening event and requires rapid intervention to prevent a potential critical outcome.

Optimal Decision	
Scenario	Nurse Carl is checking Mr. Davis's puncture site during the post-heart catheterization assessment.
Question	Nurse Carl is completing a post-heart catheterization assessment of Mr. Davis. Which of the following observations should Carl address first?
Selected Option	A developing hematoma at the puncture site
Rationale	The greatest risk to the client is the formation of a hematoma at the puncture site. A hematoma is an indication the client is having active bleeding into the groin tissue and requires immediate action. In addition, nurse Carl should know a hematoma can occur without observable bleeding at the puncture site. Therefore, this is the priority finding.

Optimal Decision	
Scenario	Nurse Carl finds bleeding at the puncture site.
Question	Mr. Davis's puncture site is covered with gauze and a transparent bandage. Nurse Carl is assessing Mr. Davis' puncture site for bleeding. There is a 7.62-cm (3-in) groin hematoma. The gauze is saturated with bright red blood. Which of the following actions should Nurse Carl take?
Selected Option	Apply pressure to the right groin site.
Rationale	Nurse Carl should assess the puncture site and apply pressure to the area for at least 10 minutes in the presence of active bleeding or a hematoma. Pressure is applied to create hemostasis.

Optimal Decision	
Scenario	Nurse Carl is reviewing Mr. Davis's laboratory values.
Question	Nurse Carl is reviewing Mr. Davis's laboratory results in the electronic medical records (EMRs). Which of the laboratory results should nurse Carl report immediately to the provider?
Selected Option	Potassium
Rationale	The potassium is 3.2 mEq/L, which is below the expected reference range of 3.5 to 5 mEq/L. Nurse Carl should report this value immediately to the provider.

Optimal Decision	
Scenario	Nurse Carl is planning to teach Mr. Davis about modifiable risk factors.

Question	Nurse Carl has information to provide to Mr. Davis about modifiable risk factors for coronary artery disease. Which of the following risk factors should he include in the teaching?
Selected Option	Obesity
Rationale	Nurse Carl should include in the teaching that modifiable risk factors include obesity, cigarette smoking, hypertension, diabetes, and sedentary lifestyle. Clients can alter modifiable or controllable risk factors by making choices to change aspects of personal lifestyle.

Optimal Decision	
Scenario	Nurse Carl suspects manifestations of cardiogenic shock.
Question	Nurse Carl is assessing Mr. Davis with the charge nurse and suspects manifestations of cardiogenic shock. Which of the following findings should Carl identify as manifestations of cardiogenic shock? (Select all that apply.)
Selected Ordering	Mean arterial pressure of 54 mm HgAgitation and restlessnessArterial blood pressure of 88/54 mm Hg
Rationale	A client who is manifesting cardiogenic shock can have hemodynamic instability. These can be observed by decreased blood pressure, tachycardia, reduced mean arterial pressure (MAP), agitation, and restlessness.

Optimal Decision	
Scenario	Nurse Carl is calculating of the initial rate of the dobutamine drip.
Question	Nurse Carl is preparing to administer dobutamine 2.5 mcg/kg/min by continuous IV infusion to Mr. Davis who weighs 110 kg (242 lb). Available is dobutamine 250 mg in 250 mL of dextrose 5% in water. Carl should set the IV pump to deliver how many mL/hr? (Round the answer to the nearest tenth. Use a leading zero if it applies. Do not use a trailing zero.)
Selected Option	16.5
Rationale	**Follow these steps for the Ratio and Proportion method of calculation:** Step 1: What is the unit of measurement the nurse should calculate? mL/hr Step 2: What is the dose the nurse should administer? Dose to administer = Desired 2.5 mcg/kg/min *X = Dose per kg/min × Client's weight in kg* *X* mcg/min = 2.5 mcg/~~kg~~/min × 110 ~~kg~~ *X* mcg/min = 275 mcg/min Step 3: What is the dose available? Dose available = Have 250 mg Step 4: Should the nurse convert the units of measurement? Yes (mcg does not equal mg) 1,000 mcg275 mcg/min = 1 mg*X* mg/min *X* mg/min = 0.275 mg/min Yes (min does not equal hr) 60 ~~min~~*X* mg/hr = 1 hr0.275 mg/~~min~~ *X* mg/hr = 16.5 mg/hr Step 5: What is the quantity of the dose available? 250 mL Step 6: Set up an equation and solve for X. *HaveDesired = QuantityX250 mg16.5 mg/hr = &#160250 mLX mL/hr* *X mL/hr = 16.5 mL/hr* *Step 7: Round if necessary.*

	Step 8: Determine whether the amount to administer makes sense. If there are 250 mg/250 mL and the prescription reads 2.5 mcg/kg/min, it makes sense to administer 16.5 mL/hr. The nurse should set the IV pump to deliver dobutamine at 16.5 mL/hr. ***Follow these steps for the Desired Over Have method of calculation:*** *Step 1: What is the unit of measurement the nurse should calculate? mL/hr* *Step 2: What is the dose the nurse should administer? Dose to administer = Desired 2.5 mcg/kg/min* *X = Dose per kg/min × Client's weight in kg* *X mcg/min = 2.5 mcg/~~kg~~/min × 110 ~~kg~~* *X mcg/min = 275 mcg/min* *Step 3: What is the dose available? Dose available = Have 250 mg* *Step 4: Should the nurse convert the units of measurement?* *Yes (mcg does not equal mg)* *275 ~~mcg~~ × 1 mgX mg = 1,000 ~~mcg~~* *X mg/min = 0.275 mg/min* *Yes (min does not equal hr)* *0.275 mg × 60 ~~min~~X mg = 1 ~~min~~* *X mg/hr = 16.5 mg/hr* *Step 5: What is the quantity of the dose available? 250 mL* *Step 6: Set up an equation and solve for X.* *Desired × QuantityX = Have16.5 ~~mg~~ × 250 mLX mL/hr = &#160250 ~~mg~~* *X mL/hr = 16.5 mL/hr* *Step 7: Round if necessary.* *Step 8: Determine whether the amount to administer makes sense. If there are 250 mg/250 mL and the prescription reads 2.5 mcg/kg/min, it makes sense to administer 16.5 mL/hr. The nurse should set the IV pump to deliver dobutamine at 16.5 mL/hr.* ***Follow these steps for the Dimensional Analysis method of calculation:*** *Step 1: What is the unit of measurement the nurse should calculate? (Place the unit of measure being calculated on the left side of the equation.)* *X mL/hr =* *Step 2: Determine the ratio that contains the same unit as the unit being calculated. (Place the ratio on the right side of the equation, ensuring that the unit in the numerator matches the unit being calculated.)* *250 mLX mL/hr = &#160250 mg* *Step 3: Place any remaining ratios that are relevant to the item on the right side of the equation, along with any needed conversion factors, to cancel out unwanted units of measurement.* *250 mL1 ~~mg~~2.5 ~~mcg~~110 ~~kg~~60 ~~min~~X mL/hr = × × × × &#160250 ~~mg~~1,000 ~~mcg~~1 ~~kg~~1 ~~min~~1 hr* *Step 4: Solve for X.* *X mL/hr = 16.5 mL/hr* *Step 5: Round if necessary.* *Step 6: Determine whether the amount to administer makes sense. If there are 250 mg/250 mL and the prescription reads 2.5 mcg/kg/min, it makes sense to administer 16.5 mL/hr. The nurse should set the IV pump to deliver dobutamine at 16.5 mL/hr.*

Optimal Decision	
Scenario	Nurse Carl is anticipating a medication prescription for Mr. Davis.

Question	Nurse Carl continues to monitor Mr. Davis, who remains unstable with a systolic blood pressure less than 90 mm Hg even with a dobutamine drip infusing. Which of the following medications should nurse Carl plan to administer?
Selected Option	Norepinephrine IV drip
Rationale	Norepinephrine is a vasopressor that produces vasoconstriction resulting in increased blood pressure and increased cardiac output. Norepinephrine should be administered, along with fluid volume replacement therapy, but not with a rapid infusion. Nurse Carl should monitor Mr. Davis for arrhythmias, chest pain, and hypertension.

Optimal Decision	
Scenario	Nurse Carl is preparing to administer norepinephrine.
Question	Nurse Carl is preparing to administer norepinephrine to Mr. Davis. Which of the following actions should nurse Carl plan to take?
Selected Option	Administer the medication through a central venous catheter.
Rationale	A norepinephrine drip should be infused using a large vein or central venous catheter to prevent localized vasoconstriction, which can result in extravasation and tissue necrosis.

Optimal Decision	
Scenario	Nurse Carl is monitoring for adverse effects of norepinephrine.
Question	Nurse Carl is reviewing a medication reference for adverse effects of norepinephrine. For which of the following findings should Carl monitor as an adverse effect of the medication?
Selected Option	Decreased urine output
Rationale	Mr. Davis might experience the adverse effect of decreased urine output due to vasoconstrictive effects on the renal arteries and hypoperfusion of the kidneys.

Optimal Decision	
Scenario	Lifestyle changes to reduce the risk of further coronary events.
Question	Nurse Carl is listening to Mr. Davis who is sharing about his plans for lifestyle changes. Which of the following statements indicates that Mr. Davis is planning to make appropriate lifestyle changes?
Selected Option	"I will reduce my sodium intake to 1,500 milligrams a day."
Rationale	Mr. Davis, who is African American, over the age of 50, and has a history of hypertension, should decrease sodium intake to 1,500 mg/day.

Optimal Decision	
Scenario	Nurse Carl is reviewing food choices with Mr. and Mrs. Davis.
Question	Nurse Carl has asked Mr. Davis to select foods from the hospital breakfast menu. Nurse Carl should determine that which of the following foods selected by Mr. Davis is the best choice for adhering to a 1,500 mg low-sodium diet?
Selected Option	3/4 cup shredded wheat cereal

Rationale	Nurse Carl should recognize that shredded wheat cereal is the best food choice for Mr. Davis because 1 cup contains just 1 mg of sodium.

Optimal Decision	
Scenario	Nurse Carl is teaching Mr. Davis about lisinopril.
Question	Nurse Carl is teaching Mr. Davis about taking lisinopril for hypertension. Which of the following information should Carl include in the teaching?
Selected Option	"Report a persistent dry cough."
Rationale	Nurse Carl should include that a persistent dry cough is an adverse effect of lisinopril and may persist until the medication is discontinued. Mr. Davis should notify the provider if he experiences this adverse effect, so the medication can be changed.