Black & Hawks: Medical-Surgical Nursing, 8th Edition

Test Bank

Chapter 1: Health Promotion and Disease Prevention

MULTIPLE CHOICE

1. The nurse explains that the belief advancing the idea that disease is a result of an organically caused disorder is the
   a. biomedical model.
   b. biopsychosocial theory.
   c. Dunn's high-level wellness model.
   d. Travis' health model.

   ANS: A
   The biomedical model describes disease as an organically caused disorder with consistent clinical manifestations. The biopsychosocial theory claims that disease is caused by the interaction of environmental, physical, and social factors. Dunn wrote about high-level wellness. The model by Travis emphasizes that wellness requires work and attention.

   DIF: Knowledge/Remembering REF: pp. 5-6 OBJ: Intervention
   MSC: Health Promotion and Maintenance Health and Wellness

2. The nurse explains that the client's ability to cope with stress dynamically will play a significant role in the client attaining maximum potential. This approach is most consistent with the model of
   a. King.
   b. Leninger.
   c. Levine.
   d. Neuman.

   ANS: A
   King's theory suggests that continuous adjustment to stressors, both internal and external, with the use of one's resources allows the person to attain maximum potential.

   DIF: Comprehension/Understanding REF: p. 4 OBJ: Intervention
   MSC: Psychosocial Integrity Coping Mechanisms

3. When the nurse encourages a Native American to seek health counsel from the tribe's shaman, the nurse is following the tenets of
   a. King.
   b. Leninger.
   c. Pender.
   d. Rogers.

   ANS: B

Leninger postulates that health refers to culturally known and utilized practices that maintain personal and group well-being.

DIF: Application/Applying REF: p. 4 OBJ: Intervention
MSC: Psychosocial Integrity Religious and Spiritual Influences on Health

4. The nurse using the World Health Organization (WHO) description of health bases care on the premise that health is
   a. a gift from a higher being.
   b. any disease-free condition.
   c. complete mental, physical, and social well-being.
   d. high-level functioning despite illness.

ANS: C
The most widely accepted definition is the classic 1947 WHO description of health as "a state of complete physical, mental and social well being and not merely the absence of disease or infirmity."

DIF: Knowledge/Remembering REF: p. 3 OBJ: Intervention
MSC: Health Promotion and Maintenance Health and Wellness

5. The nurse planning a health promotion program with clients in the community will focus least on
   a. assisting the clients to make informed decisions.
   b. organizing methods to achieve optimal mental health.
   c. providing information and skills to maintain lifestyle changes.
   d. reducing genetic risk factors for illness.

ANS: D
Health promotion programs are designed to improve the health and well-being of individuals and communities by providing people with information, skills, services, and support they need to undertake and maintain positive lifestyle changes. Genetic risks for illness cannot be controlled to promote health.

DIF: Comprehension/Understanding REF: pp. 6-8 OBJ: Intervention
MSC: Health Promotion and Maintenance Health Promotion Programs

6. A holistic belief system by the nurse would be most evident if the nurse
   a. accepts death as an outcome of life.
   b. encourages behavior modification programs.
   c. incorporates client perceptions of health when planning care.
   d. supports goal-directed learning to improve health.

ANS: C
The theories of Orem, Rogers, and Roy focus on the holistic view, which takes the client and the client's beliefs, values, and culture as necessary considerations to comprehensive care.

DIF: Application/Applying REF: p. 4 OBJ: Intervention
MSC: Health Promotion and Maintenance Health Promotion Programs

7. The nurse understands that the document he/she can use to plan community teaching projects addressing the federal population-based health objectives is
   a. *Healthy People 2010*.
   b. *Nursing's Agenda for Healthcare*.
   c. the federal Medicare/Medicaid Acts.
   d. the Goldmark Report.

   ANS: A
   Healthy People2010 contains federal population-based health objectives and identifies leading indicators of health that apply to adults.

   DIF: Knowledge/Remembering REF: pp. 8-9 OBJ: Planning
   MSC: Health Promotion and Maintenance Health Promotion Programs

8. The nurse recognizes the activity that reflects primary prevention is
   a. a self-initiated walking regimen.
   b. collaboration with a physical therapist.
   c. physician-prescribed exercise after a heart attack.
   d. tuberculosis screening.

   ANS: A
   Primary prevention is an activity that is done before any illness, but as a preventive effort to avoid illness. Collaboration with a physical therapist and physician-prescribed exercise after a heart attack are both tertiary prevention: measures intended to reduce the effects of an established health problem. Screening activities, designed for early detection, are secondary prevention.

   DIF: Comprehension/Understanding REF: pp. 8-9 OBJ: Intervention
   MSC: Health Promotion and Maintenance Disease Prevention

9. The nurse is planning a community STD (sexually transmitted disease) screening fair. This activity would be considered
   a. epidemiologic prevention.
   b. primary prevention.
   c. secondary prevention.
   d. tertiary prevention.

   ANS: C
   Secondary prevention activities are those that include screening and early diagnosis.

   DIF: Comprehension/Understanding REF: pp. 8-9 OBJ: Planning
   MSC: Health Promotion and Maintenance Disease Prevention

10. The nurse is developing a teaching plan for a 60-year-old man who experienced a cerebrovascular accident (CVA). The nurse works with the client to prevent aspiration when eating. This is an example of
    a. epidemiologic prevention.

b. primary prevention.
c. secondary prevention.
d. tertiary prevention.

ANS: D
Tertiary prevention is directed toward rehabilitation after a disorder already exists. The interventions are directed toward minimizing disability and improving quality of life.

DIF: Application/Applying REF: pp. 8-9 OBJ: Planning
MSC: Health Promotion and Maintenance Disease Prevention

11. The nurse is counseling an overweight young man on entry into a weight reduction and exercise program. The nurse is aware that the client is most likely to begin and maintain the program if he
a. can envision himself as thinner.
b. feels competent about making the change.
c. has read about the program.
d. is aware of being overweight.

ANS: B
Clients are more likely to be motivated to change if they feel competent to do it and have social support.

DIF: Comprehension/Understanding REF: pp. 13-14 OBJ: Intervention
MSC: Health Promotion and Maintenance Lifestyle Choices

12. The nurse is caring for a 35-year-old client at risk for cardiovascular disease. The client states he is aware that he must "maintain a low-fat diet." Using the Transtheoretical Model and Stage of Change, the nurse assesses that this client is at the stage of
a. action.
b. contemplation.
c. maintenance.
d. pre-contemplation.

ANS: B
The contemplation phase describes the client as seriously thinking about a change. In the action phase, the client is implementing the behavior change; in the maintenance phase the client continues to move forward with the change, and in the pre-contemplation phase the client has not yet thought about changing his behavior.

DIF: Comprehension/Understanding REF: p. 8 OBJ: Assessment
MSC: Health Promotion and Maintenance Lifestyle Choices

13. The nurse can "empower" a client in adjusting to the changes associated with the chronic effects of non–insulin-dependent diabetes mellitus by
a. explaining that concerns about vision changes are premature at this point.
b. explaining the pathophysiology of the disease.
c. informing the client about the different types of insulin.
d. teaching the client how to minimize complications.

ANS: D
Empowering gives the client information, skills, and contact with services available to deal with the client's disease.

DIF: Application/Applying REF: p. 7 OBJ: Intervention
MSC: Health Promotion and Maintenance Self Care

14. Suggestions that a home health nurse could make to an elderly client with cataracts to reduce the risk of falls in his home would include
    a. arranging scatter rugs to prevent slipping on the hardwood floor.
    b. using lower-illumination bulbs to prevent eyestrain.
    c. using night lights in every room.
    d. wearing soft-soled house shoes indoors.

    ANS: C
    The visual impairment requires increased illumination and an uncluttered environment. Soft-soled shoes enhance the fall potential as do scatter (or "throw") rugs.

    DIF: Application/Applying REF: pp. 20-21 OBJ: Intervention
    MSC: Safe, Effective Care Environment Safety and Infection Control-Accident Prevention

15. During a nursing history before a physical exam, a nurse identifies a client as being in a violent relationship. The most important intervention by the nurse at this time is to
    a. ask the physician to order a series of x-rays to look for old broken bones.
    b. call the police if the abusive partner is in the waiting room.
    c. help the woman develop an individual plan to diminish future abuse.
    d. refer her to the local battered women's shelter.

    ANS: C
    The priority intervention at this time is to help the woman develop an individualized plan to avoid future abuse. The emphasis must be on safety because the woman has a high risk for significant injury or death. Part of the safety plan can include information on shelters available in the local area, but referral to a shelter does not diminish the nurse's responsibility to help the woman remain safe.

    DIF: Comprehension/Understanding REF: pp. 21-22 OBJ: Intervention
    MSC: Health Promotion and Maintenance Family Systems

16. A client is having a physical examination and asks the nurse if his father, age 76, should have the same prostate cancer screening that he is having. The nurse bases her answer on knowledge that
    a. a simple blood test is all that is required for prostate cancer screening.
    b. all men, regardless of age, need routine prostate cancer screening.
    c. men over age 70 generally do not need routine prostate screening.
    d. only members of certain high-risk ethnic groups need regular screening.

    ANS: C

Generally, men over the age of 70 or who have a significant illness that will probably result in a life span of less than 10 more years are not routinely screened for prostate cancer. Screening should start at age 50 or earlier for high-risk ethnic groups and consists of a prostate-specific antigen test and digital rectal examination.

DIF: Comprehension/Understanding REF: pp. 25-26 OBJ: Intervention
MSC: Health Promotion and Maintenance Health Screening

17. A nurse is teaching women breast self-examination (BSE). When designing a teaching program, the nurse is aware that the biggest barrier to women doing BSE is
    a. better screening tools like mammograms.
    b. discomfort and pain when doing the exam.
    c. lack of confidence when performing the exam.
    d. realization that breast cancer is not a leading cause of cancer death in women.

    ANS: C
    A major barrier to BSE is a lack of confidence. Breast cancer is the second leading cause of cancer death in women. While mammogram is a more sensitive tool, it is costly and is only recommended every 1 to 2 years, while BSE is recommended monthly. A BSE is not uncomfortable.

    DIF: Application/Applying REF: p. 25 OBJ: Planning
    MSC: Health Promotion and Maintenance Health Screening

MULTIPLE RESPONSE

1. A nurse is presenting information at a community forum related to pneumonia. The nurse informs the audience that people who should receive the pneumococcal vaccine include those who (select all that apply).
    a. are over age 65 and had a vaccination more than 5 years ago.
    b. are under age 65 and are alcoholics.
    c. are under age 65 with chronic illnesses.
    d. are over age 65 and have never had pneumococcal pneumonia before.
    e. are over the age of 65.

    ANS: A, B, C, D
    All adults over age 65 should have a pneumococcal pneumonia vaccination and they should be re-vaccinated if it has been more than 5 years since their previous vaccination. Individuals younger than 65 are considered high risk and should have the vaccination if they are alcoholics, have chronic illnesses, are members of certain high-risk ethnic and social groups, or have sickle cell anemia or have had their spleen removed.

    DIF: Comprehension/Understanding REF: p. 23 OBJ: Intervention
    MSC: Health Promotion and Maintenance Disease Prevention

2. Place the steps for breast self-examination (BSE) in the order a nurse should teach a client to do them (select all that apply).

a. Feel both breasts while lying down.
b. Feel both breasts while sitting or standing.
c. Gently squeeze each nipple to look for discharge.
d. Look at your breasts in the mirror with your arms on your hips.
e. Look at your breasts in the mirror with your arms raised.

ANS: A, B, C, D, E
This is the proper sequence for BSE. BSE should be done at the end of the menses in women who still menstruate, and on the same day of each month in post-menopausal women.

DIF: Comprehension/Understanding REF: p. 25 OBJ: Intervention
MSC: Health Promotion and Maintenance Health Screening

3. Strategies a nurse should use when teaching a client include (select all that apply)
   a. using plain, lay language.
   b. providing comprehensive information at each session.
   c. having the client "teach back" what has been taught.
   d. using written material written at a low literacy level.

   ANS: A, C, D
   Strategies for teaching include (1) using plain, lay language; (2) limiting the amount of information given at any one time; (3) using teach-back techniques; (4) using diagrams; and (5) using written material that is at a low literacy level. Estimates are that one third to one half of people in the United States experience low health literacy.

   DIF: Application/Applying REF: p. 7 OBJ: Intervention
   MSC: Health Promotion and Maintenance Principles of Teaching/Learning

4. A nurse teaching a client using self-management support strategies would include measures to help the client increase his/her (select all that apply)
   a. compliance with recommendations.
   b. decision-making abilities.
   c. health literacy.
   d. problem-solving skills.
   e. resource utilization

   ANS: B, C, D, E
   The five self-management skills that form the core of Loring's self-management support program are problem-solving, decision-making, resource utilization, empowered client role, and health literacy.

   DIF: Knowledge/Remembering REF: pp. 6-7 OBJ: Intervention
   MSC: Health Promotion Health Promotion Strategies