

NCLEX-PN Study Guide

Domain 4 Study Guide

Health Promotion, Psychosocial Integrity & Basic Care

Exam Weight: 6–12% + 7–13% + 7–13% of Exam

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Domain Overview

This guide covers three domains: Health Promotion and Maintenance (6-12%), Psychosocial Integrity (7-13%), and Basic Care and Comfort (7-13%). Together they account for approximately 20-38% of the NCLEX-PN. These domains test the LPN's ability to support clients' holistic health across the lifespan, address mental health needs, and provide fundamental nursing care.

Health Promotion and Maintenance

Developmental Milestones (Key Ages for NCLEX-PN)

Age	Key Milestones	Safety Concerns
2 months	Social smile; lifts head; coos	Back to sleep; no soft bedding (SIDS prevention)
6 months	Sits with support; rolls over; babbles	Begin solid foods; no honey; choking hazards
12 months	Walks with support; 1-3 words; pincer grasp	Childproofing; car seat; no whole grapes/nuts
2 years	Runs; 50+ words; parallel play	Toddler-proofing; water safety; dental care begins
Preschool (3-5)	Hops; dresses self; cooperative play	Bicycle helmet; stranger safety; sun protection
School age (6-12)	Loses teeth; reads; peer relationships	Scoliosis screening; vision/hearing; sports safety
Adolescence (12-18)	Puberty; abstract thinking; identity formation	STI/pregnancy prevention; substance use; mental health
Older Adult (65+)	Sensory changes; decreased mobility; polypharmacy	Fall prevention; medication review; advance directives

Immunization Highlights for LPN Practice

Vaccine	Who Needs It	Key Points
Influenza	Everyone ≥ 6 months; annually	Live attenuated (FluMist) contraindicated in immunocompromised and pregnant women
Pneumococcal (PCV15/PPSV23)	Adults ≥ 65 ; high-risk adults	Two types: PCV15 (conjugate) and PPSV23 (polysaccharide); timing depends on prior vaccination
Shingles (Zoster)	Adults ≥ 50 (Shingrix preferred)	Two-dose series; 90%+ effective; even if had shingles before
Tdap	All adults (once); every pregnancy	Booster Td every 10 years; Tdap in each pregnancy (27-36 weeks)
COVID-19	Per current CDC guidelines	Follow current recommendations; updated annually

Hepatitis B	Unvaccinated adults; healthcare workers	3-dose series; check HBsAb titer after series for healthcare workers
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NCLEX Tip: Live vaccines (MMR, varicella, FluMist, yellow fever) are **CONTRAINDICATED** in: pregnant women, immunocompromised clients (HIV with low CD4, chemotherapy, high-dose steroids), and clients who recently received blood products or immunoglobulins.

Prenatal and Postpartum Care

Topic	Key Teaching Points
Prenatal Nutrition	Folic acid 400-800 mcg/day (before and during pregnancy); iron 27 mg/day; calcium 1000 mg/day; avoid alcohol, raw fish, high-mercury fish, unpasteurized products
Weight Gain	Normal BMI: 25-35 lbs total; underweight: 28-40 lbs; overweight: 15-25 lbs; obese: 11-20 lbs
Warning Signs	REPORT: severe headache, visual changes, sudden swelling, decreased fetal movement, vaginal bleeding, severe abdominal pain, signs of preterm labor
Postpartum Lochia	Rubra (days 1-3, red); serosa (days 4-10, pink/brown); alba (days 11-6 weeks, white/yellow)
Breastfeeding	Feed every 2-3 hours; 8-12 times/day; proper latch; signs of adequate intake: 6+ wet diapers/day, weight gain
Newborn Care	Circumcision care; cord care; jaundice monitoring; safe sleep; car seat before discharge

Psychosocial Integrity

Therapeutic Communication Techniques

Therapeutic	Non-Therapeutic (Avoid)
Active listening (full attention, eye contact)	False reassurance ("Everything will be fine")
Reflection ("It sounds like you're feeling...")	Giving advice ("You should just...")
Open-ended questions ("Tell me more...")	Closed questions ("Are you feeling better?")
Clarification ("Can you explain what you mean?")	Changing the subject abruptly
Silence (allowing time to process)	Judgmental responses ("Why would you do that?")
Summarizing key points	Agreeing with or reinforcing delusions
Empathy ("That sounds really difficult")	Minimizing feelings ("Others have it worse")

Mental Health Conditions

Condition	Key Features	LPN Priority Interventions
Major Depression	Depressed mood ≥ 2 weeks; anhedonia; sleep changes; suicidal ideation	Suicide risk assessment; safety; therapeutic relationship; medication compliance
Bipolar Disorder	Manic episodes (grandiosity, decreased sleep, impulsivity) + depression	Safety during mania; lithium monitoring; sleep regulation; medication compliance
Schizophrenia	Hallucinations, delusions, disorganized thinking, negative symptoms	Do not argue with delusions; acknowledge feelings; medication compliance; structured routine
Anxiety Disorders	Excessive worry, panic attacks, avoidance behaviors	Calm environment; breathing techniques; medication; CBT reinforcement
PTSD	Flashbacks, nightmares, hypervigilance, avoidance	Trauma-informed care; safe environment; avoid re-traumatization; medication compliance
Dementia	Progressive memory loss, confusion, behavioral changes	Consistent routine; reorientation; safe environment; family support; sundowning management

NCLEX Tip: Suicide risk: ALWAYS ask directly about suicidal ideation. The highest risk period is when depression begins to lift (client has energy to act on plan). Previous attempt is the strongest predictor of future attempt. Means restriction (removing access to lethal means) is a key intervention.

Grief and Loss (Kübler-Ross)

Stage	Client Behaviors	Therapeutic LPN Response
Denial	"This can't be true." Shock, disbelief	Allow expression; provide accurate information gently; do not force acceptance
Anger	"Why me?" Rage, blame, resentment	Do not take personally; allow expression; set limits on harmful behavior; empathize
Bargaining	"If I do X, maybe..." Making deals	Listen; do not dismiss; provide spiritual support if desired
Depression	Sadness, withdrawal, crying, hopelessness	Therapeutic presence; silence; assess for clinical depression requiring treatment
Acceptance	Coming to terms; planning; peace	Support; involve in end-of-life planning; family support; palliative care referral

Basic Care and Comfort

Nutrition and Special Diets

Diet Type	Indication	Key Foods Allowed/Restricted
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Low sodium (<2g/day)	Hypertension, heart failure, renal disease	Avoid: canned foods, processed meats, fast food, table salt
Low potassium	Renal failure, hyperkalemia	Avoid: bananas, oranges, potatoes, tomatoes, dairy
High potassium	Hypokalemia, diuretic therapy	Encourage: bananas, oranges, potatoes, leafy greens
Low fat/cholesterol	Cardiovascular disease, obesity	Avoid: fried foods, saturated fats, full-fat dairy
High fiber	Constipation, diverticulosis	Encourage: fruits, vegetables, whole grains, legumes
Dysphagia diet	Stroke, neurological conditions	Pureed foods; thickened liquids; no thin liquids; upright position
Diabetic diet	Diabetes mellitus	Consistent carbohydrate intake; avoid concentrated sweets; regular meal timing
Renal diet	CKD, dialysis	Restrict: protein, potassium, phosphorus, sodium, fluid

Positioning Guidelines

Condition	Recommended Position	Rationale
Respiratory distress/heart failure	High Fowler's (90°)	Reduces venous return; improves lung expansion
Unconscious client	Lateral (recovery position)	Prevents aspiration; maintains airway
Shock (hypovolemic)	Modified Trendelenburg (legs elevated)	Increases venous return to heart
Increased ICP	HOB 30°; head midline	Promotes venous drainage; reduces ICP
Hip replacement	Avoid flexion >90°, adduction, internal rotation	Prevents prosthetic dislocation
Spinal cord injury	Log-roll; maintain alignment	Prevents further spinal cord damage
Enema administration	Left lateral (Sims') with right knee flexed	Follows anatomical curve of sigmoid colon
Postoperative (abdominal)	Semi-Fowler's (30-45°)	Reduces tension on incision; promotes breathing

Pain Management

- Pain is the fifth vital sign — assess with every set of vital signs
- Use appropriate pain scale: numeric (0-10), FACES (children/cognitive impairment), FLACC (non-verbal)
- Non-pharmacological methods: repositioning, ice/heat, distraction, relaxation, massage
- Pharmacological: analgesics per WHO pain ladder (non-opioid → weak opioid → strong opioid)
- Reassess pain 30-60 minutes after analgesic administration

- Document: location, quality, intensity, duration, aggravating/relieving factors, response to treatment
- Tolerance vs. addiction vs. dependence: understand the difference to avoid undertreating pain

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