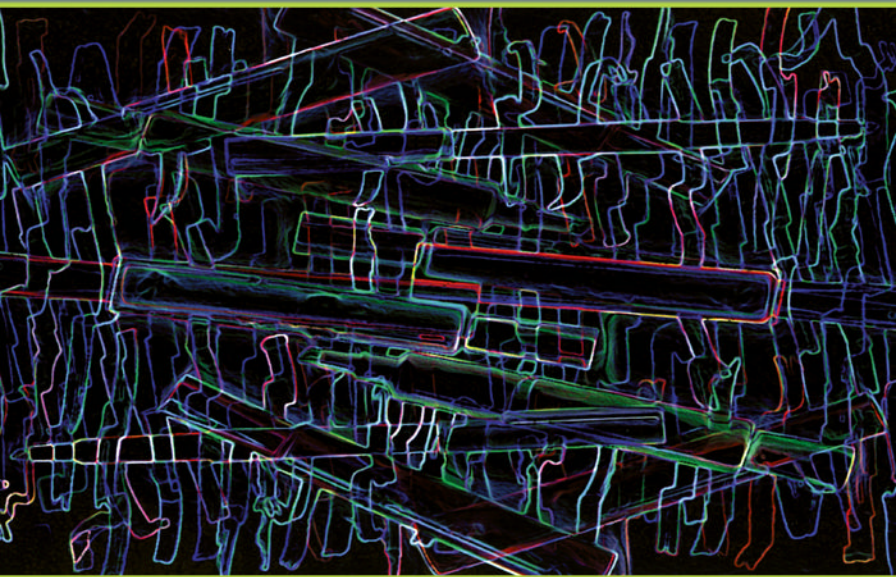


Davis's
NCLEX-RN REVIEW

third edition



PATRICIA GAUNTLETT BEARE

Davis's
NCLEX-RN REVIEW

Patricia Gauntlett Beare, RN, PhD

Professor

Louisiana State University Medical Center

School of Nursing

New Orleans, Louisiana

Davis's
NCLEX-RN REVIEW

THIRD EDITION



F. A. Davis Company • Philadelphia

F. A. Davis Company
1915 Arch Street
Philadelphia, PA 19103

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Printed in the United States of America

Last digit indicates print number: 10 9 8 7 6 5 4 3 2 1

Acquisitions Editor: Alan Sorkowitz

Developmental Editor: Ann Houska

Production Editor: Elena Coler

Designer: William T. Donnelley

Cover Designer: Louis J. Forgione

Cover Photograph: Doug Rickards

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Library of Congress Cataloging in Publication Data

Davis's NCLEX-RN review/[edited by] Patricia Gauntlett Beare.—3rd ed.

p.;cm

Includes bibliographical references and index.

ISBN 0-8036-0577-3 (pbk.:alk. paper)

1. Nursing—Examinations, questions, etc. 2. Nursing—Outlines, syllabi, etc.

[DNLM: 1. Nursing—Examination Questions. 2. Nursing—Outlines. 3. Licensure, Nursing—Examination Questions. 4. Licensure, Nursing—Outlines. WY 18.2 D265 2001] I. Title: NCLEX-RN review. II. Beare, Patricia Gauntlett.

RT55.D38 2001

610.73'076—dc21

00-031473

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FOREWORD TO THE CANDIDATE FOR REGISTERED NURSE LICENSURE

As you begin to study for the National Council Licensing Examination (NCLEX), remember that *you are a winner*. You have succeeded in learning the content and skills necessary for you to graduate from your nursing program. Your teachers believe you will practice safe, competent nursing. Now you must review the essential content to successfully pass the examination that will enable you to practice as a registered nurse.

Experts in nursing have identified the essentials for nursing practice and presented them to you in outline form in this text. Practice tests have been formulated by nurse/teachers from diploma, associate degree, baccalaureate degree, and nursing

service programs to help you apply your nursing knowledge through simulated clinical practice test questions.

All that remains is for you to set up a study schedule to thoroughly review this content and take the practice tests. The practice tests will provide rationale and answers to help you “think through” the underlying principles behind the right answer. Your study skills should serve as the basis for your review. As you review, you will develop the confidence in your nursing skills and decrease your fears of not passing this examination.

Remember, you are a winner! You will pass this test!

Patricia Gauntlett Beare, RN, PhD

PREFACE

The purpose of this book is to provide the candidate for registered nurse licensure with a concise review of the information needed to pass the NCLEX-RN licensing exam and with the opportunity to apply this information in answering test questions that simulate clinical situations. Since the publication of the first edition, the NCLEX-RN has been converted to an electronic exam employing computer-adaptive testing (CAT). To help the candidate become familiar and comfortable with this new testing scheme, this third edition includes a computer practice disk with more than 652 questions not found in the book. This disk helps the student simulate the NCLEX-RN CAT testing environment, and its scoresheet functions provide valuable feedback that allows the student to target study to specific subject areas.

The book's first unit explains the NCLEX-RN test process, offers tips on how to study for the exam, and provides additional knowledge and application of content through critical thinking when answering test questions. The five chapters in Unit II address, respectively, maternity, pediatric, medical-surgical, gerontological, and psychiatric nursing. The content reviews in these chapters are written by noted experts in each subject area, several of whom are the authors of major textbooks in the field. In addition to content reviews, each of these chapters also contains test questions in the subject area. Unit III includes a content review and test on nursing leadership and management, subjects getting increased coverage on the NCLEX, as well as tests on growth and development, nutrition, and cal-

culuation of dosages. Unit IV consists of 11 integrated practice tests that, like the NCLEX itself, combine all the subject areas into each test. These tests are written by nurse clinicians and educators who have previously written test questions for the NCLEX and who represent schools or hospitals throughout the United States. Finally, two appendices provide a list of abbreviations commonly used in nursing practice and contact information for state boards of nursing. With 1731 test questions in the book, and another 652 on the enclosed practice disk, the third edition offers more than 2300 test questions in addition to comprehensive, outline-style content reviews of the core subject areas in nursing. The addition of a management chapter and test questions to the text as well as to the disk helps students apply this new content to the clinical area.

All test questions, in both the book and the disk, are coded according to the NCLEX test plan for the subject area and client needs category that they address. Rationales are provided for both correct and incorrect answer choices to help the student learn not just the right answer but *why* it is the right answer.

The content presented in this book will enable the NCLEX-RN candidate to review essential nursing knowledge and apply this knowledge to test questions in the examination.

Through careful study, candidates will no longer fear the unknown as they review and master the knowledge, skills, and abilities to be successful in passing the examination and embarking on their careers as registered nurses.

ACKNOWLEDGMENTS

Many people, too numerous to mention, have helped make this third edition a reality.

To Alan Sorkowitz, Nursing Editor at F. A. Davis, who supervised the production of the text, special thanks for his patience.

To the many special contributors, who shared their expertise and generated many new ideas for student preparation for the NCLEX-RN licensure examination.

To Sam Rondinelli, Production Manager, who adroitly guided this book through the production process, special thanks and gratitude.

To the reviewers who, through their constructive critiques, greatly enhanced the quality of this unique NCLEX-RN review book.

A very special acknowledgment to all our students, personal friends, and colleagues for their support.

CONTRIBUTORS

Carol G. Allen, RN, MSN

Associate Professor and Associate Director for
Undergraduate Studies in Nursing
Northwestern State University of Louisiana
Shreveport, Louisiana

Ola Burns Allen, RNC, DNSc

Professor and Associate Dean for Academic Affairs
University of Mississippi Medical Center
School of Nursing
Jackson, Mississippi

Claudia P. Barone, RN, MSN

Professor and Associate Dean for Academic Affairs
Instructor of Adult Health Nursing
University of Arkansas for Medical Sciences
Little Rock, Arkansas

Linda Bass, RN, PhD

Assistant Professor
Texas Tech University Health Sciences Center
Lubbock, Texas

Cecily Betz, PhD, RN

University of California–Los Angeles
Los Angeles, California

Billie E. Bitowski, RN, MSN

Associate Professor
Northwestern State University of Louisiana
Shreveport, Louisiana

Carolyn Elston Bond, RN, MSN

Assistant Professor
Northwestern State University of Louisiana
Shreveport, Louisiana

Mollie K. Bradley, RN, EdD

Assistant Professor
University of South Alabama
College of Nursing
Mobile, Alabama

Linda Calhoun, RN, MNSc, NNP

Clinical Instructor
University of Arkansas for Medical Sciences
Little Rock, Arkansas

Barbara Camune, RN, MSN

University of Texas Medical Branch
Galveston, Texas

Lizabeth L. Carlson, MSN, RNC, DNSc

Assistant Professor
Delta State College of Nursing
Cleveland, Mississippi

Robin Webb Corbett, RNC, MSN

Clinical Assistant Professor
Department of Parent Child Nursing
East Carolina University
School of Nursing
Greenville, North Carolina

Sharon Pierce Corbin, RN, MS

Professor
Harford Community College
New Freedom, Pennsylvania

Sharon Decker, RN, CS, MSN, CCRN

Associate Professor of Clinical Nursing
Director of Clinical Simulation
Texas Tech University Health Sciences Center
Lubbock, Texas

Lou Everett, RN, EdD

Associate Professor
Department of Community and Mental Health
Nursing and Nursing Services Administration
East Carolina University
Greenville, North Carolina

Carol Farley-Toombs, MS, RN, CS

University of Rochester
College of Nursing
Rochester, New York

Nazie Sue L. Fontenot, MSN, CNS
Assistant Professor
McNeese State University
College of Nursing
Lake Charles, Louisiana

Diane B. Graham, RN, MSN
Associate Director of Non-Traditional Programs in Nursing
Northwestern State University of Louisiana
Shreveport, Louisiana

Diane B. Hamilton, PhD, RN
Professor
Western Michigan University
School of Nursing
Kalamazoo, Michigan

Marie L. Hart, RNC, MSN, PhD
Instructor
Texas Tech University Health Sciences Center
Lubbock, Texas

Loretta C. Henry, MS, BS
Assistant Professor
McNeese State University
College of Nursing
Lake Charles, Louisiana

Ellen Holmgren, RN, MSN
Joliet Junior College—Nursing Education
Joliet, Illinois

Judith M. Kachel, EdD, RN
Nursing Instructor
Joliet Junior College—Nursing Education
Joliet, Illinois

Eileen Keefe, RN, MSN, C
Louisiana State University
New Orleans, Louisiana

Colleen Kestel-Branchaw, RN, MSN
Joliet Junior College—Nursing Education
Joliet, Illinois

Christine Krol, RN, MSN
Nursing Instructor
Joliet Junior College—Nursing Education
Joliet, Illinois

Dottie W. Kubricht, RN, MN
Southeastern Louisiana University
Hammond, Louisiana

JoAnn Langford, RN, MSN
Delgado Community College
Charity School of Nursing
New Orleans, Louisiana

Pauline S. Lea, RN, MN, CS
Baton Rouge General Medical Center
School of Nursing
Baton Rouge, Louisiana

Bonnie Juvé Meeker, DNS, RN
Southeastern Louisiana University
Hammond, Louisiana

Mary Alice Middlebrooks, RN, MSN
Assistant Professor in Nursing
Northwestern State University of Louisiana
Shreveport, Louisiana

Tommie L. Norris, RN, DNSc
Assistant Professor
University of Memphis
Memphis, Tennessee

Benni Ogden, RN, MSE
Assistant Professor
University of Arkansas for Medical Sciences
Little Rock, Arkansas

Sally B. Olds, MSN, RNC
Associate Professor
Chair, Department of Holistic Nursing
Beth El College of Nursing
Colorado Springs, Colorado

Louise Plaisance, RN, C, DNS
Our Lady of the Lake
Baton Rouge, Louisiana

Demetrius J. Porsche, RN, CCRN, DNS
Associate Professor
LSUMC School of Nursing
New Orleans, Louisiana

Susan K. Pryor, RN, MN, DNS
Faculty
Southeastern Louisiana University
Hammond, Louisiana

Helen Ptak, PhD, RN
Professor
University of Mississippi at Hattiesburg
Hattiesburg, Mississippi

Donita T. Qualey, RN, MN
Delgado Community College
Charity School of Nursing
New Orleans, Louisiana

Lona Ratcliffe, RN, MN
Associate Professor
Department of Parent Child Nursing
East Carolina University
Greenville, North Carolina

Gloria Rauch, RN, MSN
Professor
University of Arkansas for Medical Sciences
Little Rock, Arkansas

Susan Ray, MSN, DNSc
Louisiana State University
School of Nursing
New Orleans, Louisiana

M. Evonne Robinson, RN, MN
Assistant Professor
Department of Nursing
Nicholls State University
Thibodaux, Louisiana

Virginia Kay Rogers, RN, C, MS, MED
Doctoral Student
LSUMC
New Orleans, Louisiana

Jacqueline Schexnayder, RN, MN
Delgado Community College
Charity School of Nursing
New Orleans, Louisiana

Kara Schmitt, PhD
Director of Testing Services
Department of Licensing and Regulation
Lansing, Michigan

Sandra S. Swick, RNC, MSN
Assistant Professor of Nursing
Texas Tech University Health Sciences Center
Lubbock, Texas

Lee Ann Thomas, RN, MN
Baton Rouge General Medical Center
School of Nursing
Baton Rouge, Louisiana

Patricia E. Thompson, EdD, RN
Associate Professor
Parent-Child Department Chair
College of Nursing
University of Arkansas for Medical Sciences
Little Rock, Arkansas

Consultants

Carolyn Mosley, RN, PhD
Associate Professor
Department Chair
Louisiana State University
New Orleans, Louisiana

Patricia E. Thompson, EdD, RN
Associate Professor
Interim Associate Dean for Service
University of Arkansas for Medical Sciences
Little Rock, Arkansas

Golden Tradewell, MSN, RN
Associate Professor
McNeese State University
College of Nursing
Lake Charles, Louisiana

Janetta Tradup, RN, CS, MSN
Associate Professor of Nursing
Texas Tech University Health Sciences Center
Lubbock, Texas

Doris Tucker, RN, EdD
Instructor
University of Arkansas for Medical Sciences
Little Rock, Arkansas

Kathy A. Viator, RN, MSN, DNS
Southeastern Louisiana University
University Station Box 781
Hammond, Louisiana

Ann T. Warner, MS, BSN
Instructor
McNeese State University
College of Nursing
Lake Charles, Louisiana

Lucille F. Whaley, EdD, RN
Specialist, Parent Child Nursing
Sunnyvale, California

Susan Williams, RN, DNS
Assistant Professor
East Carolina University
Greenville, North Carolina

Emily Zabrocki, RN, PhD
Faculty
Joliet Junior Collete–Nursing Education
Joliet, Illinois

Golden Tradewell, MSN, RN
Associate Professor
McNeese State University
College of Nursing
Lake Charles, Louisiana

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UNIT I

What You Need to Know About the NCLEX-RN

CHAPTER 1

Development, Administration, and Scoring of the NCLEX-RN™*

Kara Schmitt, PhD

The National Council Licensure Examination for Registered Nurses (NCLEX-RN), developed by the National Council of State Boards of Nursing (NCSBN), is designed to measure a licensing candidate's knowledge of the nursing process and client health needs considered necessary for public protection. Using the test plan, each examination reflects the knowledge, skills, and abilities essential to meet the needs of clients with commonly occurring health problems. The examination is used to determine whether a candidate can appropriately react and respond to various problems commonly associated with a registered nurse's (RN's) responsibilities in typical clinical settings. The examination content is structured in such a manner that jurisdictional Boards of Nursing can be reasonably assured that individuals who pass the examination are minimally competent to practice entry-level RN nursing and to protect the health, safety, and welfare of its citizens.

Applying to Take the NCLEX-RN

In April 1994, RN licensure candidates began taking the NCLEX-RN on computers at many conveniently located sites throughout the United States and its territories. In order to sit for the examination, you, as an RN candidate, need to submit certain documentation and fees to both the Board of Nursing in the jurisdiction in which you wish to be licensed and to The Chauncey Group International, Ltd. (Chauncey). Generally, two separate submissions of documents and fees are required, although some jurisdictions may ask that both the licensure application and fee and the examination application and fee be sent directly to them.

The Board of Nursing in which you wish to be licensed requires a licensure application along with verification of educa-

tion such as a certificate of completion or an official transcript from an approved school of nursing. Depending on the jurisdiction, you may also have to submit a licensure fee, application fee, and/or temporary license fee. All relevant documents and fees must be submitted to the appropriate Board office before you will be allowed to take the examination.

Because each jurisdiction has different requirements, it is essential that you be thoroughly familiar with the specifications associated with the jurisdiction in which you wish to be licensed. In most instances, faculty from the nursing program that you attended can instruct you as to the necessary forms and fees to submit. Typically, your program also has the necessary licensure and examination applications for you to complete. If your program does not furnish you with these instructions and forms, or if you wish to be licensed in a jurisdiction other than the one in which you received your education, it is your responsibility to contact the specific Board office for these forms and/or information, including the NCLEX™ Candidate Bulletin. Appendix B includes a listing of all Boards, their addresses, and phone numbers. It is essential that you complete the licensure application accurately, enclose the correct fee, and ensure that all additional documentation is forwarded to the Board as soon as possible. Remember, you will not be allowed to take the examination until the appropriate Board has determined that you are eligible.

Candidates with a physical disability should contact the licensing jurisdiction as early as possible to arrange for special accommodations. Information will be provided as to how to request the required accommodations as well as what type of documentation is necessary to initiate the process.

Foreign-educated candidates should recognize that additional documentation of education and proof of English-language competency may be required when submitting the licensure application. For this reason, if you were educated outside of the United States, you should contact the appropriate Board to ascertain what specific documentation and/or

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examination results are required. In addition, you may want to contact the Commission on Graduates of Foreign Nursing Schools (CGFNS) for various requirements that you may have to fulfill. The address and phone number for CGFNS is:

Commission on Graduates of Foreign Nursing Schools
3624 Market Street
Philadelphia, PA 19104
(215) 349-8767

In addition to applying for a license, you need to apply to sit for the examination either through Chauncey or through the jurisdiction in which you wish to be licensed. Examination applications can be obtained through your school of nursing or the desired licensing jurisdiction. The examination application, along with the fee of \$88, may be submitted to Chauncey at any time, even before completing your education or being deemed eligible to take the test.

If you have a credit card, you can call Chauncey using their toll-free number (1-800-551-1912, Monday through Friday, 8:00 AM–8:00 PM Eastern Time) to register for the examination. An additional fee (\$9.25) is charged for this service. If you wish to phone in your registration, you will be asked for your credit card number, its expiration date, and the exact name that appears on your card, in addition to the examination application information. The money placed on credit card registration is not refundable.

Once the jurisdiction in which you wish to be licensed has determined your eligibility and communicates this to Chauncey, you are sent an *Authorization to Test*. This document is required to schedule an appointment and must be presented at the test site in order for you to take the exam. As soon as you receive this document, verify that the spelling of your name is correct and that it matches exactly the name included on the official signed photographic identification you will be using for admission to the examination. If the two names do not match, call Chauncey immediately. If your *Authorization to Test* and identification do not match, you may be denied admission to the examination.

Scheduling an Appointment

Once you receive the *Authorization to Test*, you may call any of the Sylvan Prometric (Sylvan) Technology Centers where you wish to be tested or the Sylvan toll-free number (1-800-800-1123) to schedule an appointment. Be sure to have your *Authorization to Test* available when you call because you will be asked for your authorization number, identification number, and expiration date for testing (determined by the appropriate Board of Nursing), as well as your name and phone number. Sylvan personnel will verify your name and address as shown in the computer.

If you are a first-time candidate, you will be scheduled within 30 days of calling, if you desire. If you are a repeat candidate, you will be scheduled within 45 days, if you desire. You do not need to call for an appointment as soon as you receive the *Authorization to Test*. Even if you do call immediately, you do not need to schedule an appointment within the 30 or 45 days. You may schedule your examination appointment at a time convenient for you, but you **must** schedule an appointment before the expiration date shown on the *Authorization to Test*.

Because you have the opportunity to make a specific appointment, be sure to select a time that is convenient for you.

Do not schedule your test at the same time as another critical event. Schedule the examination when you will be able to devote 100% of your mental energies to the examination. If, however, you have scheduled your examination and later learn that it will not be convenient, you can reschedule the appointment by calling the Sylvan Technology Center where you are scheduled or the central toll-free number at least 3 days before the appointment date. You will first have to cancel the original appointment and then make another one.

Once you have called for an appointment, be sure to write the location, date, and time somewhere so that you will remember the information. You will also be given directions for finding the site. You might want to put all of this on your *Authorization to Test* because you will need to bring it with you to the examination.

If you lose your *Authorization to Test*, call Chauncey to request another. If you discover it missing immediately before your examination, you should still call Chauncey so that the Sylvan Center can be alerted that you do not have the document. You will probably still be allowed to test provided you have sufficient identification.

Basis for the Examination Content

The purpose of the NCLEX-RN is to help Boards of Nursing determine whether licensure candidates are *minimally competent* to practice entry-level nursing, thus protecting the public. In order to accomplish this purpose, it is necessary for the NCSBN to know what an entering nurse actually does *on the job*. Once this is known (based on a job analysis), an accurate evaluation instrument (examination) can be created to measure a candidate's knowledge, skills, and abilities relative to these activities.

The primary purpose of a job analysis is to ascertain the frequency with which certain tasks are performed by entering nurses, as well as the criticality of these tasks (i.e., which tasks, if performed incorrectly, could do serious or critical harm to the patient). Some tasks, such as performing cardiopulmonary resuscitation, may not be done on a regular or daily basis; however, if they are not done immediately and correctly, the patient could die. Although it is important to know both the frequency of performance and the criticality of incorrect performance, the criticality is the more important factor. Accordingly, the criticality of a task is given greater weight in the development of a test plan.

The July 1988 NCLEX-RN was the first administration of the examination using the results of a job analysis completed in 1986. Since then, a new job analysis has been conducted every three years to ensure that the examination reflects tasks performed on the job. The most recent job analysis was completed in 1996.

Examination Content (Test Plan)

The examination is not designed to merely measure your ability to recall or recognize certain facts. Its primary purpose is to assess how well you can apply the facts learned in school to common nursing situations. Accordingly, most items in the examination relate to your ability to (1) apply information or knowledge acquired in one situation and correctly transfer that knowledge to a similar situation; or (2) analyze a complex

relationship by breaking it into simpler components, making comparisons, or identifying the relationships between or among certain pieces of information. Remember, the examination is designed to measure how well you will respond in typical, real-life clinical settings. The examination content is based on the following premise:

Upon entry into nursing practice, the registered nurse is expected to care for the client and/or to assist the client's significant others in the provision of care. The registered nurse is expected to identify the health needs and/or problems of clients throughout their life cycle and in a variety of settings, to plan and to initiate appropriate action based upon nursing diagnoses derived from these assessments, and to evaluate the extent to which expected outcomes of the plan of care are achieved.¹

Based on this premise, and the results of the job analysis, the test plan² (specifications for constructing each form of the examination) consists of four categories of **client needs** that are further subdivided to define the content associated with each client need. The percentage of questions allocated to each client need subcategory is shown in Table 1–1.

A safe, effective care environment is achieved by (1) providing integrated, cost-effective care to clients by coordinating, supervising, and/or collaborating with members of the multidisciplinary health care team; and (2) protecting clients and health care personnel from environmental hazards.

Health promotion and maintenance of the client is obtained by (3) assisting the client and significant others through the normal expected stages of growth and development from conception through advanced age; and (4) managing and providing care for clients in need of prevention and early detection of health problems.

Psychosocial integrity is achieved by (5) promoting the client's ability to cope with, adapt to, and/or problem solve situations related to illnesses or stressful events; and (6) managing and providing care for clients with acute or chronic mental illnesses.

Physiological integrity focuses on (7) providing comfort and assistance in the performance of activities of daily living; (8) managing and providing care related to the administration of medications and parenteral therapies; (9) reducing the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures;

and (10) managing and providing care to clients with acute, chronic, or life-threatening physical health conditions.

Computerized Adaptive Testing

In April 1994, the NCLEX-RN examination underwent a significant change by converting from a paper-and-pencil administered test to a computerized adaptive test (CAT). Since then, the examination has been administered by computer at a convenient location on a day convenient for the candidate with only a small number of candidates being tested at the same time. Results are available to the candidate's licensure jurisdiction within 48 hours of taking the test.

With CAT, there is still a maximum amount of time allowed (5 hours) and a maximum number of items presented (265), but each candidate receives an examination that is tailor-made to fit the ability level of that individual. It is very unlikely that any two candidates would receive exactly the same set of items, as no two candidates have exactly the same ability. The selection of items presented, as well as the number of items, is based on how well a candidate answers the preceding items (a determination of his or her ability).

A *minimum* of 75 items, of which 15 are experimental items (unscored items used solely to determine how well they work and their difficulty) are presented. Because the experimental items are not identified, candidates should answer *all* items as if they were scored. The *maximum* number of items presented is 265, including the 15 experimental items. The number of items presented does not, however, automatically indicate whether a candidate has passed or failed.

All items have a known difficulty level; that is, an item is either easy or difficult for the candidate population to answer correctly. This information is obtained by analyzing the experimental items given to a large number of candidates. If every candidate answers an item correctly, it would be considered easy. If only a few candidates answer an item correctly, it would be considered difficult.

At the start of the examination, you will be presented with an item that has a low or moderate difficulty level. If you answer the item correctly, you will be given a slightly more difficult item. If you answer the initial item incorrectly, you will

Table 1–1. NCLEX-RN Test Plan

Categories	Percentage of Test Questions
A. Safe, Effective Care Environment	
1. Management of Care	7–13
2. Safety and Infection Control	5–11
B. Health Promotion and Maintenance	
3. Growth and Development Through the Life Span	7–13
4. Prevention and Early Detection of Disease	5–11
C. Psychosocial Integrity	
5. Coping and Adaptation	5–11
6. Psychosocial Adaptation	5–11
D. Physiological Integrity	
7. Basic Care and Comfort	7–13
8. Pharmacological and Parenteral Therapies	5–11
9. Reduction of Risk Potential	12–18
10. Physiological Adaptation	12–18

be given a slightly easier item. The computer continues selecting items based on how well you responded to previous items. If you miss an item, the next item will be slightly easier. If you answer the next item correctly, the following item will be slightly more difficult. Throughout the examination, you will be presented with items that are targeted to your ability level; they will be neither too easy nor too difficult for *you*. The computer is programmed to stop presenting items when one of the following conditions has occurred:

1. Your measure of competence is known to be *above* or *below* the passing standard and at least 75 items have been answered
2. You have taken the maximum number of items (265)
3. You have tested for the maximum number of hours (5)

Before the computer stops the test, all candidates are presented with a sufficient number of items covering the test plan to determine accurately whether they possess the necessary knowledge, skills, and abilities to practice competently. Regardless of your level of competence, you will be tested on *every* aspect of the test plan.

Passing Standard

The minimum passing level was determined by the National Council's Board of Directors, based on input from a panel of nurses who evaluated a typical examination. The panel was instructed thoroughly in the definition of "minimally competent" and what this term means in real life. After there was consensus as to the meaning of this term, the members were asked to individually evaluate each item in terms of "the percentage of 100 minimally competent RN candidates who would answer the item correctly." If an item was considered relatively easy, a greater percentage of candidates would be likely to answer the item correctly. If an item was considered more difficult, a smaller percentage of candidates would answer the item correctly. Individual decision making was done for each of the items presented. Based on the statistical data and definition of minimal competence, a passing score could be established. With this methodology, there is no percentage of items that must be answered correctly, nor is there a predetermined percentage of candidates who will pass.

Item Format

The examination consists of a number of multiple-choice items involving a clinical setting (situation) on which a question is based, or an individual statement or question relating to a client and/or family members. Following each situation or introductory statement, you are required to select which of four choices *best* responds to the question being asked. Because the examination is designed to measure an individual's competence to practice safely in the work setting, the items generally relate to various "real-life" situations in which nursing intervention and decision making are required. Although you must possess basic nursing knowledge (i.e., facts about the human body and the way it operates), the primary focus is on whether you are able to correctly apply these concepts in a variety of typical clinical settings.

Each item includes an introductory statement, problem or question (*stem*) to which the candidate must respond. Following the stem are four choices (*options*). Only one of these options is correct (*key*); the other three are known as *distractors*.

Distractors are created in such a way that they may seem correct to someone who is unfamiliar with or uncertain about nursing terminology, procedures, or general practice. The items are not designed to "trick" candidates. Rather, they are constructed in such a manner that it is possible to discriminate between candidates who are minimally competent (qualified to enter the profession) and those who are not.

Examination Administration

The following points highlight what you should expect on your test day:

1. Try to arrive at the site one half hour before your appointment so that you will have ample time to check in.
2. Bring your *Authorization to Test* and two pieces of identification, one of which must be an official identification that includes your photograph and signature. The name on this identification **MUST MATCH** the name on your *Authorization to Test*. If it doesn't, you may not be permitted to test.
3. Once your identification has been confirmed, you will be asked to sign a log book, provide a thumbprint, and be photographed.
4. At this time, you will be given basic instructions regarding the computer operation and administration procedures. If you have any questions regarding the information, be sure to ask for clarification.
5. Before entering the testing room, you will be required to place *all* of your personal belongings in a locker and will be given a key to the locker. The lockers are small, so do not bring anything large into the center. The *only* item that you can bring into the testing room is your primary piece of identification.
6. You will be shown to a pre-assigned computer. Before you begin testing, you and the test administrator will confirm that the photograph that appears on the computer screen is the one taken during sign-in and that it is a photo of yourself.
7. During the examination, you will be monitored by the test administrator and a videotape will be made of everyone in the testing room. An audio monitor inside the room will permit the administrator to hear any noise being made by those being tested.
8. If you have any questions during the examination or if you wish to take an unscheduled break, raise your hand and the test administrator will assist you.
9. Before the actual examination, you will be given a practice test so that you can be familiar with the two keys that are needed to answer an item.
10. Based on each response given, the computer will select the next appropriate item for you. Because the correctness of each answer that you select determines the difficulty of the next item, you will not be allowed to return to a previously shown item, nor will you be able to skip an item. You must respond to every item presented and then go on to the next item. The computer will stop automatically when (1) a decision regarding your competency can be made and you have answered the minimum number of items, (2) the maximum number of items have been delivered, or (3) the maximum testing time has occurred.

11. Each item presented, as well as your response, is stored immediately. Therefore, if your computer stops working for any reason (e.g., a power failure), when it is restarted you will be able to resume testing at exactly the same place.
12. After 2 hours, the computer will stop automatically and you will be required to take a 10-minute break. You must leave the testing room, but you do not have to leave the Sylvan area. After 10 minutes, you can resume testing. An hour and a half later, you will be permitted to take an optional break. Any breaks taken, other than the mandatory break, will count against your total testing time.
13. Neither the number of items you answer nor the amount of time you spend testing is indicative of your pass/fail status.
14. Immediately following the conclusion of your examination, your responses are transmitted to a central location for processing. Within 48 hours, your results are electronically transmitted to the jurisdiction in which you wish to be licensed. A paper copy of your results is also mailed to that jurisdiction.

Examination Results

Each jurisdiction must complete its own processing of the results. In general, you should receive your results 2–3 weeks following the examination.

Candidates who pass the examination will receive a notification of pass; no score will be provided. Depending on the jurisdiction's procedures, you may or may not receive your license with your test results.

Candidates who do not pass the examination will receive a notice of fail. No numeric score will be provided. You will, however, be sent a Diagnostic Profile that shows your personal areas of strength and weakness on the NCLEX test. You should use the information provided to help you prepare for the re-examination.

A failing notice will also include information on how often you can repeat the examination and how soon you can re-apply for a re-examination. The NCSBN has established a retake policy of no more than four administrations per year and no more frequently than once in any 3 months. Jurisdictions have the authority to impose other restrictions provided that their retake policy is no more lenient than the one established by the NCSBN.

You cannot overcome these restrictions by applying to another state for licensure, changing your name, or applying to take the examination in another state. The computerized registration system continues to track candidates after they have first applied to take the examination. Once you register, you are assigned a permanent, unique identification number that is used every time you apply to take the examination.

Examination Review

If you fail the examination, you can request an examination review, but hand scoring will not be available. The reason is that there is nothing to hand score. The answers you selected were

automatically entered and stored in the computer. Accordingly, there is no possibility that your answers were “misread.”

An examination review is feasible because the exact items presented to you, along with your responses, were retained by the computer. If you wish to review your test and your licensing jurisdiction permits it, you will need to submit a written request and fee to the jurisdiction. Once your request is approved, your test and answers will be transmitted to the Sylvan Technology Center chosen by the jurisdiction. This location may not necessarily be the one in which you took the examination. Although you can take the examination outside of the licensing jurisdiction, you will be required to review the examination within the licensing jurisdiction at the specified site.

You will be shown only the items you answered incorrectly. The answer you selected as well as the correct answer will be presented. If you wish to challenge an item, you will be asked to prepare documentation as to why you should be given credit for the item.

In all of the years that the NCLEX-RN has been administered, there have been very few challenges to the examination items, and none of the challenges has resulted in a score change. The reason for this is that before including an item on an examination, it has been reviewed numerous times by many individuals involved in the nursing profession, and has been included in an examination as a try-out item so that adequate statistics have been obtained. All items have been scrutinized thoroughly before they are actually presented to candidates and scored.

Summary

Although CAT may be a new experience for you, you should not be unduly worried or anxious about the format of the examination. It is still a multiple-choice test. The main differences are that the items are displayed on a computer screen instead of on paper and you use two computer keys instead of a pencil. These are minor differences compared with the many advantages associated with CAT:

1. Quicker administration of the examination after you have been determined eligible by the licensing jurisdiction
2. Taking the examination whenever and wherever you want
3. Taking the examination in pleasant, uncrowded conditions
4. Answering 265 or fewer items
5. Completing the examination in 5 hours or less
6. Receiving results in less time
7. Being able to start work as a licensed RN sooner

REFERENCES

1. National Council of State Boards of Nursing: Test Plan for the National Council of Licensure Examination for Registered Nurses. National Council of State Boards of Nursing, Chicago, 1989.
2. Steele, Donna and Wendt, Anne: National Council Detailed Test Plan for the NCLEX-RN® Examination. National Council of State Boards of Nursing, Chicago, 1997.