

1. The nurse provides home care instructions to a patient with systemic lupus erythematosus about methods to manage fatigue. Which patient statement indicates a need for further teaching?
 - A. "I should take warm baths because they are relaxing."
 - B. "I should rest whenever possible to conserve my energy."
 - C. "I should perform high-impact aerobic exercise every day."
 - D. "I should avoid long periods of rest because it may increase joint stiffness."

2. The nurse is teaching a newly diagnosed patient about systemic lupus erythematosus. The nurse determines teaching has been effective when the patient makes which statement?
 - A. "I should spend plenty of time in bright sunlight to improve my condition."
 - B. "I should notify my provider if I have a sore throat or fever."
 - C. "Stressful situations won't cause any exacerbations with SLE."
 - D. "If I were to become pregnant, I won't have any complications."

3. The nurse is caring for a clinic patient with asymptomatic chronic HIV. Which of the following is the priority intervention for the patient?
 - A. The nurse should place the patient in isolation with droplet precautions.
 - B. The nurse should refer the patient for hospice care.
 - C. The nurse should notify the patient's sexual partners of the diagnosis.
 - D. The nurse should ensure the patient is up to date on their vaccinations.

4. The nurse is caring for a patient who is HIV positive and taking antiretroviral therapy (ART). Which information is most important for the nurse to address when planning care?
 - A. The patient's blood glucose level is 142 mg/dl.
 - B. The patient complains of feeling constantly tired.
 - C. The patient's HIV RNA level has risen from the last visit.
 - D. The patient states they have not missed a dose of medication.

5. Which action will the nurse include in the plan of care for a 33-year-old patient with a new diagnosis of rheumatoid arthritis? Select all that apply.
 - A. Instruct the patient to purchase a firm mattress.
 - B. Suggest that the patient take a nap in the afternoon.
 - C. Teach the patient to avoid warm baths.
 - D. Suggest high-impact exercise with weights several times daily.
 - E. Recommend a flu vaccine every year.
 - F. Continue immunosuppressive therapy even if they are taking antibiotics for infection.

6. The nurse determines teaching has been effective when a patient with rheumatoid arthritis makes which statement?
 - A. A joint replacement surgery will fix everything.
 - B. This condition will get better and worse again.
 - C. The disease will only affect my joints.
 - D. Medications will help with pain, but not inflammation.

7. Which of the following would be an example of a Type III hypersensitivity reaction?
- A. A kidney transplant rejection
 - B. A drug allergy causing anaphylaxis
 - C. An autoimmune disorder
 - D. Blood transfusion incompatibility
8. Which of the following are true statements about autoimmune disorders? Select all that apply.
- A. More women than men have autoimmune disorders.
 - B. It is believed that there is a genetic predisposition.
 - C. A trigger is required, and could be a virus, medication, or stress.
 - D. Pregnancy can cause autoimmune disorders to become better or worse.
 - E. Young people are at greater risk for autoimmune disorders.

Answers

1. C
2. B
3. D
4. C
5. A, B, E
6. B
7. C
8. A, B, C, D