

- b. Total lymphocyte count 2400 mm³
- c. HCT 42%
- d. HGB 16g/dL

▶ **Rationale:** Albumin is low. Normal range is 3.5 to 5.5 g/dL. Low albumin places the client at risk for poor wound healing. The other lab values are within normal limits.

8. A nurse is preparing to check a client's blood pressure. Which of the following actions should the nurse take? **Chapter 27 Vitals signs page 244**

- a. **Apply the cuff above the client's antecubital fossa.**
- b. Use a cuff with a width that is about 60% of the client's arm circumference. - width of the cuff should be 40 % of arm circumference
- c. Have the client sit with his arm resting above the level of his heart. - **MUST BE AT HEART LEVEL**
- d. Release the pressure on the client's arm 5 to 6 mm per second. - pressure release should not be more than 2 to 3 mm hg per second

▶ **Rationale:** ATI FUNDA says 40% of the arm circumference pg. 139. Release the pressure no faster than 2 to 3 mm Hg per second. Apply the BP cuff 2.5 cm (1 in) above the antecubital fossa with the brachial artery in line with the middle of the cuff. Apply the BP cuff 1/3 way up above the antecubital fossa with the brachial artery in line with the middle of the cuff.

9. A nurse is preparing to perform a peripheral vascular assessment on a client. Which of the following is an appropriate action for the nurse to take? **Chapter 28 Nursing management page 262**

- a. Place the client's arm with the hand and forearm flat
- b. Apply palpating the Dorsalis Pedis - 10 - 15 seconds to the dorsum
- c. Place the cuff on the brachial artery in line with the brachial artery - 10 - 15 seconds to the brachial artery in line with the brachial artery - 10 - 15 seconds to the brachial artery
- d. **Use palpating to assess peripheral pulses - both are correct answers**
- e. **Palpate both dorsalis pedis**

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Table of Contents Ati Fundamentals Proctored Exam Test Bank

1. Understanding the eBook Ati Fundamentals Proctored Exam Test Bank
 - The Rise of Digital Reading Ati Fundamentals Proctored Exam Test Bank
 - Advantages of eBooks Over Traditional Books
2. Identifying Ati Fundamentals Proctored Exam Test Bank
 - Exploring Different Genres
 - Considering Fiction vs. Non-Fiction
 - Determining Your Reading Goals
3. Choosing the Right eBook Platform
 - Popular eBook Platforms
 - Features to Look for in an Ati Fundamentals Proctored Exam Test Bank
 - User-Friendly Interface
4. Exploring eBook Recommendations from Ati Fundamentals Proctored Exam Test Bank
 - Personalized Recommendations
 - Ati Fundamentals Proctored Exam Test Bank User Reviews and Ratings
 - Ati Fundamentals Proctored Exam Test Bank and Bestseller Lists

5. Accessing Ati Fundamentals Proctored Exam Test Bank Free and Paid eBooks
 - Ati Fundamentals Proctored Exam Test Bank Public Domain eBooks
 - Ati Fundamentals Proctored Exam Test Bank eBook Subscription Services
 - Ati Fundamentals Proctored Exam Test Bank Budget-Friendly Options
6. Navigating Ati Fundamentals Proctored Exam Test Bank eBook Formats
 - ePub, PDF, MOBI, and More
 - Ati Fundamentals Proctored Exam Test Bank Compatibility with Devices
 - Ati Fundamentals Proctored Exam Test Bank Enhanced eBook Features
7. Enhancing Your Reading Experience
 - Adjustable Fonts and Text Sizes of Ati Fundamentals Proctored Exam Test Bank
 - Highlighting and Note-Taking Ati Fundamentals Proctored Exam Test Bank
 - Interactive Elements Ati Fundamentals Proctored Exam Test Bank
8. Staying Engaged with Ati Fundamentals Proctored Exam Test Bank
 - Joining Online Reading Communities
 - Participating in Virtual Book Clubs
 - Following Authors and Publishers Ati Fundamentals Proctored Exam Test Bank
9. Balancing eBooks and Physical Books Ati Fundamentals Proctored Exam Test Bank
 - Benefits of a Digital Library
 - Creating a Diverse Reading Collection Ati Fundamentals Proctored Exam Test Bank
10. Overcoming Reading Challenges
 - Dealing with Digital Eye Strain
 - Minimizing Distractions
 - Managing Screen Time
11. Cultivating a Reading Routine Ati Fundamentals Proctored Exam Test Bank
 - Setting Reading Goals Ati Fundamentals Proctored Exam Test Bank
 - Carving Out Dedicated Reading Time
12. Sourcing Reliable Information of Ati Fundamentals Proctored Exam Test Bank
 - Fact-Checking eBook Content of Ati Fundamentals Proctored Exam Test Bank
 - Distinguishing Credible Sources
13. Promoting Lifelong Learning

- Utilizing eBooks for Skill Development
- Exploring Educational eBooks

14. Embracing eBook Trends

- Integration of Multimedia Elements
- Interactive and Gamified eBooks

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