1. You are working in an ambulatory clinic. A client calls to report redness to the sclera, itching of the eyes and increased lacrimation for several hours. What should you direct the caller to do first?
   a. “Please call your doctor.” (Refuse to advise.)
   b. “Apply a cool compress to your eyes.”
   c. “If you are wearing contact lenses, remove them.”
   d. “Take an over-the-counter antihistamine.”

2. You are teaching prevention of accidental eye injuries in a community health clinic to a church group. What is the most important thing to stress?
   a. Follow workplace policies for handling chemicals.
   b. Children and parents should be cautious about aggressive play.
   c. Wear protective eyewear during sports or hazardous work.
   d. Establish emergency eyewash stations in the workplace.

3. Which client(s) would be best to assign to an experienced nurse in an ambulatory eye surgery center? (Choose all that apply.)
   a. A client who needs post-operative instructions for cataract surgery
   b. A client who needs an eye-pad and a metal shield applied
   c. A client who needs home health referral for dressing changes and eye drops
   d. A client who needs teaching about self-administration of eye drops

4. Place these steps for eye drop administration in the correct order.
   a. Gently press on the lacrimal duct for 1 minute.
   b. Gently pull downward to expose the lower conjunctival sac.
   c. Have the client gently close the eye and move it around.
   d. Have the client look up while you instill the number if prescribed drops.
   e. Hold the dropper and stabilize your hand on the client’s forehead.
   f. Have the client sit down with head slightly hyperextended.
   _____, _____, _____, _____, _____, _____

5. Which of these tasks are appropriate to delegate to the LPN/LVN who is functioning under the supervision of an RN? (Choose all that apply.)
   a. Assess the sexual implications for a client with oculogenital type of Chlamydia trachomatis.
   b. Administer sulfacetamide sodium 10% (Sulf-10 Ophthalmic) to a child with conjunctivitis.
   c. Review Handwashing and hygiene practices with clients who have eye infections.
   d. Show clients how to gently cleanse eyelid margins to remove crusting.

6. An excited mother calls you for advice. “My child got cleaning solution in the eyes and I rinsed it out with water. What should I do? She is still screaming?” What do you instruct the caller to do immediately?
   a. Comfort the child and check vision.
   b. Continue to irritate eyes with water.
c. Call Poison Control.
d. Call 911.

7. You are working in a community health clinic and a client needs instructions for care of a hordeolum (sty) to the right upper eyelid. What is the first treatment that the client should try?
   a. Apply warm compresses 4 times/day.
   b. Gently perform hygienic eyelid scrubs.
   c. Obtain prescription for antibiotic drops.
   d. Contact the ophthalmologist.

8. Which of the following should be immediately reported to the physician?
   a. Change in color vision.
   b. Crusty yellow drainage on eyelashes.
   c. Increased lacrimation.
   d. Curtain-like shadow across visual field.

9. For a client who has sustained recent blindness, which task(s) would be appropriate to delegate to the nursing assistant? (Choose all that apply.)
   a. Listen to the client express grief or loss.
   b. Assist client to ambulate in hall.
   c. Orient client to surroundings.
   d. Encourage independence.

10. In discharge teaching for cataract surgery, the client and family should be told to immediately report which symptom to the physician?
    a. Scratchy sensation in the operative eye
    b. Loss of depth perception with the patch in place
    c. Inadequate vision 6 – 8 hours after the patch is removed
    d. Intense pain not relieved by prescribed medications

11. Glaucoma is a preventable condition. Which group is most likely to develop glaucoma and should be targeted for educational programs?
    a. African-Americans of any age
    b. Alaskan-Americans >50 years
    c. White-Americans > 60 years
    d. Native-Americans > 35 years

12. Before giving a beta-adrenergic blocker glaucoma agent, you would notify the physician if the client discloses a history of what condition?
    a. Hypertension
    b. Tachycardia
    c. Rheumatoid arthritis
    d. Bradycardia

13. Which of these tasks are appropriate to delegate to the LPN/LVN who is functioning under the supervision of a team leader or RN? (Choose all that apply.)
    a. Irrigate the ear canal for impacted cerumen.
    b. Administer amoxicillin to a child with otitis media.
c. Remind the client not to blow nose after tympanoplasty.
d. Counsel the patient with Meniere’s disease.

14. You are reviewing the drug list of an elderly client who is on several medications prescribed by different specialists for various health problems. The client reports “lately there has been a roaring sound in my ears.” You notify the prescriber of which medication?
   a. Gentamicin sulfate (Garamycin)
   b. Metoprolol (Lopressor)
   c. Amoxicillin (Amoxil)
   d. Warfarin (Coumadin)

15. A cheerful, elderly widow comes to the community clinic for her annual check-up. She is in reasonably good health, but she has a hearing loss of 40 dB. She confides, “I don’t get out much. I used to be really active, but the older I get, the more trouble I have hearing. It can be really embarrassing.” What is the priority nursing diagnosis?
   a. Social Interaction, Impaired related to perceived inability to interact
   b. Disturbed Sensory Perception related to progressive hearing loss
   c. Knowledge Deficit related to pathophysiological process
   d. Coping, Ineffective related to change in sensory abilities

16. Which physical assessment finding should be reported to the physician?
   a. Pearly gray or pink tympanic membrane
   b. Dense, whitish ring at the circumference of the tympanum
   c. Bulging red or blue tympanic membrane
   d. A cone of light at the innermost part of the tympanum

17. You are taking histories from several clients who report vertigo. Which client report concerns you the most?
   a. Vertigo with hearing loss
   b. Episodic vertigo
   c. Vertigo without hearing loss
   d. “Merry-go-round” vertigo

18. In assisting clients with vertigo and balance problems, which team members (RN, LPN/LVN, MD, physical therapist, nursing assistant), working under appropriate supervision, should be assigned to fulfill each task?
   a. Assess and identify the etiology of vertigo. ______________________
   b. Assist the client in routine position change and ambulation. _________
   c. Administer antivertigo agents, such as meclizine (Antivert).________
   d. Obtain informed consent for a labyrinthectomy. ________________
   e. Assess situations that lead to or exacerbate vertigo. _____________

19. You are reviewing your client’s understanding of the post-operative stapedectomy instructions that you gave several days ago. Which comment concerns you the most?
   a. “I’m going to take swimming lessons in a couple of months.”
   b. “I have to take a long overseas flight in several weeks.”
   c. “I can’t wait to get back to my regular weightlifting class.”
d. “I have been coughing a lot with my mouth open.”

20. **Place the steps for removal of a foreign body from the ear canal in the correct order.**
   a. Refer for treatment of external otitis.
   b. Inspect the tympanic membrane for trauma.
   c. Obtain history for type of object.
   d. Choose appropriate fluid for irrigation or instillation.
   e. Assess, for possibility of perforation.

_____!, _____!, _____!, _____!, _____!
RATIONALE
VISUAL AND AUDITORY PROBLEMS

1. ANSWER C – If the client is wearing contact lenses, the lenses, maybe causing the symptoms and removing them prevents further eye irritation or damage. Policies on giving telephone advice will vary between institutions, and knowledge of your facility policy is essential. The other options may be appropriate, but you should gather additional information before suggesting anything else. Focus: Prioritization

2. ANSWER C – Most (90%) accidental eye injuries could be prevented by wearing protective eyewear for sports and hazardous work. Other options should be considered in the overall prevention of injuries, but have less impact. Focus: Prioritization

3. ANSWERS A and C – Post-operative instructions and home health referrals should be done by an experienced nurse who can give specific details and specialized information for follow-up eye care. The principles of eye pad and shield application and of teaching the administration of eye drops are basic procedures that should be familiar to all nurses. Focus: Assignment

4. ANSWERS F, B, E, D, C and A – Have the client sit with head hyperextended. Pulling down the lower conjunctival sac creates a small pocket for the drops. Stabilizing the hand prevents accidentally poking the client’s eye. Having the client look up prevents the drop from falling on the cornea and stimulating the blink reflex. When the client gently moves the eye, the medication is distributed. Pressing on the lacrimal duct prevents systemic absorption. Focus: Prioritization

5. ANSWERS B, C & D – Administering medications and reviewing and demonstrating standard procedures with predictable outcomes in non-complex cases are within the scope of the LPN/LVN. Assessing systemic manifestations and behaviors is the responsibility of the RN. Focus: Delegation

6. ANSWER B – Despite the fact that the child is still screaming, the mother must continue to irrigate the eyes for at least 20 minutes or until the emergency medical service arrives. Another adult, if present, should call Poison Control and 911. Focus: Prioritization

7. ANSWER A – Warm compresses will usually provide relief. If the problem persists, eyelid scrubs and antibiotic drops would be appropriate. The ophthalmologist could be consulted, but other providers such as the family doctor or the nurse practitioner could give a prescription for antibiotics. Focus: Prioritization

8. ANSWER D – A curtain-like shadow is a symptom of retinal detachment, which is an emergency situation. Change in color vision is a symptom of cataract. Crusty drainage is associated with conjunctivitis. Increased lacrimation is associated with many eye irritants, such as allergies, contact lenses, or foreign bodies. Focus: Prioritization
9. **ANSWER B** – Assisting the client to ambulate in the hall is within the scope of the nursing assistant. Dealing with the client's emotional state, orienting the client to the room, and encouraging independence require formative evaluation to gauge readiness, and these activities should be the responsibility of the RN. Focus: Delegation

10.**ANSWER D** – Intense pain may signal hemorrhage, infection, or increased ocular pressure. A scratchy sensation and loss of depth perception with the patch in place are not uncommon. Adequate vision may not return for 24 hours. Focus: Prioritization

11.**ANSWER A** – African Americans have the greatest risk of developing glaucoma. Current recommendations are eye examinations every 2 – 4 years for people age 40 – 64 and every 1 – 2 years for those older than 65. African Americans at all ages need more frequent examinations. Focus: Prioritization

12.**ANSWER D** – All beta-adrenergic blockers are contraindicated in bradycardia. Alpha-adrenergic agents can cause tachycardia and hypertension. Carbonic anhydrase inhibitors should not be given to clients with rheumatoid arthritis who are taking high doses of aspirin. Focus: Prioritization

13.**ANSWER A, B & C**– Irrigating the ear, giving medication, and reminding the client about post-operative instructions that were given by the RN are within the scope of practice of the LPN/LVN. Counseling clients is the responsibility of the RN. Focus: Delegation

14.**ANSWER A** – Gentamicin is potentially ototoxic. The prescribing physician should be notified so that the drug can be discontinued. The other options are not associated with hearing problems. Focus: Prioritization

15.**ANSWER B** – This client has a hearing loss, and a referral for a hearing aid or rehabilitation program would be the first step to correct the physical problem. The other diagnoses are pertinent if the hearing loss continues to interfere with her quality of life. Focus: Prioritization

16.**ANSWER C** – A bulging red or blue tympanic membrane is a possible sign of otitis media or perforation. Other signs are considered normal anatomy. Focus: Prioritization

17.**ANSWER C** – Vertigo without hearing loss should be further assessed for nonvestibular causes, such as cardiovascular or metabolic. The other options are more associated with inner ear or labyrinthine causes. Focus: Prioritization

18.**ANSWER A. MD, B. NA, C. LPN/LVN, D. RN** – The physician is responsible for determining medical diagnosis and for explaining outcomes and risks of surgical procedures. A physical therapist will teach and evaluate movement and ambulation techniques; however, the nursing assistant (under supervision) is able to help clients with routine ambulation and position changes. The LPN/LVN is qualified to give medications and works under supervision of the RN. The RN should assess the client to identify situations associated with vertigo. Focus: Assignment
19. **ANSWER C** – Heavy lifting should be strictly avoided after stapedectomy for at least 3 weeks. Water in the ear and air travel should be avoided for at least 1 week. Coughing and sneezing should be performed with the mouth open to prevent increased pressure. Focus: Prioritization

20. **ANSWERS C, E, D, B & A** – The type of foreign body (e.g. insect, bean, bead) will determine the next steps. If there is a live insect, instill oil. Vegetable or insect matter will swell if water is used for irrigation. Tightly wedged objects like beads are difficult to flush. If perforation is suspected or if the object is not easily removed, the nurse should not attempt irrigation or instillation. Check for trauma after the object is removed. If trauma occurred, the client should be referred for antibiotics to prevent infection. Focus: Prioritization