

NCLEX[®] High-Risk

The Disaster Prevention Manual
for Nurses Determined to Pass
the RN Licensing Examination

Marian C. Condon

Karen S. March

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Dedication

This book is dedicated to my beloved sons, Patrick and Adam Hooper: *Labor was worth it, sweethearts—you are the lights of my life.* It is also dedicated to the many graduate nurses I've been privileged to assist in their quest to finally pass the NCLEX. I would like to direct special thanks to Betty DeMeester Webster and Michelle Metz Robinson, who were my very first clients, and to the 25 graduate nurses who allowed me to interview them in 1992 and 1993 as part of my doctoral dissertation research: *You were my first teachers, and it was you who launched me on the journey of understanding that has culminated in the publication of this book. You will always hold a special place in my heart.*

—M.C.C.

I would like to dedicate this book to graduate nurses of the past, present, and future, who inspired my commitment to this project, and to Brad and Zach, who have provided love, encouragement, support, and most of all, patience, throughout the weeks and months of writing. I do what I do because of you.

—K.S.M.

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Letter to Nursing Students

Dear Senior Nursing Student or Graduate Nurse,

Please do not assume that because you've made it through nursing school, you are pretty much guaranteed to pass the NCLEX®. Unfortunately, there is no such guarantee—every year, bright, capable new nurses undergo the humiliating and painful experience of taking the RN licensing examination and not being successful.

From my interactions with the many GNs I've tutored in an effort to help them retake NCLEX successfully, I know that most either put little or no time into preparing for their first attempt, or they wasted their prep time on passive learning strategies that proved ineffective. Also, I know that many were unaware of the risk factors for failure on NCLEX and did not realize they needed to take extra precautions to ensure that they would pass.

This book is written especially for GNs who are at higher than average risk for having to retake the NCLEX. I invite you to take a look at the risk factors listed in *Should You Buy This Book?*, and if one or more apply to you, I urge you to take the process of preparing for NCLEX very, very seriously.

All best wishes for a fulfilling career in nursing,

A handwritten signature in black ink that reads "Marian Condon". The signature is written in a cursive, slightly slanted style.

Marian Condon

Should You Buy This Book?

If any of the risk factors listed below apply to you, the answer is, “Yes!”

- You’ve had to struggle to keep your GPA up (< 3.4).
- You got one or more Cs in a science course or a nursing course.
- You did better clinically than on classroom tests.
- You consider yourself to be a *hands-on* learner as opposed to a *book* learner.
- You tend to get the gist of things but have trouble with details.
- You did poorly on a predictive exit exam such as Evolve REACH (formerly HESI).
- English is not your native language.
- You’ve already failed the NCLEX® one or more times.

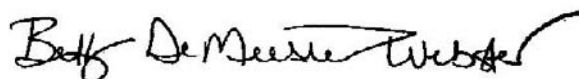
Foreword

As one of her earliest NCLEX® clients, I was delighted when Dr. Marian Condon invited me to write a foreword to this excellent and much-needed book. Here's my story: I took the NCLEX for the first time in the mid-1980s and did not pass. While the majority of my classmates were rejoicing over having achieved RN status, I was left feeling embarrassed and mad at myself. I was dreading the thought of retaking the boards and felt extremely pressured because I knew that if I failed again, I would lose my graduate nurse (GN) status at the hospital and would have to assume the role of nursing assistant. Thus, I was devastated when the dreaded large envelope again arrived in the mail. I resigned from my job as a GN and wondered about my future.

When Dr. Condon, who had been one of my favorite nursing instructors, learned of my second failure, she called and asked whether I would like her to tutor me, using a new method she was developing to help students perform better on tests. I felt honored, grateful, and even a bit curious. While I do not remember all of the details of our sessions together, I do recall that I quickly learned that the main reason for my failures was not test anxiety, as I'd thought, but the fact that I lacked some essential nursing knowledge. With Dr. Condon's help, I not only passed the boards on my third attempt, but exceeded what was then the passing score by 248 points!

Never let anyone tell you that a history of having failed NCLEX one or more times means you'll never be a successful nurse. Since becoming an RN, I have held staff nurse positions in a variety of hospitals, earned a master's degree in nursing, and worked for 10 years as a clinical nurse specialist in a neonatal intensive care unit. I am currently a nurse coordinator in a nursing program. Ironically, I now find myself sharing with my own nursing students the same study techniques that Dr. Condon taught me over 25 years ago.

Best wishes to all who are reading this!



Betty DeMeester Webster, RNC, MS
Baltimore, Maryland

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We would like to thank our family members and friends for their patience in allowing us to hole up unmolested on weekends and holidays so we could work on *The Book* and for graciously sharing their households with *The Book* for what must have seemed like an awfully long time.

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Introduction: How to Get the Most Out of This Book

Marian C. Condon

WHAT YOU WILL LEARN IN THIS CHAPTER

- Why you should read the chapters in order.
- Why you should bother with Keep Track boxes and Nugget Lists.
- Why you should make preparing for NCLEX® an absolute priority.
- Why you should access a source of additional questions, if necessary.
- How to know whether you need a tutor.

WHY YOU SHOULD READ MOST OF THE CHAPTERS IN ORDER

This book is not merely a source of practice NCLEX questions; it is a blueprint for successful NCLEX preparation, written especially for nurses who are at risk for failure. It is based on a specific methodology that has proven itself consistently, even with nurses who have failed NCLEX several times. Because a good deal of thought has gone into the manner in which this book is organized, you will get more out of it if you read most of the early chapters in order.

Chapter 1, “Are You at Risk for Failing NCLEX?” provides the information you need to evaluate your own degree of risk and aims to boost your motivation to complete the considerable amount of work thorough NCLEX preparation requires. Chapter 2, “Are You Using the Right NCLEX Prep Strategies?,” will provide insight into your thinking style and will help you to make a judgment about how well the study habits you have acquired over years of schooling have been serving you.

Chapter 3, “NCLEX-RN®: Purpose, Format, and Scope,” is a must-read before you begin tackling the practice questions in this book because it explains their structure and nature. You can save Chapter 4, “CAT-Anatomy: How Computer-Adaptive Testing Works,” and Chapter 5, “Registration, Results, and Test-Center Smarts,” until the end of your preparation period if you wish, but do not forget to read both before you actually take NCLEX. Chapter 4 will bring you up to speed about the nature of the NCLEX and why it is substantially different from any other test you have taken, and Chapter 5 will tell you how to register to take the NCLEX and avoid last-minute errors that could hurt your performance.

It is essential that you read Chapter 6, “Test Yourself: How Good Are You at Doping Out Test Questions?,” to hone your analytical skills and identify deficiencies in your knowledge base before you start using the practice tests in Chapters 7–25. If you start answering practice questions in volume before you have learned to analyze them

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properly, you will only be reinforcing your current, likely suboptimal approach to reading and analyzing questions. The field of cognitive behavioral psychology is based on the principle that cognitive processes become more habitual and reflexive as they are used over and over again. If you wish to reason out test questions more analytically and effectively, the time to start doing that is as soon as possible.

WHY YOU SHOULD KEEP TRACK OF YOUR PROGRESS

At the end of the practice test in Chapter 9 you will find a box called, “Keep Track.”

Keep Track

- Percent correct. (Divide the number of questions you answered correctly by the total number of questions you answered.) _____
- Number of questions you missed due to a reading error: _____
- Number of questions you missed due to errors in analysis: _____
- Number of assessment questions you missed: _____
- Number of lab value questions you missed: _____
- Number of drug/treatment questions you missed: _____

You will use the Keep Track boxes to record various aspects of your performance on the practice tests included in this book, and ultimately to gauge the progress you are making in your preparation for the NCLEX. After you’ve completed each of the practice tests and examinations provided, you will compute your overall score expressed as a percent. You will also review the questions you answered *incorrectly* and keep track of whether you missed them because you *read* them incorrectly (overlooked an important piece of information in the scenario or failed to understand exactly what was being asked) or because you *analyzed* them incorrectly (failed to consider every answer choice in light of each bit of information provided in the scenario). All of this will be explained thoroughly in Chapter 6. As you complete study session after study session and look back over your Keep Track boxes, you will (if all is going well) see a trend toward missing fewer and fewer questions because of faulty reading and analysis. You will also be using your Keep Track boxes to monitor your progress regarding three categories of nursing knowledge that will be well represented on NCLEX: knowledge related to *assessment*, knowledge related to *lab values*, and knowledge related to *drugs and treatments*. Finally, you will be using the Keep Track boxes to record your scores on topic-specific and comprehensive practice tests. Reviewing your scores on topic-specific practice tests will give you valuable feedback as to whether you need to do more preparation in a given area. Noting trends in your performance on comprehensive practice

tests will let you know with considerable certainty whether you are ready to take NCLEX. Taking the time to maintain your performance records is vitally important. When you pass the NCLEX, you will be very glad you did.

WHY YOU SHOULD CREATE AND REVIEW NUGGET LISTS

In Chapter 8, “How to Map Your Progress and Use What You Don’t Know to Pass the NCLEX,” you will learn how to use practice tests to identify information that was missing from your knowledge base, and you will learn how to master that information quickly and easily. One of the most important tools in your information-acquiring arsenal will be the Nugget List. A nugget is a piece of information you didn’t know or a concept you didn’t understand. A Nugget List is a two-column list consisting of nuggets expressed as questions in the left-hand column and the corresponding answers in the right-hand column.

Nugget List	
Chapter number _____ Topic _____	

You will prepare a Nugget List for each practice test you complete and study the new material by covering the answer column and attempting to come up with the correct answers to the nugget questions.

As you add more and more nuggets to your knowledge base, you will notice that your scores on the practice tests are improving. That trend, combined with a trend

toward missing fewer and fewer questions due to reading and analysis errors, will boost your confidence considerably and provide you with motivation to keep working hard.

WHY YOU SHOULD MAKE PREPARING FOR NCLEX AN ABSOLUTE PRIORITY

This book is a surefire guide to successful preparation for the NCLEX, but merely having purchased it will not guarantee your success. Adequate NCLEX preparation takes effort—often a *lot* of effort—and that is particularly true for graduate nurses who are at some degree of risk for failure. You absolutely must carve out the time you need to prepare adequately from your busy life.

On the whole, my most challenging NCLEX clients have been those who had both jobs and families. This was not because they were any less motivated than other clients, but because it was so difficult to find both time to study and a quiet place in which to study without interruption. Family responsibilities and lack of cooperation from family members can be significant barriers to NCLEX success. Most nurses are female, and women who have spouses, partners, and/or children can sometimes find it difficult to put their own needs before those of family members and be assertive about those needs. If you have a partner and/or children, you may find it necessary to point out to your nearest and dearest that they have a financial stake in your NCLEX success. If you are employed, you may have to decrease your hours or quit work altogether if that is possible for you. Happily, if you work in a hospital or other type of healthcare facility, your employer will likely be willing to cooperate with whatever you need to do in order to achieve RN status.

WHY YOU SHOULD ACCESS A SOURCE OF ADDITIONAL QUESTIONS, IF NECESSARY

As you will find out as you progress to later chapters, the NCLEX prep method upon which this book is based requires you to use NCLEX-type questions both to hone your analytical skills and to identify and plug holes in your knowledge base. It is likely that the questions presented in the latter chapters of this book will be sufficient for your needs, but should you find (as you review your Keep Track logs) that you need more, do not hesitate to access them. Chapter 2 lists a number of companies that market various online NCLEX preparation packages. If you live near your school, you may have free access to questions marketed by a company from which your school has purchased NCLEX prep products. It is essential, however, that whatever your source of questions, you continue to use the methods presented in this book. Continue to keep track of your progress and create and review Nugget Lists (see Chapter 10).

HOW TO KNOW WHETHER YOU NEED A TUTOR

My primary function with my NCLEX clients is to teach them the preparation method presented in this book, which I know will work for them. Many are able to carry on by themselves once they understand the method, and require few or no additional consultations with me. Others, however, aren't particularly good book-learners and find it

helpful if I explain various principles of pathophysiology or pharmacology to them. And with quite a few clients, particularly those who've failed NCLEX more than once, I find that it's necessary for me to spend some time pointing out and correcting errors in the reasoning they have brought to bear on practice test questions.

I think it is likely that the majority of nurses who purchase this book will be able to pass the NCLEX without the assistance of a personal tutor, providing they are making good progress in learning to analyze questions and filling the gaps in their knowledge base. If you find, however, that you are not seeing steady progress, or if you just can't understand heart failure or ketoacidosis or some other important concept, you may wish to ask a knowledgeable person for assistance. Likely candidates are nursing program faculty and agency clinical nurse specialists.

Are You at Risk for Failing NCLEX®?

Marian C. Condon

WHAT YOU WILL LEARN IN THIS CHAPTER

- Why having even a few Cs on your transcript may put you at risk
- Why having done better clinically than in the classroom may put you at risk
- Why being a hands-on learner may put you at risk
- Why getting the gist of things and having trouble with details may put you at risk
- Why having done poorly on a predictive test may put you at risk
- Why having been educated in a country other than the United States puts you at risk
- Why having already failed NCLEX® once puts you at risk for failing again
- What it's like to fail NCLEX and why you don't want to do it
- Why being at risk for failure does *not* mean you won't ever be a good nurse

RISK FACTORS

The information I am about to give you on risk factors for failure on the National Council Licensure Examination for Registered Nurses® (NCLEX-RN) comes from three basic sources: my 1994 doctoral dissertation, *The Meaning of Failure on NCLEX for Graduate Nurses* (Hooper, 1994), the general nursing literature on the NCLEX, and the considerable amount of information I've acquired over my 15 years of tutoring graduate nurses who failed the examination and were desperate to pass on their next try. As I got to know each new group of clients, I inevitably found that they shared a number of characteristics with the other clients that I'd had. Many had some degree of difficulty with one or more of nursing's prerequisite science courses in anatomy and physiology, biology, chemistry and microbiology, or pharmacology and pathophysiology. Most had managed to pass those courses but got a C+ or a lower grade in one or more of them. Quite a few of my clients had also gotten a C+ or lower in one or more nursing courses. Another characteristic that my clients have tended to share is a history of having done better in the clinical component of nursing courses than they did in the classroom component, mostly because of lackluster performance on multiple-choice tests. I believe having difficulty with tests is related to another characteristic that virtually all of my NCLEX clients have reported: being hands-on learners who acquire knowledge

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more easily in actual clinical situations than from books, lectures, etc. I've also noticed that individuals who fail NCLEX tend to get the gist (general idea) of things easily but have trouble with details. Here are two other very critical risk factors you need to know about: If you received your basic nursing education in a non-English speaking country and wish to practice in the United States, you are at high risk for failing the NCLEX on your initial attempt and, unfortunately, on subsequent attempts as well. Finally, if you've already failed the NCLEX one or more times, you are at high risk for failing on your next attempt, too.

GPA and Grades in Certain Subjects

You do not have to have a really low GPA to be at risk for failing the NCLEX. Most of my clients have had GPAs in the low- to mid-B range, and nurse researchers have found that to be true also. For example, Griffiths, Papastrat, Czekanski, and Hagen (2004) reported that the GPAs of the unsuccessful NCLEX candidates they studied ranged from 3.0 to 3.4. My observations about my clients' tendencies to have had difficulty in basic science courses, such as pharmacology and pathophysiology, and in one or more nursing courses is also congruent with the findings of many nurse researchers, but I will mention only two here. Vandenhouten (2008) found that graduate nurses who failed the NCLEX had lower grades in pharmacology and certain nursing courses than graduate nurses who passed. Beeson and Kissling (2001) found that earning less than stellar grades in pathophysiology courses and the third-level medical-surgical nursing course was also associated with failure on the NCLEX.

Hands-On Learners

Almost without exception, my clients describe themselves as hands-on learners who learn best by doing. They tell me they find it difficult to fully grasp concepts related to nursing until they have encountered them in real patient care situations in which they are actively involved. As I mentioned previously, my clients also tell me they performed better clinically in nursing courses than on classroom tests. Hearing clients say they found tests challenging but still managed to perform well clinically never surprises me because I learned very early in my tutoring career that failing the NCLEX absolutely does *not* mean that an individual cannot be a good nurse—more about that in the last section of this chapter.

Gist People Versus Detail People

The first question I ask when a new NCLEX client comes into my office is, What do you think stopped you from passing the NCLEX? The answer I hear over and over again is, I don't know. Most clients say they have no idea why they failed, although a few say they suffer from test anxiety. Most, but not all, tell me they thought they had prepared adequately—that they had studied hard for the NCLEX. The next question I ask new clients is, How do you feel about your knowledge base? Only a few clients have told me they thought their nursing knowledge base was weak; most say they feel good about their knowledge and that there must be some other explanation for their failure. I then ask them another question, Do you understand heart failure? Most say yes, and when I ask them to explain it to me, they say something very much like this: heart failure is