

## NCLEX Prioritization Strategy – Quick Guide



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Use this guide to quickly identify which patient condition requires the most immediate attention on NCLEX or in clinical scenarios.

### The 3 Levels of Urgency

1. EMERGENT – Life-threatening; must act immediately
2. URGENT – Could escalate; must act soon
3. STANDARD/ROUTINE – Stable; can be monitored or delayed

### The 20% Rule

Vital sign changes greater than 20% from baseline (or normal if no baseline is given) are typically considered clinically significant and require prompt action.

### How to Prioritize Step-by-Step

1. Identify abnormal findings or lab values
2. Ask: Is it life-threatening?
3. Use the 20% Rule to gauge significance
4. Compare options – Which abnormality poses the greatest harm if ignored?
5. Choose the most urgent/emergent problem

### Example:

Scenario: You're given a patient with the following findings:

- Systolic BP: 180 mmHg
- Heart Rate: 110 bpm

Correct Priority: BP of 180 – this could indicate hypertensive crisis or stroke risk. HR of 110 is elevated but not life-threatening.

Use this mindset to think like a triage nurse. NCLEX prioritization questions are all about who needs you first — not just who looks abnormal.