

## Chapter 1

# Meet the NCLEX-RN: Your Ticket to Getting a License

### *In This Chapter*

- ▶ Recalling nursing basics
- ▶ Understanding this type of test
- ▶ Approaching the NCLEX-RN with a plan
- ▶ Handling the aftermath — both good and bad

**C**ongratulations! You passed nursing school and you're almost ready to start practicing as a "real nurse." Only one thing stands in your way: the NCLEX-RN, which is prepared and administered by the National Council of State Boards of Nursing (NCSBN) to every nursing school graduate in the 50 United States, the District of Columbia, and five U.S. territories (American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands).

A passing grade on this exam is your ticket to a new career; without it, you can't practice nursing. From your current vantage point, passing the NCLEX-RN may look like a huge obstacle — one you may be afraid that you can't overcome.

Take heart! I'm here to give you the confidence and knowledge you need to conquer the NCLEX-RN. In this chapter, I familiarize you with the test plan, talk about computer adaptive testing, and share what the NCLEX-RN really wants from you. I also tell you how to identify the correct answers to test questions by figuring out what the question is asking and give you an idea of what to expect after the exam.

## *The Big Deal behind the Big Exam*



The NCLEX-RN has only one objective: to determine if you can safely operate as an entry-level nurse in the state in which you've chosen to practice. This isn't a test of your IQ or how fast you can start an IV. The NCLEX-RN doesn't predict how successful your nursing career will be or whether or not you'll become a nurse leader. All you have to do is demonstrate that you have the clinical knowledge and judgment necessary to provide safe and effective care necessary to meet the needs of the types of clients you'll encounter in the healthcare workplace. And in order to get your license, you *must* pass the test.

Sometimes students think that the NCLEX-RN is a certification examination — it's not. A certification examination is one that certifies a certain body of knowledge by an organization

that's accredited to do so. In the case of the NCLEX-RN, you're tested on your ability to practice as a nurse. When you pass, you're issued a license by the state, and you can go out and get the job of your dreams.



Here's a little-known secret: If you graduated from a school of nursing, you *can* pass the NCLEX-RN. Nursing schools are evaluated on how well their graduates perform on the exam, so they're reluctant to graduate students who can't demonstrate potential for success on the NCLEX-RN. So if you graduated, you have what it takes. Kudos!

The NCLEX-RN is much less complicated than most exams you've taken in school, less difficult than most of your clinical rotations, and far less time-consuming than all the papers you've written, care plans you've devised, and other requirements you met in order to even be eligible to take this test.

The NCSBN actually conducts a study every three years to determine what entry-level nurses do, what responsibilities they're given, where they work, and what type of care is required to meet the needs of the client. In this way, the council can tailor the test questions to reflect what new nurses actually experience in their first jobs.



The people who write the NCLEX-RN questions are looking for basic safety, competent decision-making, and logical prioritizing. Keep those topics foremost in your mind!

Taking the NCLEX-RN is like being born and dying — you have to do it by yourself. Going to the test with a friend who's also taking it is sure poison — one of you is sure to finish first and the other may just as well walk out too because you think that surely you should be finished, too. I've seen many students fail for this reason alone.

## *You Must Remember This: Nursing Basics to Know by Heart*

If nursing were just inputting data and outputting care plans, computers could replace live people. But nursing is much more than applying the nursing process to a disease process; it involves the care, feeding, and nurturing of people. The NCSBN, in its somewhat convoluted way, has broken these principles down into what they call *integrated processes*. (Yes, it's a fancy name for something basic, but after years of nursing school, you should be used to that.) What these four integrated processes — caring, communication, documentation, and teaching — boil down to is really very simple:

- ✓ **Caring:** Caring puts people above equipment or paperwork. Look at your patient before you look at machines, lab results, or even nursing processes. See the person first.
- ✓ **Communication:** Therapeutic communication skills help you immeasurably in dealing with everyone from your patients to lab technicians. Never underestimate the power of effective communication while working as a nurse; failure to communicate well may not only harm your patient but also make your life miserable.
- ✓ **Documentation:** Documenting care given and the patient's response to it is both a legal requirement and one of the major communication methods between healthcare workers.
- ✓ **Teaching:** As a nurse, you teach patients, their caretakers, and other team members every day.

You can be a good technical nurse without integrating these concepts into your nursing care, but you can't have a true nurse's heart unless you integrate every one of them into every single thing you do as a nurse. Nursing is more than curing sick people; it's caring for them, communicating with them, and teaching them.



The four integrated processes appear on the NCLEX-RN in the form of practical applications. Keeping in mind all the theories and practices that you know from nursing school, you should recognize the following themes in exam questions:

- ✓ Patient safety is always a top priority.
- ✓ Remembering the client's ABCs is essential.
- ✓ Physiological needs should be met before other needs.
- ✓ Doing what it takes to meet patient needs comes before other tasks.
- ✓ A thorough assessment is necessary before undertaking other steps of the nursing process.
- ✓ Part of the first step in the nursing process is assessing the patient's emotional status.
- ✓ Assess the patient's readiness to learn before designing a teaching program.
- ✓ Denial and disbelieving are generally the first responses to news of a loss or anticipated loss.
- ✓ Nurses must deliver care in a nonjudgmental manner.

## The NCLEX-RN — Not Your Average CAT Scan!

At some point in nursing school, you learned what a CAT scan is, right? Well, the NCLEX-RN is a CAT exam, but that doesn't mean what you think. In this case, CAT stands for *computerized adaptive testing*. Never heard of computerized adaptive testing? Read on!

The NCLEX-RN is no longer a paper-and-pencil exam. Instead, the test is administered on computers, which allow for more reliable test results because the questions can be targeted to the candidate's ability (as judged by his or her answer to each question). Therefore, it's true that not everyone gets the same test. The test items that you see are specifically chosen based on the answer you give to the preceding question. Using your most recent response, the testing program searches the item bank for a question that has a degree of difficulty that's equal to your ability. This process goes on until you answer enough questions to make it clear that your ability is either above or below the passing standard. This question process is why some people get 75 questions and pass and others get 75 questions and fail. So the length of your exam is *not* a predictor of a pass or fail result — don't even waste your time trying to predict whether you've passed or failed!

When you take the test, you're given anywhere from 75 to 265 questions, all presented in random order. Of these questions, 15 are considered experimental items and are *not* scored because the NCLEX-RN people use them to determine whether they want to subject future test-takers to those questions, depending on how you do on them. The NCLEX-RN scores only questions that have been tested for reliability, so some of the questions you get may not actually impact your score. Don't panic if you get a question that you can't seem to grasp; it may just be one of the experimental items. On the other hand, don't assume that every difficult question is an experimental one and disregard it by taking an uneducated guess.

Questions appear one at a time on your computer screen. You can view each question as long as you like, but you can't go back to previous questions. After you choose your answer, you're asked to confirm your choice by pressing the <NEXT> button. You can't go on until you confirm your answer, but you can review the question and change your answer as many times as you like before you submit it.



Another logistical issue to keep in mind come exam day is that the test is timed. You have up to five hours to complete the NCLEX-RN, with two prescheduled breaks that you may either take or opt out of. (One minute per question is more than enough time to complete the exam ahead of the five-hour limit, so don't panic.) The computer tells you when these scheduled breaks begin, but you may break for as long as you like. From my own experience and that of all the nursing professionals I know, I urge you to take your breaks — don't just sit at the computer. Leave the room and do deep breathing exercises, or just take a walk. During the breaks, don't review your answers with other candidates or check your notes; for one, you're not allowed to do either, and doing so anyway will definitely increase your anxiety and that of your comrades, too, because you'll both be convinced that the other person was right!

## Thinking the NCLEX-RN Way

Students who take the NCLEX-RN often say that it's the hardest test they've ever taken. Is this a logical statement? The NCLEX-RN is primarily a multiple-choice test based on nursing knowledge, and it tests your ability to make clinical decisions based on information provided. Sound familiar? The NCLEX-RN really isn't that different from many other tests that you've already taken and *passed*.

## Getting to the root of the question

The NCLEX-RN primarily consists of application questions that, when you get right down to it, simply ask, "What would you do in a certain situation?" Most of the situations presented on the NCLEX-RN could really happen, and you're asked to solve problems using a technique called *critical thinking*. Critical thinking is just a buzzword for making a decision based on observing, identifying the problem, deciding what's most important, recovering past knowledge (what you learned in school), and applying that knowledge to the situation presented. That doesn't sound so hard, does it?



The questions only ask about the particular situation presented. Most students' biggest mistake is adding information that isn't necessary or even appropriate to the questions. Remember, answer only the question that appears on the screen, using only the information you're given. Don't add anything!

The following is an example of a typical critical-thinking question. The answer explanation that follows it walks you through the answer process:



A nurse is discussing long-term care with the parents of a child with a ventriculoperitoneal shunt. Which of the following should be included to prevent complications from the shunt?

- (1) Restrict all childhood activities.
- (2) Have the child wear a protective helmet.
- (3) Any signs of illness must receive immediate attention.
- (4) Avoid placing the child in a side-lying position.

In this situation, the nurse is discussing long-term care, so the correct answer is something that needs to be done in order to maintain the child at his optimal level of function. Which of the choices is most likely to do that? Restricting all activities couldn't possibly maintain optimal function in a child. A protective helmet doesn't protect a ventriculoperitoneal shunt because it's an internal device. Reporting any signs of illness for medical attention is a must because a ventriculoperitoneal shunt can become infected. Avoiding side-lying positioning is a short-term intervention in the recovery period, not in the discharge plan.

So which of the choices answers the question? Of course, it's option 3. Even if you don't know what a ventriculoperitoneal shunt is, you can come to this answer by thinking the NCLEX-RN way. Read the question and ask yourself, "What's the main point of the question, and what knowledge do I need to use to choose the best answer?" By focusing on long-term care and what's best for a child, you can eliminate the wrong answers.

## *Navigating the grand inquisition, or the integrated exam*

No matter what answers you have in your head, you may see something totally unexpected on the exam. The questions may be very different from the ones that you're used to getting in nursing school. You need to become "test wise" for the NCLEX-RN, which means that you need to know how to navigate through complex information.

Tests in nursing involve complex information that has not only depth but also breadth. In addition to its own body of knowledge, nursing draws from a variety of disciplines. The content tested on the NCLEX-RN is what I call *integrated*, which means that it isn't divided into separate categories, such as medical, surgical, psychiatric, pediatric, and obstetric nursing. It isn't even limited to nursing programs — you may see questions about chemistry, biology, and all the other courses you took as a student. Questions on the exam may include a combination of these disciplines, as in this example:



A pregnant woman presents in the emergency room with complaints of severe headache for two days, some episodes of double vision, and an observation that her rings have become tight lately. She has a history of hypertension and is on a sodium-restricted diet. Which of the following assessments would the nurse report to the physician immediately?

- (1) BP 130/88
- (2) Proteinuria 2+ on dipstick
- (3) Fetal heart rate of 146 with good variability
- (4) 2+ nonpitting edema of the feet

This question is integrated because it tests your knowledge of different systems. Could the pregnancy be affecting the hypertension? Could the hypertension affect the pregnancy? The answer to those questions is "yes." So which assessment finding is the most abnormal? Or, in other words, which finding needs immediate medical attention?

Option 1 isn't an abnormal finding based on standard normal blood pressure values in adults of 100/70 to 140/90. Option 2 is abnormal because urine should never contain protein; it's an indication that the renal function is impaired. Option 3 is normal; fetal heart rates range from 120 to 160 beats per minute. And as for option 4, nonpitting edema of the feet in pregnancy is a common discomfort related to increased pressure on the venous return by the growing uterus.

With this information gathered from thoroughly examining each answer option, you can easily decide which finding should be reported to the physician. Option 2 is correct because it indicates abnormal renal function needing immediate evaluation and treatment. Isn't this easy? Or at least easier than you thought it was going to be?

Regardless of the primary diagnosis of this patient, the abnormal finding impacts her well-being the same way. Don't let the fact that questions contain integrated content distract you from what you already know!



Sometimes, a question pops up that looks like one you've seen already. It may be because several questions address similar symptoms, diseases, or problems and yet address different aspects of nursing care. Also an experimental (unscored) item may have content similar to an operational (scored) item. Don't assume that a similar question indicates that you answered the first one incorrectly. Always answer each question as if it were the only question on the test; pay no mind to previous questions.



Try not to go into the examination with any preconceived notions about what you'll see on it. You need to use proper test-taking techniques (the ones you pick up in this book) throughout the entire examination. In our experience, most nursing students are able to easily reduce the number of possible answer options to two. But contrary to popular belief, you will only find one correct answer for each multiple-choice question on the examination. You need to use everything that you've taken away from your nursing program — including effective study and test-taking techniques and a positive mental attitude — to conquer the multiple-choice exam.

## *Finding the real question behind the long scenario*

You get settled in your seat and log onto the test; everything's looking good, you're feeling good, and you get the following question:



A paraplegic client with a T10 injury from a skiing accident, as well as other trauma-related problems, is recovering from his injuries and getting ready to transfer from the acute care unit to a rehabilitation unit. When a nurse offers to assist him in getting ready for the move, the client throws his suitcase on the floor and says, "You nurses around here don't want to help me with anything." Which of the following responses is the most appropriate for the nurse to give?

- (1) "You know I want to help you; I offered."
- (2) "I'll pick these things up for you and come back later."
- (3) "You seem pretty angry today. Going to rehabilitation may be scary for you."
- (4) "When you get to rehabilitation, they won't let you behave like a spoiled brat."

You read this question, and you're ready to get out of your seat and leave the testing facility immediately. But you shouldn't panic. Although this question has multiple sentences and this patient appears to have multiple issues, you can apply a methodology to finding the real question hidden under all this detail. (Throughout this book, I guide you through dissecting this type of question in order to find out what you're really being asked.)

As you take this question apart, you should always focus on the feelings that are underlying a particular action. Options 1 and 4 are confrontational and inappropriate coming from a nurse. Although offering to pick up the client's belongings (option 2) is a nice thing to do, it doesn't address the situation, and it reveals the nurse's assumption that the patient can't pick the things up himself. So the correct answer is option 3. The trauma and the T10 injury have nothing to do with the correct answer except to tell you the patient may have a serious back injury.

Although I can't guarantee that you won't see a question like this one right off the bat, the questions should start out rather simple and get increasingly more difficult as you go through the exam. As you prove your ability to answer more-difficult questions, you get increasingly challenging ones until the computer decides that you have a minimal competency for nursing and doesn't present any more questions.

You may be very lucky and receive a very simple question in the beginning of the test, like this one:



Which of the following actions or conditions is the number one cause of lung cancer?

- (1) Genetics
- (2) Occupational exposures
- (3) Smoking a pipe
- (4) Smoking cigarettes

The correct answer is 4. If you didn't know that, you'd better hit the books a little harder. As many as 90% of clients with lung cancer smoke cigarettes or have smoked them in the past. The other answers may in fact cause lung cancer, but they aren't the *number one cause*, which is the key phrase in this particular question.

## When All Is Said and Done

You're sitting at a computer taking an exam when all of the sudden, the computer goes blank. (And no, it's not a power failure.) What do you do? Stay calm and don't panic. The test shuts off automatically *without warning* when you've answered enough questions to determine your ability to provide safe basic care for patients. A screen appears stating that "Your test is concluded." You're then required to answer several exit questions, which are just multiple-choice questions about your examination experience. They don't count toward your results.

After you leave the not-so-horrific chamber of testing horrors, you get to sit on pins and needles for two to six weeks until the state board of nursing mails your results to you. Every computer exam is scored twice — once by the computer testing center and again after it's transmitted to Pearson professional centers. I highly recommend that you put your books aside when you get home from the exam, go outside and play, and let your mind roam free (at least of the exam) for the next few weeks. There's no sense worrying when you can't light a fire under the nursing board anyway.

## *Hey, nurse? Yeah, you!*

If you passed the exam, you're officially a registered nurse — congratulations! Now comes the fun part . . . you can go out and get a real job. Because this book is about taking the exam, I don't get into how to go out and get the job. (You'll have to find another book to help you do that.) But I want to be the first to offer congratulations and wish you a long and happy career as an RN.

## *So, you failed — it's not the end of the world*

You may not want to read this particular section right now, but you probably should so that you know what happens if you fail the NCELX-RN exam. When you have to tell your family, friends, supervisor, and co-workers that you didn't pass the licensing examination, you may feel like you're the only person who ever failed this test in the entire world. I assure you, you're not alone.

If you fail the exam, you receive a diagnostic profile from the NCSBN that tells you how many questions you answered on the examination. (Remember, the more questions you answered, the closer you came to passing; see the section "The NCLEX-RN — Not Your Average CAT Scan!" earlier in this chapter.) The diagnostic profile helps you identify your strengths and weakness so that you know where to concentrate your study habits when you prepare to take the examination again.

Many people who fail the first time are disheartened enough to ask, "Should I take the test again?" Absolutely! You've completed your education to become a registered nurse, so don't throw away all that work and planning. Think back to the stages of grieving — that's exactly what you're going through. After you get through the stages of grieving, you're ready to go back and take the exam again. After all, you really want to be a nurse!

You can't retake the examination for 45 to 90 days, depending on the board of nursing in the state where you're licensing. So schedule your second attempt, and allow yourself enough time to prepare for it. Then figure out why you failed the first time around. Although it may involve painful self-examination, you need to know why you failed so that you can establish a plan for success the second time. You should prepare differently the second time than you did the first time because, well, obviously your first plan didn't work. You need to start fresh with a new plan of action.

The good thing about retaking the test is that you've already seen it — and that's a major advantage! You know exactly what to prepare for. The computer (clever machine that it is) remembers what questions you were given before, so you won't receive any of the same questions, but the content and style of the questions and the types of answer choices don't change. So you shouldn't have any surprises the second time.



There's no substitute for mastering nursing content. Go through your review books again, and become expert in reading the questions and being able to effectively answer what's being asked. Practice your test-taking strategies, too. (Throughout this book, I give you strategies to help you succeed whether it's your first test or not.)

As you gear up for your second attempt at the NCLEX-RN, follow this simple advice. It may seem obvious, but it will help you be more relaxed when you take the exam the second time:



- ✔ Choose to take the test at the time of the day when you're most alert.
- ✔ Choose a familiar testing site.
- ✔ Accept the earplugs that are offered at the testing site.
- ✔ Take your breaks.
- ✔ If you become distracted or fatigued during the test, take a break.
- ✔ Plan on spending five hours for testing; if you get out early, it's a pleasant surprise.
- ✔ Always keep a positive attitude; say to yourself, "I *will* pass the NCLEX-RN."

