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Focus on Adult Health Medical Surgical Nursing 2nd Edition Honan Test Bank

Chapter 1 The nurse's Role in Adult Health Nursing

MULTIPLE CHOICE

1. The nurse ensures that a clients bedspace is neat and clean with the call light within easy reach. The nurse is focusing on which nursing theorist who realized the importance of the environment for care?

1.	Florence Nightingale	
2.	Sister Callista Roy	
3.	Dorothea Orem	
4.	Martha Rogers	40

ANS: 1

Florence Nightingales theory focused on the environment for care. Sister Callista Roys model is based in systems theory and an individuals ability to adapt. Dorothea Orems model is the self-care deficit theory. Martha Rogers model is the science of unitary human beings.

PTS:1DIF:Apply

REF:Emergence of Contemporary Nursing in the United States

2. The nurse is instructing a client on self-administration of insulin so that the client will not need a health care provider to do this activity. The nurse is implementing which of the following aspects of Virginia Hendersons theory of nursing?

- 1. A caring relationship
- 2. Helping the client achieve independence from the nurses assistance as quickly as possible
- 3. Integration of objective and subjective data
- 4. Application of critical thinking

ANS: 2

Virginia Hendersons theory of nursing is to help people achieve health or a peaceful death so that they can be independent from the nurses assistance as quickly as possible. A caring relationship, integration of objective and subjective data, and application of critical thinking are included in the American Nurses Associations essential features of professional nursing.

PTS:1DIF:Analyze

REF:Emergence of Contemporary Nursing in the United States

3.A client tells the nurse that he has an HMO for his health insurance. The nurse understands that the purpose of this type of health plan is to:

- 1. ensure payment is made to Medicare for services rendered.
- 2. maximize the utilization of health care resources.
- 3. efficiently manage costs while providing quality care.
- 4. focus on the illness when providing care.

ANS: 3

Health maintenance organizations (HMOs) were created to efficiently manage health care costs while providing quality care. An HMO is a type of managed care plan with the goal of providing wellness care and not focusing on the illness during the provision of care. HMOs do not ensure payment is made to Medicare for services rendered. HMOs also do not maximize the utilization of health care resources but rather uses financial incentives to decrease care costs.

PTS: 1 DIF: Understand REF: Cost of Care

4.A client tells the nurse that he does not have a primary care physician but rather makes an appointment with a doctor who specializes in the area in which he is experiencing a problem. The nurse realizes this client is at risk for which of the following?

- 1. Fragmented care
- 2. Overpayment of services
- 3. Inability to sustain health
- 4. Finding an appropriate general practitioner

In the 1980s, the close and trusting relationship between an individual and the individuals physician waned and was replaced by acquaintances with specialists based upon particular health care problems. These episodes of care cause fragmentation of care. The client who utilizes specialists is not at risk for overpayment of services, the inability to sustain health, or finding an appropriate general practitioner.

PTS:1DIF:AnalyzeREFroviders of Care

- 5. The nurse is attending a masters degree program in efforts to be educationally prepared to serve as a hospital leader. The nurse realizes that this educational preparation will:
 - 1. hinder the nurses ability to work with physicians.
 - 2. be viewed as not supporting the profession of nursing by other nurses.
 - 3. ensure the nurse is biased towards clinicians interests.
 - prepare the nurse to serve as strong clinical support with the ability to integrate business and caring.

ANS: 4

The nurse is attending an educational program to serve as a hospital leader. This education will prepare the nurse to serve as strong clinical support with the ability to integrate business and caring. This education will not hinder the nurses ability to work with physicians. This education will not be viewed as unsupportive to the profession of nursing. The education will ensure that the nurse is not biased towards clinicians interests.

PTS: 1 DIF: Analyze REF: Clinical Systems Leadership

6.A client tells the nurse that all hospitals care about is doing the minimum for a client regardless of the outcome. Which of the following should the nurse respond to this client?

- 1. It does feel like that sometimes.
- 2. Health insurance companies have caused this problem.
- 3. The doctors will get paid regardless of the clients outcomes.

There are quality programs in place to make sure clients receive the best quality of care regardless of the cost.

ANS: 4

In response to concerns about safety and quality of care voiced by clients and providers, total quality management and continuous quality improvement programs were initiated. These programs ensure society that cost management is not compromising safety or quality. This is what the nurse should respond to the client. The other choices do not address the clients concerns nor do they explain quality management programs.

PTS: 1 DIF: Apply REF: Quality Measure Shift

7. The nurse is providing care at a time that is the most beneficial to the client. The nurse is implementing which of the following Joint Commission Dimensions of Quality Performance?

1.	Safety
2.	Timeliness
3.	Efficiency
4.	Availability

ANS: 2

The dimension of timeliness means the degree in which interventions are provided at the most beneficial time to the client. Safety means the degree in which the risk of an intervention and risk to the environment are reduced for both client and health care provider. Efficiency means the degree in which care has the desired effect with a minimum of effort, waste, or expense. Availability means the degree in which appropriate interventions are available to meet the clients needs.

PTS:1DIF:Analyze

REF:Box 1-1 Joint Commission Dimensions of Quality Performance

8. The nurse is providing care while adhering to safety as a Joint Commission Dimension of Quality Performance. Which of the following did the nurse provide to the client?

1. Using a needleless device when providing intravenous medications

- 2. Keeping the siderails of the bed in the down position after providing a pain medication to a client
- 3. Having the client sit in a wheelchair with the wheels in the unlocked position
- 4. Placing cloth towels over a spill in the room of an ambulatory client

The dimension of safety means the degree in which the risk of an intervention and risk to the environment are reduced for both client and health care provider. The nurse who uses a needleless device when providing intravenous medications is adhering to this dimension. Keeping the siderails in the down position is not a safe practice. Having a client sit in a wheelchair with the wheels unlocked is not a safe practice. Placing cloth towels over a spill in the room of an ambulatory client is not a safe practice.

PTS:1DIF:Analyze

REF:Box 1-1 Joint Commission Dimensions of Quality Performance

9. The nurse is planning and providing care while adhering to the American Nurses Association definition of professional nursing. Which of the following does the nurse include when implementing client care?

- 1. Follows the NANDA nursing diagnoses process
- 2. Integrates objective and subjective data
- 3. Respects cultural diversity of peers
- 4. Acknowledges the experience and training of physicians

ANS: 2

The American Nurses Association acknowledges six essential features of professional nursing. These include: 1) a caring relationship, 2) attention to the full range of human health and illness experiences, 3) integrates objective and subjective data, 4) applies scientific knowledge and critical thinking, 5) advances nursing knowledge through scholarly inquiry, and 6) promotes social justice. The nurse integrating objective and subjective data is implementing one of the six essential features of professional nursing. The other choices are not essential features of professional nursing.

PTS:1DIF:Analyze

REF:Emergence of Contemporary Nursing in the United States

10. The nurse has shifted her practice from an illness focus to a health focus. Which of the following has this nurse implemented?

- 1. Standardized care plans
- 2. Critical pathways
- 3. Instructing a client on relaxation techniques to aid with sleep
- 4. Holding around-the-clock medication when a client is asleep

ANS: 3

The use of client education as a strategy to attain and maintain the potential for health is an example of the shift of care from an illness focus to a health focus. The nurse instructing a client on relaxation techniques to aid with sleep is implementing a health focus of care. The other choices do not support the shift from an illness focus to a health focus.

PTS: 1 DIF: Analyze REF: Leadership

11.A client is admitted with a highly communicable disease. The nurses do not want to participate in the care of this client. Which of the following should be done to ensure the client receives the highest quality of care?

- 1. Adhere to strict standard precautions.
- 2. Plan to have the client transferred to another health care organization.
- 3. Ask the physician if the client can be cared for in the home.
- 4. Suspend the nurses without pay who refuse to care for the client.

ANS: 1

When providing care in a highly global environment, the risks of communicable diseases increases. In the event that a client is admitted with a highly communicable disease and the nurses are fearing for their own health and safety, the only safe approach is to ensure all staff adhere to strict standard precautions. The other choices do not ensure that the client will receive the highest quality of care. The nurses must learn emotional intelligence and resolve issues under fire.

PTS:1DIF:AnalyzeREF:Globalization

12. The nurse has been an employee of an organization for 2 years and is considering a job change. Which of the following does this nurses plan suggest to any future employers?

- 1. The nurse moves to other jobs too frequently.
- 2. The nurse is inflexible.
- 3. The nurse is searching for a more challenging environment with career opportunities.
- 4. The nurse is willing to sacrifice home and personal life for a job.

ANS: 3

At one point in time, job changes every 2 or 3 years was considered a red flag for employers. This does not hold true today. The nurse who changes jobs every 2 or 3 years is interested in career advancement and success. Creativity is valued and opportunities are desired. Moving to another job in 2 to 3 years does not mean the nurse is inflexible. The new generation of nurses does not want to sacrifice home and personal life for a job.

PTS: 1 DIF: Analyze REF: Care Delivery Models

13. The nurse is experiencing pain and fatigue in both arms when using the computer to document client care. Which of the following can the nurse do to reduce these symptoms?

- 1. Refuse to use the computer and document using a pen and paper.
- 2. Stand up when using the computer.
- 3. Adjust the keyboard and chair to reduce the pressure on the wrists and arms.
- 4. Ask another nurse to input the information for client care activities.

ANS: 3

Ergonomic hazards are increasing with health care providers and nurses in particular. Many of these hazards are because of the implementation of computers for documentation. The nurse should adjust the keyboard and chair to reduce the pressure on the wrists and arms when documenting with the computer. The nurse cannot refuse to use the computer. Standing up may not reduce the nurses symptoms. The nurse cannot legally ask another nurse to document client care.

PTS:1DIF:ApplyREF:Ergonomic Hazards

MULTIPLE RESPONSE

1. The nurse is planning care for a client and reviewing appropriate educational materials to use for discharge instructions. Which domains of nursing is this nurse implementing? (Select all that apply.)

1.	Nursing process
2.	Clinical practice
3.	Education
4.	Literature
5.	Administration
6.	Research

ANS: 2, 3

The four domains of nursing are: 1) clinical practice, 2) education, 3) administration, and 4) research. When the nurse plans care for a client, the domain being implemented is clinical practice. When reviewing appropriate educational materials to use for discharge instructions, the domain being implemented is education. The nurse is not utilizing the domains of research or administration. Nursing process and literature are not domains of nursing.

PTS:1DIF:Apply

REF:Emergence of Contemporary Nursing in the United States

2. The nurse suspects that another health care colleague may be chemically dependent when which of the following is assessed? (Select all that apply.)

1.	Prolonged work breaks
2.	Clinical care omissions
3.	Mood stability

4.	Extraordinary accomplishments
5.	Heavy use of fragrances
6.	Inability to recall recent events

ANS: 1, 2, 4, 5, 6

Clues of possible chemical dependency include tardiness, late sick calls, frequent or prolonged work breaks, inability to recall recent events, heavy use of fragrances, clinical care omissions or errors, patient complaints or requests for a change in care provider, mood instability, and extraordinary accomplishments. Mood stability is not a characteristic of a colleague who is experiencing chemical dependency.

PTS:1DIF:Apply

REF:Box 1-6 Clues to the Possibility of Chemical Dependence

3. The nurse is a member of a health care team that includes a physician and other health care providers. These providers work together to ensure the client is relieved of suffering, has diseases cured, and experiences enhanced health and performance. Which of the following are the levels of care represented by this team of health care providers? (Select all that apply.)

1.	Sustain life
2.	Maintain health
3.	Regain health
4.	Minimize injury
5.	Maximize cost
6.	Attain enhanced health

ANS: 1, 2, 3, 6

The medical teams mission is to relieve suffering and cure disease. This involved the three levels of care: 1) sustain life, 2) regain health, and 3) maintain health. Once the shift toward health care occurred, the fourth level of attaining enhanced health was added. Minimize injury and maximize cost is not a level of care.

PTS:1DIF:AnalyzeREFroviders of Care

4.A client tells the nurse that she is disappointed that her employer is offering a health maintenance organization for a health care benefit. Which of the following can the nurse use as responses to the client as advantages of this type of health plan? (Select all that apply.)

- 1. Since there is a nursing shortage, clients need to stay out of the hospital.
- 2. This type of plan provides wellness care at a minimal cost to keep people healthy.
- 3. This type of plan helps clients avoid illnesses with high costs.
- 4. An HMO standardizes diagnostic and treatment decisions across the nation.
- 5. This type of plan ensures coordinated services from wellness to death.
- This type of plan costs as much as the traditional plans, but the insurance companies get the extra money from premiums.

ANS: 2, 3, 4, 5

There are several missions and visions of managed care. The first is to provide wellness care at a minimal cost to keep people healthy and avoid providing illness care at a higher cost. Another mission is to standardize diagnostic and treatment decisions across the nation. Managed care emphasizes the delivery of coordinated services across the care spectrum from wellness to death and uses financial incentives to decrease length of stay and achieve cost efficiency. Managed care was not implemented to address the nursing shortage. This type of plan does not cost as much as a traditional health plan nor do the insurance companies receive the extra money from premiums.

PTS: 1 DIF: Apply REF: Cost of Care

5. The nurse has incorporated several criteria that are essential for being a member of a profession. Which of the following has this nurse done? (Select all that apply.)

- 1. Has passed the licensure examination
- 2. Works regularly scheduled shifts
- 3. Completed a bachelors degree in nursing

- 4. Limits absences from work
- 5. Joined the American Nurses Association
- 6. Reads evidenced-based information to incorporate into planning client care

ANS: 1, 3, 5, 6

There are seven essential criteria for a profession. The nurse has incorporated four of these criteria by passing the licensure examination, the nurse has implemented a code of ethics; by completing a bachelors degree in nursing, the nurse has been educated in an institution of higher education; by joining the American Nurses Association and reading evidenced-based information, the nurse is affiliated with a professional association that promotes and ensures quality practice. Working regularly scheduled shifts and limiting absences from work are not essential criteria for a profession.

Chapter 2 Health Education and Health Promotion

MULTIPLE CHOICE

1.A client is reviewing a videotape without the assistance of the nurse for instruction. The type of teaching strategy this client is using is considered:

1.	demonstration.
2.	slides.
3.	programmed instruction.
4.	discussion.

ANS: 3

Programmed instruction is often referred to as canned presentation and is intended for use without the nurse. Demonstration, slides, and discussion require a nurse to be present.

PTS: 1 DIF: Analyze REF: Teaching Strategies: Programmed Instruction

- 2. The nurse is instructing a client regarding food safety, injury prevention, and occupational health. Which of the following *Healthy People 2010* objectives is the nurse instructing the client?
 - 1. Promote healthy behaviors
 - 2. Promote healthy and safe communities
 - 3. Improve systems for personal health and public health
 - 4. Prevent and reduce diseases and disorders

This objective addresses instruction that focuses on the health and safety of communities such as food safety, prevention of injury, and occupational health. Promoting healthy behaviors would include weight reduction and smoking cessation. Improve systems for personal health and public health would include immunization programs. Prevent and reduce diseases and disorders would include instruction on screening programs, physician visits, and routine health maintenance care.

PTS: 1 DIF: Analyze REF: Health Promotion on a Global Level

- 3.A client has inadequate resources and impairment of personal support systems. Which nursing diagnosis would apply to this patient?
 - 1. Noncompliance
 - 2. Deficient knowledge
 - 3. Ineffective health maintenance
 - 4. Health-seeking behavior

ANS: 3

Defining characteristics for ineffective health maintenance includes impairment of personal support systems, observed inability to take responsibility for meeting basic health practices, demonstrated lack of knowledge, failure to recognize important symptoms reflective to altered health status, lack of health-seeking behaviors, and inadequate resources. Inadequate resources and impairment of personal support systems would not support the nursing diagnoses of Noncompliance, Deficient Knowledge, or Health-Seeking Behavior.

PTS:1DIF:Apply

REF: Box 3-3 Defining Characteristics for Ineffective Health Maintenance

4. While planning care for a client, the nurse identifies content that would address the clients diagnosis of Deficient Knowledge. The nurse will ensure time is allocated for client instruction because:

- 1. the client cannot be discharged without it.
- 2. it is a legal component of the nursing process.
- 3. it is a nice thing to do for a client.
- 4. the physician has written an order for instruction.

ANS: 2

Patient education is a legal component of the nursing process that was identified in the Patients Bill of Rights. Patient education is a necessary function of nursing care. The client could be discharged without receiving instructions. Education is not done because it is a nice thing to do for a client. Client education does not necessitate a physicians order.

PTS:1DIF:ApplyREFatient Education

5. The nurse is engaged in an information teaching session with a client. Which of the following would be appropriate to instruct during an informal teaching session?

- 1. Expected effects of a new medication
- 2. Instruction on leg exercises to be used after surgery
- 3. How to use an incentive spirometer
- 4. Diet and medications to manage a new diagnosis of diabetes mellitus

ANS: 1

Instruction can be either informal or formal. Informal instruction occurs intermittently and frequently during the course of client care. These instructions are simple, relate to the disease process, and answer client questions. Providing the expected effects of a new medication is a type of information instruction. Formal instructions are deliberate with specific goals and an evaluation process. Instructing on postoperative leg exercises, the use of an incentive spirometer,

and diet and medications to manage a new health diagnosis are all examples of formal instruction.

PTS: 1 DIF: Apply REF: Formal and Informal Patient Education

6.The nurse is planning a presentation to a group of senior citizens as part of a wellness program. Which of the following topics would be appropriate for the nurse to instruct this client population?

- 1. Importance of taking medications as prescribed
- 2. Ways to follow a physicians treatment plan
- 3. Ease of changing an abdominal dressing
- 4. Strategies to reduce salt in the diet and increase activity

ANS: 4

Some educational topics can be instructed in a group setting. Strategies to reduce salt intake and increase activity are two topics that would be appropriate for a group instruction. The other choices are appropriate for individual instruction.

PTS: 1 DIF: Apply REF: Individual and Group Patient Education

7.A client is considering several changes in personal habits to improve his health. Which of the following critical thinking strategies can the nurse use to help this client?

- 1. Ask the client to identify his goals to improve his health.
- 2. Remind the client that the physician has to approve all changes in his health improvement plan.
- 3. Suggest the client wait until he is discharged before planning to make personal habit changes.
- 4. Recommend that immediate changes are made to confuse the bodys responses.

ANS: 1

Critical thinking is a self-directed, deliberate, self-corrected, results-oriented reasoning process that strives to problem-solve client care issues by combining logic, intuition, and creativity. The goal of critical thinking is to assist clients to use what they already know and work with the client to make changes that they identify through self-discovery. Asking the client to identify

goals to improve health is one strategy that the nurse can use when implementing critical thinking with client education. The other choices do not support critical thinking with client education.

PTS: 1 DIF: Apply REF: Critical Thinking and Patient Education

8.A client has several identified learning needs. Which of the following should the nurse assess prior to planning instruction for this client?

1.	Home address	
2.	Clients learning style	-0
3.	Living arrangements	
4.	Financial resources	

ANS: 2

Areas to include in the assessment of a clients learning needs include the clients ability to learn, style of learning, information about a health condition, cultural background, and other information as required. The clients home address, living arrangements, and financial resources are not a part of a clients assessment of learning needs.

PTS: 1 DIF: Apply REF: Patient Education and the Nursing Process

9. Which of the following teaching strategy would best support a client who needs to learn how to self-administer insulin injections?

1.	Discussion
2.	Role-playing
3.	Demonstration
4.	Programmed instruction

ANS: 3

Demonstration is a practical strategy used when teaching a new skill such as self-injection of insulin. Discussion is an exchange of information and does not provide an opportunity for the client to learn a new skill. Role playing allows the client to apply knowledge in a simulated

environment. This strategy does not support learning a new skill. Programmed instruction is intended for use without the nurse. This strategy does not support learning a new skill.

PTS:1DIF:ApplyREF:Teaching Strategies

10.A client tells the nurse that she uses audio CDs in her vehicle when driving to and from work to keep current with educational requirements for her job. The nurse would assess this client as preferring which type of learning style?

1.	Auditory	
2.	Visual	
3.	Kinesthetic	
4.	Anesthetic	

ANS: 1

The client who learns by hearing prefers an auditory learning style. The client who learns by reading uses a visual learning style. The client who learns by doing or touching is using a kinesthetic learning style. Anesthetic is not a type of learning style but rather a medication used for surgery.

PTS:1DIF:AnalyzeREF:Teaching Strategies

11. The nurse is attempting to instruct a client on ways to eliminate smoking. The client tells the nurse that he has no health problems because of smoking and does not understand why he needs to quit. Which of the following is interfering with the nurses ability to instruct the client in health promotion behaviors?

1.	Motivation
2.	Perception
3.	Self-image
4.	Maintenance

ANS: 2

Perception is a clients sense and understanding of his current health status. If the client does not perceive a problem with current health maintenance activities, the nurse should not intervene at this time. Motivation is the internal drive or external stimulus to perform an action or thought. Maintenance is practicing a new behavior for an extended period of time. The clients self-image is not interfering with the nurses ability to instruct the client in health promotion behaviors.

PTS: 1 DIF: Analyze REF: Characteristics of Health Maintenance

12. The nurse is planning instruction to support health promotion behaviors. Which of the following clients would benefit the most from these instructions?

- 1. 60-year-old client diagnosed with type 2 diabetes mellitus
- 2. 83-year-old client with hypertension
- 3. 75-year-old client recovering from a total hip replacement
- 4. 35-year-old client desiring to begin an exercise program

ANS: 4

Health promotion interventions are for healthy individuals and are intended to maximize their health status. The 35-year-old client who wants to begin an exercise program would benefit from health promotion instruction. The other clients are considered to be ill and would not benefit from instruction in health promotion behaviors.

PTS:1DIF:AnalyzeREF:Health Promotion

13. The nurse and client have determined that goals established for health maintenance behaviors have not been achieved. In which step of the nursing process are the nurse and client working at this time?

1.	Evaluation
2.	Assessment
3.	Planning
4.	Implementation

ANS: 1

The nurse and client together measure how well the client has achieved the goals for health maintenance in the plan of care. Goals that have not been achieved are evaluated and adjusted. This is an activity done during the evaluation step of the nursing process. Evaluation of goals is not done during the assessment, planning, or implementation steps of the nursing process.

PTS: 1 DIF: Analyze REF: Evaluation of Outcomes

MULTIPLE RESPONSE

1.A client is demonstrating behaviors consistent with normal health maintenance. Which of the following has this client demonstrated? (Select all that apply.)

1.	Motivation
2.	Health encouragement
3.	Readiness
4.	Maintenance
5.	Health activities
6.	Perception

ANS: 1, 4, 6

The three characteristics of health maintenance are: 1) perception, 2) motivation, and 3) maintenance. Health encouragement, readiness, and health activities are not behaviors consistent with normal health maintenance.

PTS: 1 DIF: Analyze REF: Characteristics of Health Maintenance

2. The nurse is planning an instructional session with a client. When planning this session, the nurse should incorporate which teaching/learning principles? (Select all that apply.)

1.	Assessment of how the client organizes knowledge	
2.	Motivation and self-efficacy	
3.	Setting goals	

- 4. Developmental level of the client
- 5. Time management
- 6. Self-engagement

ANS: 1, 2, 3, 4, 6

Principles of the teaching/learning process include how knowledge is organized by the learner, self-motivation and self-efficacy, setting measurable goals, developmental level of the learner, and self-engagement. Time management is not a teaching/learning principle.

PTS:1DIF:Apply

REF: Patient Education and Teaching/Learning Principles

3. The nurse is planning client instruction interventions to support critical thinking. Which of the following are characteristics of critical thinking in the client education process? (Select all that apply.)

1.	Organized
2.	Clearly explained with examples
3.	Vague
4.	Task-oriented
5.	Knowledge-oriented
6.	Moral and ethically focused

ANS: 1, 2, 5, 6

Characteristics of critical thinking with client education include organized and clearly explained with the use of examples, aimed at positive health outcomes, is knowledge-oriented, and is focused on making moral and ethical decisions. Critical thinking is not vague nor task-oriented.

PTS: 1 DIF: Analyze REF: Table 3-1 What is Critical Thinking?

4. The nurse is utilizing the technique of motivational interviewing to instruct a client on ways to limit alcohol intake. Which of the following are techniques used when implementing motivational interviewing? (Select all that apply.)

1.	Express empathy
2.	Develop discrepancy
3.	Avoid arguing
4.	Roll with resistance
5.	Support self-efficacy
6.	Contract for goal achievement

ANS: 1, 2, 3, 4, 5

Motivational interviewing has five specific techniques: 1) expressing empathy, 2) developing discrepancy, 3) avoiding argument, 4) rolling with resistance, and 5) supporting self-efficacy. Contracting for goal achievement is not a technique of motivational interviewing.

PTS: 1 DIF: Apply REF: Motivational Interviewing

5. Which of the following self-examination techniques is a health maintenance behavior for the nurse to instruct a client? (Select all that apply.)

nuise to histract a chefit? (Select all that apply.)		
1.	Breast self-examination	
2.	Capillary blood glucose testing	
3.	Testicular self-examination	
4.	Skin examination	
5.	Application of hydrocortisone cream for a skin disorder	

6. Elevating edematous lower extremities

ANS: 1, 3, 4

Physical self-examination is a health maintenance behavior that does not require any special equipment but requires proper instruction on the correct procedure. Examples of self-examinations that a nurse can instruct a client include breast self-examination, testicular self-examination, and skin examination. Capillary blood glucose testing needs the use of a glucometer. Application of hydrocortisone cream is a medication used for a diagnosed skin disorder. Elevating edematous lower extremities is an intervention for a peripheral vascular or cardiac disorder.

Chapter 3 Chronic Illness and End-of-Life Care

MULTIPLE CHOICE

1. The nurse believes that a client is eligible as a participant for The National Hospice Reimbursement Act of 1986. This act mandated that:

- 1. clients with terminal illnesses are reimbursed.
- 2. a physician must order hospice to be reimbursed.
- 3. to receive reimbursement that client must be eligible for Medicare.
- to receive benefits, the physician must certify that the client has a limited life expectancy of 6 months or less.

ANS: 4

The Medicare hospice benefit is a reimbursement benefit for those with a prognosis of 6 months or less to live (certified by a physician). The act does not mandate reimbursement to clients with terminal illnesses, physicians do not have to order hospice for reimbursement, nor does a client have to be eligible for Medicare for hospice eligibility.

PTS: 1 DIF: Analyze REF: History and Overview of Hospice Care

2. After a Native American client has died, the family begins the practice of purifying the body. The nurse realizes that the deceased client may stay with the family for what period of time?

1.	12 hours
2.	24 hours

3.	36 hours
4.	48 hours

Native Americans believe that the soul departs from the body 36 hours after death. The family may want the body to remain at the place of death for this period. The other choices are incorrect lengths of time according to Native American culture.

PTS:1DIF:Analyze

REF: Table 7-1 Cultural Considerations Related to Dying

3.A client is receiving care for symptoms; however, the treatment will not alter the course of the disease. This client is receiving which type of care?

1.	Hospital-based
2.	Managed
3.	Palliative
4.	Therapeutic

ANS: 3

Palliative care, or comfort care, is directed at providing relief to a terminally ill client through symptom and pain relief. The goal is not curative. Care for symptoms that will not alter the course of the disease does not need to be provided in the hospital. Managed care is guided through the direction of a primary care physician. Therapeutic is a type of care that focuses on a specific treatment for a health problem.

PTS: 1 DIF: Analyze REF: Overview of Palliative Care

4.A client diagnosed with a terminal illness is receiving an opioid/acetaminophen combination for pain control. The nurse realizes this client is being managed at which step of the World Health Organization approach to pain management?

1.	Step 1
2.	Step 2

3. Step 3
4. Step 4

ANS: 2

The World Health Organization approach to pain management involves three steps. Step 1: Clients are treated with around-the-clock doses of nonopioids. Step 2: The use of opioid/acetaminophen combinations are used to treat mild to moderate pain. Step 3: Strong opioids are used. There is no Step 4 in the World Health Organizations approach to pain management.

PTS:1DIF:Analyze

REF: Figure 7-2 Conceptual Model of Ladder Approach to Pain Management

5.A dying client is surrounded by family and friends at home. The hospice nurse talks with the spouse of the dying client to ensure that everything the family needs during this time is being done. The nurse is providing support to:

- the client.
 the bereaved.
 ensure compliance with the hospice rules and regulations.
 - 4. determine if the spouse understands that the client is dying.

ANS: 2

Supporting the familys rituals and cultural practices gives structure to support the bereaved through this painful process when people are vulnerable and feel off balance. The nurse is not providing support to the client. The nurse is not providing support to ensure compliance with the hospice rules and regulations. The nurse is also not providing support to determine if the spouse understands that the client is dying.

PTS: 1 DIF: Analyze REF: Role of the Hospice and Palliative Care Nurse

6.A client of the Hispanic culture is nearing death and the family requests that the client be prepared for discharge. The nurse realizes that the reason the family and client want to return home is because:

- 1. individuals within this culture do not trust hospital caregivers.
- 2. the family wants to have a spiritual healer care for the client.
- 3. it is bad luck to die in the hospital.
- 4. the spirit may get lost if the client dies in the hospital, and it will not be able to find its way home.

Within the Hispanic culture, the client and family may not want to die in the hospital because the spirit may get lost and will not be able to find its way home. The reason the family and client want to return home is not because of a distrust of hospital caregivers. The family may want to have a spiritual healer conduct a ceremony for the client, but this does not need to be done in the home. Members of the Hispanic culture do not believe that it is bad luck to die in the hospital.

PTS:1DIF:Analyze

REF: Table 7-1 Cultural Considerations Related to Dying

7.During the period of time when a client diagnosed with a terminal illness became comatose, a health care proxy made decisions about the clients care. When the client regained consciousness a few days later, the nurse consulted whom regarding the clients ongoing care decisions?

1.	The client
2.	The health care proxy
3.	The clients family
4.	The clients physician

ANS: 1

A health care proxy is in effect whenever the client is unable to communicate and ceases to be in effect as soon as the client regains decision-making capacity. The nurse should consult with the client regarding the clients ongoing care decisions. The nurse should not consult with the health care proxy, the family, or the physician.

PTS:1DIF:Apply

REF: Ethics in Practice: Legal and Ethical Considerations Related to Dying

8. The nurse is concerned that the spouse of a terminally ill client is experiencing Anticipatory Grieving when which of the following is assessed?

- 1. Confidence in the ability to care for the ill client at home
- 2. Expressing anger about the clients pending death and crying throughout the day
- 3. Large social support system
- 4. Knowledge of equipment function

ANS: 2

Anticipatory grieving is the intellectual and emotional responses and behaviors by which individuals work through the process of modifying self-concept based on the perception of potential loss. Anger and crying about the clients pending death are signs of Anticipatory Grieving. The other assessment findings are evidence that the spouse is accepting the caregiver role.

PTS:1DIF:AnalyzeREF:Nursing Diagnoses

9. The nurse administers additional intravenous medication to a hospice client with uncontrollable pain. After receiving the additional medication, the client demonstrates apneic periods and bradycardia. Which of the following does this nurses actions suggest?

1.		Euthanasia
2.		Assisted suicide
3.	No.	Double effect
4.	N	Malpractice

ANS: 3

The principle of double effect means that increasing the dose of medication to achieve pain control, even if death is hastened, is ethically justified. Euthanasia is the administration of medication to purposefully cause anothers death. Assisted suicide is the practice of providing medication to a client with the intent that the client use the medication to voluntarily commit suicide. Malpractice is conducting some aspect of care that causes a client harm.

PTS:1DIF:AnalyzeREF:Managing Pain