

## CEN<sup>Q&As</sup>

Certified Emergency Nurse

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**QUESTION 1**

You are caring for a suicidal patient with a plan. You have developed a plan of care. What would the outcome of your plan of care be?

- A. Coping and problem solving skills
- B. Less anxiety and agitation
- C. Develops a relationship with staff and peers
- D. Denies suicidal ideations and identifies options to deal with stressors

Correct Answer: D

The patient will be able to deny suicidal ideations and identify options for dealing with stressors at the completion of care. The patient has developed a plan for his suicidal ideations and this should be directed as the priority for care. The patient will need to learn to identify other options for dealing with his stress rather than suicide.

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**QUESTION 2**

You are caring for a patient who has taken a drug overdose. You must administer charcoal to the patient. You understand that the reason for giving charcoal is to:

- A. Induce vomiting
- B. Absorb toxins
- C. Decrease serum drug levels
- D. Cause quick evacuation of pill fragments

Correct Answer: B

The primary reason for administering charcoal is to prevent absorption of toxins into the system. Charcoal is not used to induce vomiting or diarrhea. It does not reduce current drug levels, but it may reduce future drug levels.

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**QUESTION 3**

You are caring for a heart failure patient who suddenly developed symptoms that include shortness of breath, increased respiratory rate, bilateral crackles and frothy sputum. You have notified the physician and received orders for the patient. Which activity would be appropriate to delegate to a licensed practical nurse?

- A. Start an IV.
- B. Check vital signs every 15 minutes.
- C. Morphine sulfate 2mg IV push
- D. Insert a foley catheter.

Correct Answer: D

The RN should delegate the task to the LPN that does not require assessment. Inserting the foley catheter is the least likely to require immediate assessment. The RN should insert the IV and immediately give IV medications. Vital signs that are taken on a deteriorating patient should be taken by the RN so that immediate assessment can be made.

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**QUESTION 4**

Which of the following would not encourage effective communication between a dying patient and his family?

- A. Discussing feelings openly
- B. Making decisions for the family and patient
- C. Assisting family and patient in performing spiritual practices
- D. Acceptance when family and patient express anger

Correct Answer: B

Making decisions for the family and patient would not encourage them to have effective communication. It is important to encourage the patient and the family to express their feeling and anger if they need to. Spiritual practices are also a very important part of a patient and family's dying process.

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**QUESTION 5**

What clinical manifestations would you see if your patient had cataracts?

- A. Eye pain
- B. Floating spots
- C. Blurred vision
- D. Diplopia

Correct Answer: C

Blurred vision is a clinical manifestation of cataracts. The patient may also exhibit decreased color perception.

All other signs are not signs of cataracts.

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