
BKAT Critical Care Review Questions and Answers 100% Correct

Normal Central Venous Pressure (CVP) range - ANSWER 2-8 mmHg

Normal Pulmonary Artery Occlusion Pressure (PAOP) range - ANSWER 6-12 mmHg

Normal Pulmonary Artery Systolic (PAS) range - ANSWER 20-30 mmHg

Normal Pulmonary Artery Diastolic (PAD) range - ANSWER 5-15 mmHg

Normal Pulmonary Artery Mean (PAM) - ANSWER 11-20 mmHg

Normal Systemic Vascular Resistance (SVR) range - ANSWER 800-1200 mmHg

Preload - ANSWER volume left in the left ventricle at the end of diastole

What is preload affected by? - ANSWER venous return to the heart, atrial kick, total volume, and ventricular compliance

What drugs can affect preload? - ANSWER Furosemide and nitroglycerin

Afterload - ANSWER Amount of pressure heart has to overcome to pump blood out

What drugs may affect afterload? - ANSWER Vasoconstrictors and vasodilators

Contractility - ANSWER the contractile force of the heart, how much will it take to move the preload out against the afterload

What is the appropriate hold time after pulling an arterial line? - ANSWER 5-10 min

What part of the heart does the PAOP affect? - ANSWER Left ventricle

What part of the heart does the CVP affect? - ANSWER Right ventricle

What does it mean when the PAOP is elevated? - ANSWER Increased left ventricular end diastolic pressure that could be indicative of left ventricular dysfunction or failure

What does it mean if CVP is elevated? - ANSWER Fluid overload or decreased compliance (such as with ARDS and COPD)

Difference between stable and unstable angina - ANSWER Stable angina: pain happens with certain activities but then goes away with rest.

Answer Key To Critical Care Nursing Bkat

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Answer Key To Critical Care Nursing Bkat:

Manual of Simulation in Healthcare Richard H. Riley, 2008 Medical simulation is a relatively new science that is achieving respectability among healthcare educators worldwide Simulation and skills centres have become established to integrate simulation into mainstream education in all medical nursing and paramedical fields Borrowing from the experience and methodologies of industries that are using simulation medical educators are grappling with the problem of rapidly acquiring the skills and techniques required to implement simulation programmes into established curricula This book assists both novice and experienced workers in the field to learn from established practitioners in medical simulation Simulation has been used to enhance the educational experience in a diverse range of fields therefore a wide variety of disciplines are represented The book begins with a section on the logistics of establishing a simulation and skills centre and the inherent problems with funding equipment staffing and course development and promotion Section two deals with simulators and related training devices that are required to equip a stand alone or institution based centre The features strengths and weaknesses of training devices are presented to help the reader find the appropriate simulator to fulfil their training requirements There is a guide to producing scenarios and medical props that can enhance the training experience The third section covers adult education and it reviews the steps required to develop courses that comply with best practice in medical education Teaching skills facilitating problem based learning groups and debriefing techniques are especially important to multidisciplinary skills centres that find themselves becoming a centre for medical education The manual concludes with guides for the major specialties that use simulation including military paediatrics CPR and medical response teams obstetrics and anaesthesia Influence of Knowledge and Clinical Experience on Clinical Decision Making of Registered Nurses and Nursing Students Using Interactive Video Simulation Joan Elaine Predko, 1992 **The Effect of Level of Patient Acuity on Clinical Decision Making by Critical Care Nurses with Varying Levels of Knowledge and Experience** Suzanne Bakken Henry, 1989 *Excerpta Medica*, 1991 **Augmentative and Alternative Communication in Acute and Critical Care Settings** Richard R. Hurtig, Deborah Downey, 2008-11-01 *Organisation and Management of Intensive Care* D. Reis Miranda, D.W. Ryan, Wilmar Schaufeli, V. Fidler, 2012-12-06 From the viewpoint of a health economist the intensive care unit leU is a particularly fascinating phenomenon It is the epitome of high tech medicine and frequently portrayed as the place where life saving miracles are routinely wrought But the popular imagination is also caught up in the darker side when agonizing decisions have to be made to avoid futile and inhuman continuation of expensive treatments My analytical interests led me to approach these issues by asking what the evidence tells us about which leu activities are very beneficial in relationship to their costs and which are not This quickly translates into a slightly different question namely which patients are most appropriately treated in an leu and which not Unfortunately it is very hard to answer these questions because it has proved very difficult to investigate these issues in the manner which is now regarded as the gold standard namely by

conducting randomized clinical trials or alternative courses of action I think this is a pity and I am not at all convinced that it would be unethical to do so in many cases because there is wide variation in practice and genuine doubt as to which practices are best the two conditions that need to be fulfilled before such a trial is justifiable

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The Journal of Nursing Education, 1994

Fundamentals of Nursing - E-Book Patricia A. Potter, Anne Griffin Perry, Patricia Stockert, Amy Hall, 2016-02-02 It's your complete guide to nursing from basic concepts to essential skills Fundamentals of Nursing 9th Edition prepares you to succeed as a nurse by providing a solid foundation in critical thinking evidence based practice nursing theory and safe clinical care in all settings With illustrated step by step guidelines this book makes it easy to learn important skills and procedures Care plans are presented within a nursing process framework and case studies show how to apply concepts to nursing practice From an expert author team led by Patricia Potter and Anne Griffin Perry this bestselling nursing textbook helps you develop the understanding and clinical reasoning you need to provide excellent patient care 51 skills demonstrations provide illustrated step by step instructions for safe nursing care and include rationales for each step 29 procedural guidelines provide streamlined step by step instructions for performing basic skills UNIQUE Critical Thinking Models in each clinical chapter show how to apply the nursing process and critical thinking to achieve successful clinical outcomes Evidence Based Practice chapter shows how nursing research helps in determining best

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Core Curriculum for Neonatal Intensive Care Nursing Patricia Beachy, Jane Deacon, 1993

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