

DEMAR MURSE UNIVERSITY NCLEX WORKBOOK



Author, Educator, Mentor, Founder

Professor Regina M. Callion MSN, RN



A MESSAGE FROM YOUR INSTRUCTOR

Welcome to the ReMar Nurse University NCLEX V2 Review,

My name is Professor Regina M. Callion MSN; RN and I will be your instructor for this FREE month-long event. I'm going to give you the strategy and study routine that I use to help hundreds of thousands of nurses to pass NCLEX Next-Gen. At the end of this FREE event, I'm going to ask you to decide how you will complete this journey and give you up to 50% off my complete training system to get your license in the next 30-days or less. I'll show you how the NCLE-V2 works along the way, but before we get into all of the good stuff - here's how I become a nurse....

"I started my nursing career very early, at the age of 16! I was given the challenge to take care of my grandparents."

My grandmother – she was a double amputee she lost her legs and vision to diabetes. My grandfather had a stroke and couldn't talk, swallow or walk. Some might think I would feel helpless in this new environment, but I was empowered because of a home health nurse named Linda. She taught me how to practice bedside nursing in a simple straight to the point way. She turned my challenge into an opportunity.

Nurse Linda wasn't afraid of my age or lack of experience. She believed in me. As we begin our journey together, I want you to see the challenge of passing NCLEX as the opportunity of your lifetime.

I'M GOING TO MAKE YOU A BOLD PROMISE.

Your success in nursing will be determined by your ability to think, plan, decide, and act. The actions you take will be based upon your core content knowledge of the fundamental practice of nursing.

These same skills are necessary as you prepare to take NCLEX®. The stronger you are with the fundamentals, the faster you will learn how to critically think and make the right decisions.

I have personally beaten the odds and as a ReMar Nurse I expect you to do the same.

I've helped thousands of new grads, foreign nurses, to repeat-testers pass NCLEX. It doesn't matter if you've tested 10 times, I want to encourage you to stay focused on this one goal and believe in yourself because if you study this content in the NCLEX V2 Trainer - You Will Pass NCLEX.

During the Love Your Content Event I'm going to take what's in my head and put it in yours as we study the topics of labor, delivery, and sexually transmitted diseases. During this event I'm also going to give you the full opportunity to have all my content inside of the NCLEX V2 Trainer.



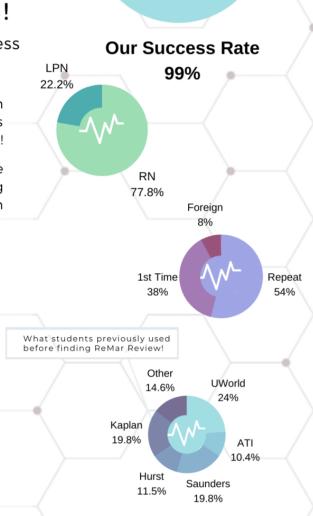
PREPARED FOR SUCCESS!

ReMar Nurses have a 99.2% NCLEX Success Rate Studying Core Nursing Content.

Established in 2010, ReMar Review has become an industry leader and helped more than 300,000 nurses better understand the Core Nursing Content for NCLEX!

With the NCLEX Virtual Trainer we will give you the tools to effectively prepare for the examination. Along with that we provide a community to support you on the journey to becoming a safe nursing professional.

- The NCLEX-RN & LPN test plans and Practice Analysis serve as our guide for content development.
- Our curriculum narrows down the content to emphasize the key topics found on the exam.
- We save time by only teaching the information that a new graduate is expected to know for NCLEX.
- Our streamlined approach to core content builds student's competence and confidence.



We Still Care About the 1%

SO WHAT'S THE DIFFERENCE?

We asked 5,000 repeat-testers "What resources have you previously used?" Nearly 25% of the nurses questioned that failed NCLEX reported using **UWorld**; and nearly 20% of those students reported using **Kaplan** prior to their failed attempt.

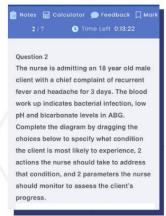
You can literally do a thousand NCLEX questions and learn hundreds of "strategies" but as one student said after passing "When you sit for NCLEX all of those strategies go out the window if you don't KNOW THE CONTENT!" ReMar focuses on the content because when you know your content you are better equipped to answer any question NCLEX gives you! Content is the difference between confidence and anxiety; and passing NCLEX or failing NCLEX. What makes ReMar different? We have better nursing content!

NCLEX-V2 Sale Ends Friday, July 5th! Order now at ReMarNurse.com

PASS NEXT-GEN NCLEX IN 30 DAYS OR LESS!

QUESTION BANK +CAT

Our researched training model combines the science of nursing with clinical applications to situational awareness and judgement.



Incorrect answer	Encourage NPO status
Unmarked correct answer	Administer ordered antibiotics
acilitate oxy	gen therapy
otential (Conditions
	Metabolic alkalosis
Incorrect answer Unmarked correct answer	Metabolic arkalosis Metabolic acidosis
unswer Unmarked correct unswer	
unswer Unmarked correct unswer	Metabolic acidosis

DAILY SCHEDULE

Follow our twenty-session study schedule to take control and pass your state board exam with confidence.

PROGRESS TRACKING

You'll have access to our extensive dashboard with reporting tools, comprehensive analytics, with daily reporting to keep you on track. Your progress reports will demonstrate your readiness for NCLEX!

LOCK IN YOUR DISCOUNT

With the NCLEX-V2 you can pass NCLEX in 30-days or less!. Students can delay their start date up to 90-days at the time of check-out to lock in today's special price

Never Study Alone!

The NCLEX V2 has Better Content, Better Questions, and a Better Community of 20,000 nurses supporting & encouraging each other!

Optimize your study experience and deepen your connection as you study the core content virtually with professor Regina M. Callion MSN, RN the #1 NCLEX Instructor on the planet!

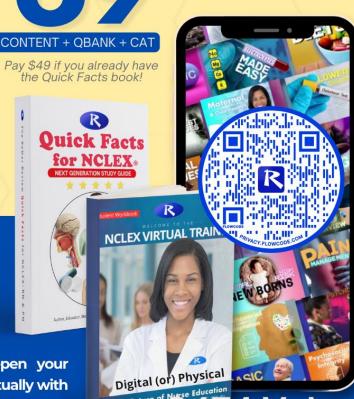
INTERACTIVE LECTURES

Your virtual training platform contains comprehensive content lectures by Instructor Regina Callion MSN, RN. Each video is fun, easy to understand, and engaging; it's like watching NetFlix for NCLEX!



Start as low as

ReMar Nurse
University



Phone, Laptop , Desktop

Don't miss a thing - Mark your Calendar, Adjust your Time Zones, and Set your Clocks!

Each live class with Professor Regina will air from the Eastern Standard Time Zone. There will be (2) sessions every Monday, at 12pm noon and the main session at 8pm EST. There will be (1) session every Wednesday at 9pm.



Primary Study Schedule for ReMar Nurse University

- Monday, June 3rdth 8:00 PM EST
- Monday, June 10th 8:00 PM EST
- Monday, June 17th –8:00 PM EST
- Monday, June 24th –8:00 PM EST
- Monday, July 1st 8:00 PM EST



Pharmacology Review

Weekly Monday Motivation Schedule – 40 min live Mini Review

- Monday, June 3rdth 12:00 PM EST
- Monday, June 10th 12:00 PM EST
- Monday, June 17th –12:00 PM EST
- Monday, June 24th –12:00 PM EST
- Monday, July 1st 12:00 PM EST



Weekly Winning Wednesday Schedule – 40 min live mini review

- Wednesday, June 5th 9:00 PM EST
- Wednesday, June 12th 9:00 PM EST
- Wednesday, June 19th –9:00 PM EST
- Wednesday, June 26th –9:00 PM EST
- Wednesday, July 3rd 9:00 PM EST



Content & Question Review

Pre-EVENT Questions & Answers

+ Will Professor Regina Actually Teaching each class?

Absolutely! Regina MSN, RN will personally be teaching each course with the ReMar Nurses and share the class live to everyone else via Facebook / YouTube (Subscribe to both to receive all notifications)

+ Is this FREE Event all that I Need to Pass NCLEX?

• No! During RNU my goal is to show you exactly how master pharmacology and how to use the NCLEX V2 program to breakdown your content and pass NCLEX in the next 30 days or less!

+ Is the NCLEX-V2 all that I Need to Pass NCLEX?

 Absolutely! The NCLEX-V2 is what ReMar Nurses use to complete their training and pass NCLEX in 30-days or less. It has Professor Regina's full course lectures, study calendar, practice exams, and CAT Tests! During this event you can save up to 50% off of the NCLEX-V2 Review and get your license in 30 days! Shop ReMarNurse.com

+ I'm Still in School, when should I get the NCLEX-V2?

- Most definitely! If you are in nursing school now and graduate in the next 9-months then the NCLEX
 V2 is a great option for you get started now and dominate your final semester, exit exams, and start
 NCLEX. During this event you can save up to 50% off and you can delay your start date up to 90 days!
- If you have more than 9-months before graduation, then we recommend starting today with our nursing school study guide, **Quick Facts for Nursing School book for Pharmacology & Med-Surg**. This study guide will give you the content advantage from day #1! Shop ReMarNurse.com

+ I Have Quick Facts for NCLEX. How Much is the V2 for me?

Awesome! If you already have the Quick Facts for NCLEX book you can remove it from your cart when buying the V2 and save \$20 off of your order and reduce the shipping costs as well. You can get the full program starting as low as \$49 during the sale period ending Friday, July 5th, 2024.

+ I Have the NCLEX-V2. Can I benefit from RNU?

• Yes! ReMar Nurse University is considered an advance study session. This means I take the topics from the NCLEX V2 and develop them to the next level of critical thinking and NCLEX Confidence!

+ How does ReMar Compare to Other NCLEX Programs?

ReMar helps nurses around the globe pass the NCLEX exam with simple and easy-to-understand
content that fits your learning style. We also help students with test anxiety, language barriers, and
repeat-testers even after multiple failed attempts with other resources. We keep it Simple. We keep it
Faith-based. We keep it Community. So how do we compare? I guess you can say "They not like us!"

+ Hey, You Didn't Answer My Question!!!

• I'm sorry I missed your question! Please do me a favor and send me a quick email directly to Support@ReMarReview.com so that I or my team can help answer your specific question before the end of the ReMar Nurse University event.

Can I Really Pass NCLEX in 30-Days?

It's super easy – Just follow the daily study schedule.

This study calendar is designed to make your life easier! Each week do 5 study sessions. One study session each day is best to pace yourself. One study session a day also allows you time to process the information presented. You will need to print the workbook in order for this calendar to be most effective. Remember to keep your study sessions under 3 hours per day. Check off each task once it has been completed. If you follow this calendar the course will be completed in 4 weeks.

STUDY SESSION #1

Watch	Read	Answer
*Optional: Getting Started Tutorials this	Download & Print	Clinical Subject Exam: Pregnancy
is found in the 30-Day Challenge Section	Student Workbook	
Pregnancy Overview		*Optional: 30-Day Challenge Video Session 1
Normal & High-Risk Newborn		Optional. 30-Day Challenge Video Session 1
Infant Heart Defects		
Pediatric Developmental Milestones		

STUDY SESSION #2

Watch	Read	Answer
Age Specific Nursing Care	Review Study Session	Clinical Progress Exam 1
Expected Changes in Aging Diets	#1 Notes	Clinical Subject Exam: Physiological Integrity
		*Optional: 30-Day Challenge Video Session 2

SAMPLE SCHEDULE

*Ontional: 30-Da	v Challenge Video Session 3

STUDY SESSION #4

Watch	Read	Answer	
Medication Administration	Review Study Session	Clinical Progress Exam 3	
Antibiotics	#3 Notes		
		*Optional: 30-Day Challenge Video Session 4	
		Springer 24, Granerige trace economic	

STUDY SESSION #5

Watch	Read	Answer
Intravenous (IV) Therapy	Review Study Session	Clinical Pharmacology Exam 3
Total Parenteral Nutrition	#4 Notes	
Pain Management		*Optional: 30-Day Challenge Video Session 5

STUDY SESSION #6

Watch	Read	Answer
Substance Abuse IV fluids Clinical Math Easy NCLEX Labs	Review Study Session #5 Notes	Clinical Progress Exam 4 *Optional: 30-Day Challenge Video Session 6

ReMar V2

You Can. You Will. You Must Pass NCLEX!

ReMarNurse.com

RNU EVENT CONTENT & TOPIC SCHEDULE

WEEK #1 | MONDAY, JUNE 3RD - 8:00 P.M. EST.

(PAGES 8 - 13)

CLINICAL JUDGMENT SIMULATION #1

Pre-Class Readings: Quick Facts for NCLEX (Next Generation Study Guide)

Topics: Blood Pressure, Cardiac Medication, Myocardial Infarction, Nitroglycerin

NCLEX-V2 PREVIEW - EXPECTED CHANGES IN AGING

WEEK #2 | MONDAY, JUNE 10TH - 8:00 P.M. EST.

(PAGES 14 - 19)

CLINICAL JUDGMENT SIMULATION #2

Pre-Class Readings: Quick Facts for NCLEX (Next Generation Study Guide)

Topics: Acute Renal Failure, Appendicitis, Pancreatitis

NCLEX-V2 PREVIEW - DIETS

WEEK #3 | MONDAY, JUNE 17TH - 8:00 P.M. EST

(PAGES 20 - 24)

CLINICAL JUDGMENT SIMULATION #3

Class Readings: Quick Facts for NCLEX (Next Generation Study Guide) **Topics:** Orthostatic Hypotension, Cardiac Medications, Diuretics, Benzodiazepines, COVID-19

NCLEX-V2 Trainer Preview - Medication Administration

WEEK #4 | MONDAY, JUNE 24TH - 8:00 P.M. EST

(PAGES 25 - 31)

CLINICAL JUDGMENT SIMULATION #4

Class Readings: Quick Facts for NCLEX (Next Generation Study Guide) **Topics:** Analgesics, Anticoagulants, Antibiotics

NCLEX-V2 LECTURES: SUBSTANCE ABUSE

WEEK #5 | MONDAY, JULY 1ST - 8:00 P.M. EST

(PAGES 32 -34)

LIVE NCLEX GAME NIGHT (CASH PRIZES)

Class Readings: Quick Facts for NCLEX (Next Generation Study Guide)

Topics: ALL SUBJECTS

NCLEX-V2 QUESTION & ANSWER SEGMENT WITH PROFESSOR REGINA

UP TO 50% OFF NCLEX PREP SALE ENDS FRIDAY, JULY 5TH, 2024

Week #1 Next Gen Clinical Judgment Activity Regina M. Callion MSN, RN

Admitted with: an episode of
History: Asthma, Anxiety Hypertension, cigarette smoking, obesity
Mental:
Lungs:
Denies:
Voids:

Additional Information to note:

Patient: Myra Keller

Moves:

Write Notes from Handoff Report Below:

2 Episodes of shortness of breath and hypertensive episode noted after lunch. Client stated she was nervous watching the war on the news. Client stated she felt better without any intervention. Client is currently resting quietly in bed after ambulating down the hallway.



ReMar Next Gen NCLEX Form

Medication	Time	06/02/24	06/03/24
Amlodipine 400 mg every 8 hours	22:00	Given - HB	Given - HB
	6:00	Given - YP	Given - YP
	14:00	Given - HB	Given - HB
Carvedilol 50 mg daily	12:00	Given -TG	Given -TG
Lisinopril tab once a day	8:00	Given -TG	Given -TG
Sodium bicarbonate 50 mEq rapid IV for 1 minute, X1 STAT	12: 00	Given -TG	Given -TG
Calcium chloride 1000 mg IV for 10 minutes. X1 STAT	12: 00	Given- HB	Given -HB

Nursing	Flow Sheets Provider	Labs & Diagnostics	MAR Collaborative C	are Other
Metabolic Panel	Normal Values	05/27/2023	05/28/2023	05/29/23
Sodium	136-145 mEq/L	130	128	129
Chloride	98-106 mEq/L	100	100	99
Potassium	3.5-5 mEq/L	6.0	6.2	6.1
Calcium	8.5-10.5 mg/dL	8.7	8.7	8.8
Magnesium	1.5-2.4 mEq/L	1.8	1.8	1.8
Phosphorus	3-4.5 mg/dL	3.2	3.2	3.5
BUN	8-20 mg/dL	11	11	13
Creatinine	0.7-1.3 mg/dL	1.1	1.1	1.0
Glucose	70-100 mg/dL	70	71	70
Alkaline phosphatase	44 and 147 U/L	204	205	245

Vital Signs	Blood Pressure (mmHg)	Heart Rate (beats/minute)	Respiratory Rate (breaths/minute)	Temperature	Pulse Oximetry
06/03/2024; 4 PM	145/90	120	22	96 F	92%
06/03/2024; 5 PM	152/97	118	26	94.7 F	92%
06/03/2024; 6 PM	160/95	122	30	98. F	93%
06/03/2024; 7 PM	165/99	126	26	96 F	92%

1.	What is the priorit	ty when first evalu	uating a patient at t	the start of the shift?	
2.	SAFETY: From the	MAR list	patient needs tha	at must be communica	ited to the physician:
3.	CLINICAL JUDGME	ENT: What are 3 _	proced	dures the nurse should	anticipate?
4.	SAFETY: Identify 3	possible causes o	of	in the cli	ient.
5.	SAFETY: Which me	edication is most I	likely causing		and why?
6.	SAFETY: What info medication to M.		g from the MAR be	fore the nurse can pro	perly administer
7.	SAFETY: What con	ncerns are present	t about the new me	edications ordered on t	the MAR:
8.	CRITICAL THINKIN require pain medi		nistration of nitrog	lycerin which expected	l side effect would
New	Medication Order			-half inch ointment twi ıla to keep O2 Saturatio	
9. CLIN the firs		hich of the followi	ing poses the great	est risk when initiating	oxygen therapy for
1. 2. 3. 4.	Hypoxemia Oxygen toxicity Respiratory alkalo Hypercapnia	sis			
	NICAL JUDGMENT: Ne one option.	Which of the follow	wing is sodium bica	rbonate the appropria	te treatment for?
	etabolic alkalosis etabolic acidosis				
11. Wh	ere you a safe nurse	e today?			

Expected Changes During Aging Regina Callion MSN, RN

System	Changes Tested on NCLEX
1.	Decreased output
	Increase:
	Peripheral circulation:
2.	Increased
	Decreased
	Is it normal to wear oxygen?
3.	Decline in the ability to:
4. Reproductive System	Women decrease:
	Men decrease:
	Sexual Changes
	Women:
	Men:

5.	Decreased range
	Decreased
	Decreased in overall
	Bone loss
6.	Kidneys-
	Bladder-
	Diauuci-
	Dehydration is a common issue
	Is urinary incontinence normal?
	Kegel exercises-
	mouth
	Constipation
Gastrointestinal	Delayed gastric emptying
System	ability decreases
	Is tooth loss a normal part of aging?

	Decreased activity in <u>CNS</u> & <u>PNS</u>
	Decrease in time and reflex times.
	Mental function should
Nervous System	·
	If intelligence decreases a <u>disease process</u> is present.
	in theof immune system.
	inimune system.
Immune System	Engourage
	Encourage:
	Decrease secretion of:
	Decrease in:
Endocrine System	Will a decreased insulin production make the blood
	sugar increased or decreased?
Sensory System	Loss of:

Week #2 Next-Gen Clinical Judgment Activity Regina M. Callion MSN, RN

Patient: Frank Jackson			
Write Notes from Handoff Report Below	:		
Frank Jackson 77-year-old ma	nn		
History: of congestive heart fail	lure, anxiety,	and alcohol abuse.	
Presents to the Emergency room	reporting		
The client stated the pain started started".	after his mo	rning drink to "get the da	ay
Client is holding his			
Reports pain: Reports nausea:			
Vital signs: B/P-140/86, HR	Temp	Resp -18,	

Additional Information to note:

Nursir	Flow Sheets	Provider	Labs & Diagnostics	MAR	Collaborative Care	Other
	Name: Frank Jackso Health Care Provider Code Status: DNR		, MD		234566 Pollen, cotton, latex	

1. CRITICAL THINKING: During the abdominal assessment the nurse notices a distended abdomen.

1.	List _	for "symmetrical" distention.	1.
			2.
2.	List _	for "asymmetrical" abdominal distention.	1.
			2.

- 2. SAFETY: The nurse notes that the bladder is distended, which interventions are anticipated?
- 3. CLINICAL JUDGMENT: Identify which symptoms are present in the following conditions.

Clinical Signs	Appendicitis	Pancreatitis	Urinary Tract Infection
Nausea & Vomiting			
Right Lower Quadrant Pain			
Abdominal			

- 4. CRITICAL THINKING: Identify 2 diagnostic exams needed to determine a diagnosis of this client:
- 5. CLINICAL JUDGMENT: Which diet is most appropriate for this client?
- 6. SAFETY: Which of the following require immediate action? Select all that apply.
 - 1. Client is ambulating down the hall.
 - Client states they feel relief and are pain free.The client refuses a heating pad.

 - 4. The licensed practical nurse prepares to palpate the abdomen for assessment.
 - 5. Client reports a need for new bedding for a vomiting episode.

7.	CLINICAL	JUDGMENT:	Identify if the	treatment is ap	propriate for a	DNR order?

Treatments	Yes	No
Heimlich maneuver if choking		
Supplemental oxygen		
Dialysis		
EKG		
IV fluids for hydration		
Antiemetics		
Morphine		

8. SAFETY: The physician has ordered piperacillin and tazobactam	, the client states he is not	aware of a previous allergy	y. Should
the nurse administer the medication?			

- 9. CLINICAL JUDGMENT: Which pain medication can increase complications and delay the treatment of appendicitis?
 - 1. Ciprofloxacin
 - 2. Ibuprofen
 - 3. Acetaminophen
 - 4. Morphine
- 10. CRITICAL THINKING: The client reports nausea at the time oral medication is due, which action should the nurse take?
- 11. SAFETY: The nurse suspects the client of dehydration, which laboratory value would confirm this medical condition?
 - 1. Elevated BUN
 - 2. Elevated albumin
 - 3. Elevated platelet count
 - 4. Elevated bicarbonate levels
- 12. SAFETY: The client would report right lower abdominal pain if which side of the abdomen was palpated by the physician?
- 13. Where you a safe nurse today?

NCLEX-V2 Lecture Preview - Diets Regina M. Callion MSN, RN

Indication	Food
1.	
Or	
2.	
1.	Water, juices, see through- broth,
1.	
1.	
2.	How should the foods be placed when feeding?
	1. Or 2. 1. 1. 1.

Mechanical Soft	1.	Any food that can be easily broken down
	1.	Cannot nave:
		Avoid CAP
Protein	1.	Avoid:
		Why should renal clients avoid protein?
	1.	
Restricted	82 grams or 1 gram heart healthy	
	1.	

	1.	Avoid Purine
High Protein	1.	
	2.	
	1.	
		Meal percentages
		<u>Meur percentages</u>
Celiac	1.	Avoid BROW
		Bread?
		Spaghetti? Pie?
		Cookies? Waffles?
		Pancakes?

Week #3 Next-Gen Clinical Judgment Activity Regina M. Callion MSN, RN

Patient: John Daniels
Write Notes from Handoff Report Below:
55 year old male client presents with transient loss of consciousness. He said he feels dizzy and is "always thirsty".
History:
Alert and oriented times 4 No respiratory distress noted
Denies dizziness, nausea and vomiting at this time. 1 episode of diarrhea
VSS noted in chart.
EKG:
Additional Information to note:

, i	Jame: John Daniels Jealth Care Provider: Adam Al	Labs & Diagnost	MRN: 2248	laborative Care	Other	
Medication		Time	06/16/24		06/17/24	
Exenatide 2mg	SC BID	06:00	Given - AB		Given - LR	
		18:00	Given –MC		Given - QB	
Furosemide IV I	BID	06:00	Given -TG		Given-BH	
Verapamil 80 m	σ PO TID	18:00 8:00	Given- RC Given -TG		Given-PT Given -BH	
Verapailiii 80 iii	g r O IID	8.00	diveri-10		Given -Bii	
Alprazolam 0.25	5 mg q 6hr PRN	04:35	Given -TG		Given -BH	
		08: 00	Given- TG			
0.9 NaCL 1000 r	nl x1 bolus	10:00 18: 00	Given- TG		Given -BH	
Nursing F	Tow Sheets Provider	Labs & Diagno		Collaborative Care	Other	
Me	tabolic Panel	Norr	nal Values	Jun 1	.7, 2024	
	Sodium	136-145 mEq/L 140 mEq/		mEq/L		
	Chloride	98-1	8-106 mEq/L 100 mE		mEq/L	
	Potassium	3.5	3.5-5 mEq/L		mEq/L	
Calcium 9-10.5 mg/dL 9.2 r		mg/dL				
١	Magnesium	1.5-	1.5-2.4 mEq/L		2.0 mEq/L	
F	Phosphorus	3-4.5 mg/dL		3.5 mg/dL		
	BUN	8-20 mg/dL		18 mg/dL		
	Creatinine	0.7-	1.3 mg/dL	1.0	mg/dL	
	Glucose	70-1	.00 mg/dL	325	mg/dL	
Vital Signs	Blood Pressure (mmHg)	Heart Rate (beats/min	Respiratory Rate (breaths/minute)	Temp	Pulse Oximetry	
une 17 at 17:30	Laying flat 90/60 Sitting up 85/55 Standing up 70/40	60 72 110	18	98.5°F (36.9°C)	96% on room a	
June 17 at 18:00	75/50	99	20	98.5°F (36.9°C)	95% on room a	
June 17 at 18:30		60	20	98.5°F (36.9°C)	98% on room a	

1. CLINICAL JUDGMENT: Based on the ReMAR medication list what are some possible diagnoses of J. Daniels
2. SAFETY: Which intervention is the priority in to manage the client's current condition?
 Elevating the client's legs above the heart level. Teaching the client about his medications. Encouraging the client to drink fluids to promote blood flow. Instructing the client to change positions slowly.
3. CRITICAL THINKING: Which medication is most to J. Daniels, how do you know?
4. SAFETY: J. Daniels reports dizziness after his last medication pass what blood pressure would you expect at this time
5. CLINICAL JUDGMENT: A nurse is preparing to administer alprazolam to a patient. What is the priority action for the nurse before administering this medication?
 Ensuring the patient's allergies are documented Assessing the patient's blood pressure Assessing the patient's respiratory rate Assessing the patient's medication history for potential interactions
6. SAFETY: Which medications should the nurse anticipate the doctor to order?
7. SAFETY: According to the ReMar medication list, which nurse needs to be written up for disciplinary actions?
8. SAFETY: Identify with the medication list? 1. 2. 3. 4. 5. 6. 7.
9. CLINICAL JUDGEMENT: J. Daniels's vomit is seen for the first time. It is black with a lumpy texture. What should the nurse expect a possible cause to be?
10. CRITICAL THINKING: J. Daniels reports extremity pain after a positive <u>Covid-19 test</u> . Which complication should the nurse expect?
11. SAFETY: When should the nurse expect blood pressure to be the lowest?

or No

12. CLINICAL JUDGMENT: Which actions are appropriate for the nurse's aide to take?

1. Keep the room at a warm temperature for comfort.

4. Encourage the client to drink 500 ml of water as a bolus.

2. Tell the client to sit down when urinating. 3. Encourage the client to add sodium to the diet.

Medication Administration

Regina M. Callion MSN, RN

Before you give medications check the rights there are many.

1. Patient	2.	Drug	3. Dose	4. Route
5. Time		ocumentation.	7. Allergies & N	
Verify			E	Before Administration
	PO - Do not cr	rush medications th	at end in:	
PO	EC			
PO means by mouth	ER			
	EX			
NPO nothing by mouth	SR			
	Liquid -			
	Ad U lt-			
	Chil d -			
Ear	Medications sl	hould be		
	How long show	uld the nurse wait b	pefore administration dr	ops?
	Alternative to	or n	nedication administratio	n.
	Use a	based lubric	cant	
Rectal	3 types of oral	enemas		
	2.			
	3. Kayexalate	(polystyrene sulfor	nate)	

	Avoid the
	Tell client to look up or down?
Eye	Place medication in lower conjunctiva sac
	If eye drops and eye ointments are both prescribed which should be given first?
	Check initial placement with
	Assess for
Gastric Tube	Delayed gastric emptying.
	Greater than 500 hold medication. Medications should be given via
	Do not mix medications give them separately.
	Maximum medication in adult muscle:
	Maximum medication in child:
Intramuscular (IM)	*Do not aspirate for vaccines.
	Do not give IM injections:
	Inject at degree angle.
	Applied directly to body surfaces:
	Is Shampoo a topical medication?
Topical	Wash skin daily

Week #4 Next-Gen Clinical Judgment Activity Regina M. Callion MSN, RN

Patient: Lynn Vitros		
Write Notes from Handoff Report Below:		

Additional Information to note:



ReMar Next Gen NCLEX Form

Nurse Note	85-year-old female admitted with right fractured hip. Patient had ORIF of the right hip with general anesthesia. 500 mL blood loss during surgery. Mucous membranes pink and dry. Dressing clean dry and intact. Client is 89% on 2 L NC- Jessica West, RN
Medication Orders	June 19
Enoxaparin sodium 400 mg sq q 12 hr.	
Cefazolin 1 g every 6 hr. x 4 doses	
Morphine 4 mg IM q 4 hr. PRN for pain	20:00 HC
Captopril 25 mg PO daily	20:00 HC
Oxygen 2 L via NC continuous	
Furosemide 40 mg IV twice daily	
Metabolic Panel	Normal Values
Error LOADING	Error LOADING

Vital Signs	Blood Pressure (mmHg)	Heart Rate (beats/min	Respiratory Rate	Temp
June 19 05:50	130/70	78	18	97.6
June 19 12:00	128/69	75	20	98

 CLINICAL JUDGMENT: Identified 	Delirium or Dementia based	on the clinical features:
---	----------------------------	---------------------------

1. Impaired sensory perception	
2. Progressive course	
3. Dehydration as a cause	
4. Acute onset	
5. Impaired attention span	
6. AIDS as a cause	
7. Liver failure as a cause	

2. CRITICAL THINKING: What is the benefit of the following diagnostic test to investigate the client's condition?

Serum glucose	
Electrolytes	
BUN & Creatinine	
CBC	

3. SAFETY: Identify the indication of the medications prescribed:

Medication	Indications
Enoxaparin sodium	
Cefazolin	
Metoprolol	
Furosemide	

4. CRITICAL THINKING: Which 2 medications listed are most likely to cause delirium?

5. SAFETY: Calculate the dose for the order: Morphine 6 mg IM

Available: Morphine 2mg/ mL

Answer:

1. Apply pulse or	ζ						
2. Stay 1 on 1 wi							
-	of patient's condition						
4. Take specimen							
5. Monitor hydra	•						
6. Apply oxygen							
7. CRITICAL T	ΓΗΙΝΚΙΝG: What α	other nursing in	nterventions	can improv	e this clie	nt's oxygei	n saturation?
 Risk of Risk of Risk of 	UDGMENT: What self harm due to age wandering and get falls due to impaire dehydration due to	gitation. ting lost. ed cognition.		n for the cl	ient?		
	HINKING: The clicon which 3 factors a		ssure is low	er than norn	nal. Based	l off the Re	MAR and handof
			ssure is low	er than norn	nal. Based	l off the Re	MAR and handof
eport informati	on which 3 factors a		ssure is low	er than norn	nal. Based	l off the Re	MAR and handof
eport informati	on which 3 factors a	are causing this	ssure is low s? 3.				
report informati 1. 10. CLINICAL hypothesis.	on which 3 factors a 2.	are causing this	ssure is low s? 3.				
report informati 1. 10. CLINICAL hypothesis.	on which 3 factors a 2. JUDGMENT: Shou	are causing this	ssure is low s? 3.				

NCLEX-V2 Lecture | Substance Abuse Regina M. Callion MSN, RN

Substance Abuse	Continued use of	a substance
Substance abuse can be		is considered a
Substances that are abused are:		
1.		
2.		
3.		
4.		
5.		
6.		
Clients	are at risk for: Suicide and Over	rdose
A. Alcoholism-		
Signs:		
	Most alcoholics are in:	
	Withdrawal symptoms:	

Substance Abuse

Regina M. Callion MSN, RN

Medical Emergency	

-	- 1			4		
1)	Δli	ırııı	m	tro	ma	rs:

1.	Phy	sical	sha	king
••)	Die	DIIC	

- 2.
- 3.
- 4.
- 5.

2 Other Symptoms to Know

2.	1.		
	,		

Medical Emergency

Delirium tremors Treatment:

Medicate with anti-anxiety medication such as:

- 1.
- 2.

or

Alcohol deterrent medications such as:

1.

Teaching point:	Clients must avoid:

Substance Abuse

Regina M. Callion MSN, RN

NCLEX Pro Tip:

Medications that contain alcohol:	
Other therapy options: Non-judgmental attitude, Support groups A	alcoholics anonymous
There is no	
Clients can be placed in a	·
B. Opioid Addiction	
Examples:	
Doom Assissanti	
Room Assignment:	
Withdrawal Symptoms:	
is a legal parcotic that can be used as	



WEEK #5 - NCLEX GAME NIGHT TOPICS				
CLINICAL JUDGMENT	QUICK FACTS FOR NCLEX			
• PRIORITIZATION	• DELEGATION			
• SAFETY	SUBSTANCE ABUSE			
• NORMAL & HIGH RISK NEWBORN	• DIET			
EXPECTED CHANGES IN AGING	PHARMACOLOGY			

- 1. WHERE TO PLAY NCLEX Game Night with Professor Regina will stream live via the ReMar Nurse YouTube channel & Facebook page on Monday, July 1st, 2024, starting at 8:00 PM EST.
- 2. **THINGS YOU NEED TO PLAY** You will need (2) devices to play the game. You will use one device to watch the live broadcast and a second device to answer the questions.
- 3. **HOW TO PLAY** Use your second device (phone) to go to <u>www.Kahoot.it</u> and enter the game pin provided for you at the beginning of the game. This is needed to answer questions. Note: (You can also open two separate tabs on your laptop or PC if you don't have two devices.)
- 3. **ENTER GAME PIN** Prof. Regina will give students the game pin by email or text at the beginning of class. Enter the code at Kahoot.it or scan the QR code on screen to join in before the game begins.
- 4. CASH PRIZES The quicker you respond, the more points you will earn. So be ready to win up to \$200, \$100, or \$50 for 1^{st} , 2^{nd} , and 3^{rd} place winners! You must have either CashApp or PayPal to claim your prize winnings. Previous 1st place winners cannot win a second time.

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Even if you are feeling a bit anxious, I promise you it is normal! This test is important, and I know you feel pressure but, I want to see your testimonial video on the other side of NCLEX where you're smiling or shedding tears of joy as soon as you see your name and those big letters (PN or RN)! You deserve that moment and know that your success will not only bless you but it's going to bless everyone around you as well.

It's time to get into the NCLEX-V2 and finish the complete content review that you've started!

At this point you can:

- Upgrade your NCLEX-V2 Free Trial
- Continue with the Daily NCLEX Study Calendar
- Complete all of your NCLEX V2 Videos
- Taken the accountability quizzes after the lectures
- Completely fill out your Student Workbook
- Memorize the Quick Facts for NCLEX book
- Dominate the Question Bank
- Take the Computer Adaptive Test



If you can consistently do these things to build your foundation, you can pass NCLEX in the next 30-days or less! Even if you need more time to study (sometimes life be life'n) it's ok! You can select a study option that's best for you at either 1-, 3-, or 6-months study access.

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Sincerely with Love,

Your Favorite NCLEX Instructor, **Professor Regina M. Callion MSN, RN**

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