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A client is diagnosed with an acute small bowel obstruction. Which assessment finding requires the most immediate intervention by the nurse?

- A. Fever of 102° F
- B. Blood pressure of 150/90 mm Hg
- C. Abdominal cramping
- D. Dry mucous membranes Correct Answers A

Rationale:

A sudden increase in temperature is an indicator of peritonitis. The nurse should notify the health care provider immediately. Options B, C, and D are also findings that require intervention by the nurse but are of less priority than option A. Option B may indicate a hypertensive condition but is not as acute a condition as peritonitis. Option C is an expected finding in clients with small bowel obstruction and may require medication. Option D indicates probable fluid volume deficit, which requires fluid volume replacement.

In assessing a client diagnosed with primary aldosteronism, the nurse expects the laboratory test results to indicate a decreased serum level of which substance?

- A. Sodium
- B. Phosphate
- C. Potassium
- D. Glucose Correct Answers C

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