

MULTIPLE CHOICE

1. A married couple lives in a single-family house with their newborn son and the husband's daughter from a previous marriage. Based on the information given, what family form best describes this family?
 - a. Married-blended family
 - b. Extended family
 - c. Nuclear family
 - d. Same-sex family

ANS: A

Married-blended families are formed as the result of divorce and remarriage. Unrelated family members join to create a new household.

Members of an extended family are kin or family members related by blood, such as grandparents, aunts, and uncles.

A nuclear family is a traditional family with male and female partners along with the children resulting from that union.

A same-sex family is a family with homosexual partners who cohabit with or without children.

DIF: Cognitive Level: Knowledge REF: 18

OBJ: Client Needs: Psychosocial Integrity

TOP: Nursing Process: Assessment

2. The nurse should be aware that the criteria used to make decisions and solve problems within families are based primarily on family:
 - a. Rituals and customs
 - b. Values and beliefs
 - c. Boundaries and channels
 - d. Socialization processes

ANS: B

Values and beliefs are the most prevalent factors in the decision-making and problem-solving techniques of families.

Although culture may play a part in the decision-making process of a family, ultimately values and beliefs dictate the course of action taken by family members.

Boundaries and channels affect the relationship between the family members and the health care team, not the decisions within the family.

Socialization processes may help families with interactions within the community, but they are not the criteria used for decision making within the family.

DIF: Cognitive Level: Comprehension REF: 18

OBJ: Client Needs: Psychosocial Integrity

TOP: Nursing Process: Planning

3. Using the family stress theory as an intervention approach for working with families experiencing parenting, the nurse can help the family change internal context factors. These include:

- a. Biologic and genetic makeup
- b. Maturation of family members
- c. The family's perception of the event
- d. The prevailing cultural beliefs of society

ANS: C

The family stress theory is concerned with the family's reaction to stressful events; internal context factors include elements that a family can control such as psychologic defenses.

The family stress theory is focused on ways that families react to stressful events.

Maturation of family members is more relevant to the family life cycle theory.

The family stress theory focuses on internal elements that a family might be able to alter.

DIF: Cognitive Level: Comprehension REF: 20

OBJ: Client Needs: Psychosocial Integrity

TOP: Nursing Process: Diagnosis

4. The nurse's care of a Hispanic family includes teaching about infant care. When developing a plan of care, the nurse bases interventions on the knowledge that in traditional Hispanic families:
- a. Breastfeeding is encouraged immediately after birth
 - b. Male infants typically are circumcised
 - c. The maternal grandmother participates in the care of the mother and her infant
 - d. Special herbs mixed in water are used to stimulate the passage of meconium

ANS: C

In the Hispanic family, the expectant mother is influenced strongly by her mother or mother-in-law.

Breastfeeding often is delayed until the third postpartum day.

Hispanic male infants usually are not circumcised.

Olive or castor oil may be given to stimulate the passage of meconium.

DIF: Cognitive Level: Application REF: 26

OBJ: Client Needs: Psychosocial Integrity

TOP: Nursing Process: Planning

5. Which health care service represents the primary level of prevention?
- a. Immunizations
 - b. Breast self-examination
 - c. Home care for high risk pregnancies
 - d. Blood pressure screening

ANS: A

Primary prevention involves health promotion and disease prevention activities to reduce the occurrence of illness and enhance general health and quality of life. This includes, for example, immunizations, using infant car seats, and health education to prevent tobacco use. Breast self-examination is an example of secondary prevention that involves early detection of health problems.

Home care for a high risk pregnancy is an example of tertiary prevention. This level of care follows the occurrence of a defect or disability.

Blood pressure screening is an example of secondary prevention. It is a screening tool for early detection of a health care problem.

DIF: Cognitive Level: Comprehension REF: 28

OBJ: Client Needs: Health Promotion and Maintenance

TOP: Nursing Process: Implementation

6. What is the primary difference between hospital care and home health care?
- Home care is routinely delivered continuously by professional staff.
 - Home care is delivered on an intermittent basis by professional staff.
 - Home care is delivered for emergency conditions.
 - Home care is not available 24 hours a day.

ANS: B

Home care generally is delivered on an intermittent basis by professional staff.

The primary difference between health care in a hospital and home care is the absence of the continuous presence of professional health care providers in a client's home.

In a true emergency the client should be directed to call 911 or report to the nearest hospital's emergency department.

Generally, home health care entails intermittent care by a professional who visits the client's home for a particular reason and provides care on site for periods shorter than 4 hours at a time.

DIF: Cognitive Level: Comprehension REF: 35

OBJ: Client Needs: Safe and Effective Care Environment

TOP: Nursing Process: Implementation

7. To provide competent care to an Asian-American family, the nurse should include the following question during the assessment interview:
- "Do you prefer hot or cold beverages?"
 - "Do you want some milk to drink?"
 - "Do you want music playing while you are in labor?"
 - "Do you have a name selected for the baby?"

ANS: A

Asian-Americans often prefer warm beverages.

Milk usually is excluded from the diet of this population.

Asian-American women typically labor in quiet.

Delaying naming the child is not uncommon for Asian-American families.

DIF: Cognitive Level: Application REF: 26

OBJ: Client Needs: Physiologic Integrity

TOP: Nursing Process: Assessment

8. The woman's family members are present when the nurse arrives for a postpartum and newborn visit. What should the nurse do?
- Observe the family members' interactions with the newborn and one another.
 - Ask the woman to meet with her and the baby alone.
 - Do a brief assessment on all family members present.
 - Reschedule the visit for another time so that the mother and infant can be assessed privately.

ANS: A

The nurse should introduce herself to the client and to the other family members present.

Family members in the home may be providing care and assistance to the mother and infant. However, this care may not be based on sound health practices. Nurses should take the opportunity to dispel myths while family members are present. The responsibility of the home care maternal-child nurse is to provide care to the new postpartum mother and her infant, not to all family members. The nurse can politely ask about the other people in the home and their relationships with the woman. Unless an indication is given that the woman would prefer privacy, the visit may continue.

DIF: Cognitive Level: Analysis REF: 37

OBJ: Client Needs: Psychosocial Integrity

TOP: Nursing Process: Assessment

9. What is a limitation of a home postpartum visit?
- The nurse's ability to teach is limited by many distractions.
 - Identified problems cannot be resolved in the home setting.
 - Necessary items for infant care are not available.
 - Home visits to different families may require the nurse to travel a great distance.

ANS: D

One limitation of home health visits is the distance the nurse must travel between clients.

Driving directions should be obtained by telephone prior to the visit.

The home care nurse is accustomed to distractions but may request that the TV be turned off so attention can be focused on the client and her family.

Problems cannot always be resolved; however, appropriate referrals may be arranged by the nurse.

The nurse is required to bring any necessary equipment such as a thermometer, baby scale, or laptop computer for documentation.

DIF: Cognitive Level: Comprehension REF: 35

OBJ: Client Needs: Safe and Effective Care Environment TOP: Nursing Process: Planning

10. The nurse should be aware that during the childbearing experience, an African-American woman will most likely:
- Seek prenatal care early in her pregnancy
 - Avoid self-treatment of pregnancy-related discomfort
 - Request liver in the postpartum period to prevent anemia
 - Arrive at the hospital in advanced labor

ANS: D

African-American women often arrive at the hospital in far-advanced labor.

African-American women may view pregnancy as a state of wellness, which is often the reason for delay in seeking prenatal care.

African-American women practice many self-treatment options for various discomforts of pregnancy.

African-American women may request liver in the postpartum period, but this is based on a belief that liver has a higher blood content.

DIF: Cognitive Level: Comprehension REF: 26

OBJ: Client Needs: Health Promotion and Maintenance

TOP: Nursing Process: Assessment

11. A health care service representing the tertiary level of prevention includes:
- Stress management seminars
 - Childbirth education classes for single parents
 - A breast self-examination (BSE) pamphlet and teaching
 - A premenstrual syndrome (PMS) support group

ANS: D

A PMS support group is an example of tertiary prevention, which follows the occurrence of a defect or disability (e.g., PMS).

Stress management seminars are a primary prevention technique for preventing health care issues associated with stress.

Childbirth education is a form of primary prevention.

BSE information is a form of secondary prevention, which is geared toward early detection of health problems.

DIF: Cognitive Level: Comprehension REF: 28

OBJ: Client Needs: Psychosocial Integrity

TOP: Nursing Process: Implementation

12. Which area is appropriate to include in a physical assessment of the home?
- Bathtub, toilets, sinks, countertops, inside china cabinet drawers
 - Baby's bed, changing table, baby's clothes, inside diaper bag, inside keepsake box
 - Bedroom closets, inside jewelry boxes, under beds
 - Electrical wall outlets, telephones, bathroom sink and faucets, stove, and refrigerator

ANS: D

Physical assessment of the home environment is an essential element of the home care assessment. The major areas of the home environment assessment include physical features of the home, access to the home, sanitary conditions, the presence of utilities (phone, electricity, plumbing), safety features, and access to transportation and emergency support.

The nurse may evaluate sanitary conditions and cleanliness of the bathroom; however, there is no reason to check inside the china cabinet.

Although the nurse may want to evaluate the nursery, it is inappropriate to request to see the inside of the infant's keepsake box.

The purpose of a physical assessment of the home is to assess safety issues, such as sanitary conditions and the presence of utilities, not to account for the client's possessions or to look inside drawers.

DIF: Cognitive Level: Application REF: 37

OBJ: Client Needs: Safe and Effective Care Environment

TOP: Nursing Process: Assessment

13. When the services of an interpreter are used, it is important for the nurse to:
- Use any family member who can interpret
 - Use an interpreter who is certified and document the person's name in the nursing notes
 - Speak only to the interpreter
 - Use an interpreter only in an emergency

ANS: B

Using a certified interpreter ensures that standards of care are met and that the information exchanged is reliable and unaltered. The name of the interpreter should be documented for legal purposes.

Although many health care personnel adopt this approach in an emergency, asking some family members to interpret may not be appropriate. Furthermore, most states require that certified interpreters be used when possible.

When using an interpreter the nurse should direct questions to the client. The interpreter is merely a means by which the nurse communicates with the client.

Every attempt should be made to contact an interpreter whenever one is needed. During an emergency, health care workers often rely on information interpreted by family members. This information may be private and should be protected under rules established by the Health Insurance Portability and Accountability Act (HIPAA). Furthermore, family members may skew information or may not be able to interpret the exact information the nurse is trying to obtain.

DIF: Cognitive Level: Application REF: 24

OBJ: Client Needs: Psychosocial Integrity

TOP: Nursing Process: Implementation

14. A traditional family structure in which male and female partners and their children live as an independent unit is known as a/an:
- Extended family
 - Binuclear family
 - Nuclear family
 - Blended family

ANS: C

About two thirds of U.S. households meet the definition of a nuclear family.

Extended families need additional blood relatives other than the parents.

A binuclear family involves two households.

A blended family is reconstructed after divorce and involves the merger of two families.

DIF: Cognitive Level: Knowledge REF: 18

OBJ: Client Needs: Psychosocial Integrity

TOP: Nursing Process: Assessment

15. According to Friedman's classifications, providing such physical necessities as food, clothing, and shelter is the:
- Economic family function
 - Socialization family function
 - Reproductive family function
 - Health care family function

ANS: D

Health care is considered part of such physical necessities as food, clothing, and shelter.

The economic function provides resources but is not concerned with health care and other basic necessities.

The socialization function teaches the child cultural values.

The reproductive function is concerned with ensuring family continuity.

DIF: Cognitive Level: Application REF: 22

OBJ: Client Needs: Physiologic Integrity

TOP: Nursing Process: Assessment

16. Which statement about family systems theory is inaccurate?
- A family system is part of a larger suprasystem.
 - A family as a whole is equal to the sum of the individual members.
 - A change in one family member affects all family members.
 - A family is able to create a balance between change and stability.

ANS: B

A family as a whole is greater than the sum of its parts.

A family system that is part of a larger suprasystem is characteristic of a system that states that a family is greater than the sum of its parts.

A change in one family member that affects all family members is characteristic of a system that states that a family is greater than the sum of its parts.

A family that is able to create a balance between change and stability is characteristic of a system that states that a family is greater than the sum of its parts.

DIF: Cognitive Level: Comprehension REF: 20

OBJ: Client Needs: Psychosocial Integrity

TOP: Nursing Process: Assessment

17. Which situation would be considered safest by a nurse who is making a home visit?
- A group of teens is sitting on the stairs in front of the client's apartment.
 - Parking is only possible 3 blocks from the client's house because no space is available in front of the house.
 - The family dog is on a chain in the front yard.
 - The door of the home is open when the nurse arrives.

ANS: C

Home care nurses should not enter a yard that has an unrestrained dog.

While walking to the client's home, nurses should not walk near groups of strangers who are in doorways or alleys.

Home care nurses should park and lock their cars in a safe place that is visible from the street and the client's home.

The home should not be entered if the nurse has any safety concerns, such as an open front door.

DIF: Cognitive Level: Analysis REF: 40

OBJ: Client Needs: Safe and Effective Care Environment

TOP: Nursing Process: Evaluation

18. A pictorial tool that can assist the nurse in assessing aspects of family life related to health care is the:
- Genogram
 - Family values construct
 - Life cycle model
 - Human development wheel

ANS: A

A genogram depicts the relationships of family members over generations.

The family values construct outlines values, rather than the relationship of family members.

The life cycle model in no way illustrates a family genogram. This model focuses on stages that a person reaches throughout life.

The human development wheel describes various stages of growth and development rather than a family's relationships to each other.

DIF: Cognitive Level: Knowledge REF: 21

OBJ: Client Needs: Psychosocial Integrity

TOP: Nursing Process: Assessment

19. When attempting to communicate with a client who speaks a different language, the nurse should:
- Respond promptly and positively to project authority
 - Never use a family member as an interpreter
 - Talk to the interpreter to avoid confusing the client
 - Provide as much privacy as possible

ANS: D

Providing privacy creates an atmosphere of respect and puts the client at ease.

The nurse should not rush to judgment and should make sure she or he understands the client's message clearly.

In crisis situations the nurse may need to use a family member or neighbor as a translator.

The nurse should talk directly to the client to create an atmosphere of respect.

DIF: Cognitive Level: Application REF: 25

OBJ: Client Needs: Psychosocial Integrity

TOP: Nursing Process: Implementation

20. Providing various methods of health screening for early detection of disease is part of:
- Primary preventive care
 - Secondary preventive care
 - Tertiary preventive care
 - Primordial preventive care

ANS: B

Health screening for early detection of health problems is part of secondary preventive care.

Primary prevention involves promoting healthy lifestyles.

Tertiary care focuses on achieving optimal health for someone already afflicted with a condition.

Primordial prevention is directed at the level of causality rather than health screening.

DIF: Cognitive Level: Comprehension REF: 28

OBJ: Client Needs: Health Promotion and Maintenance

TOP: Nursing Process: Planning

21. To assist the client in optimizing healthy outcomes, the nurse must understand that the perinatal continuum of care:
- Begins with conception and ends with birth
 - Begins with family planning and continues until the infant is 1 year old
 - Begins with prenatal care and continues until the newborn is 24 weeks old
 - Refers to home care only

ANS: B

The perinatal continuum of care begins with family planning and continues until the infant is 1 year old. It takes place both at home and in health care facilities.

The perinatal continuum does not end with birth.

The perinatal continuum begins before conception and continues after birth.

Home care is one delivery component; health care facilities are another. The continuum runs from family planning until the infant is 1 year old.

DIF: Cognitive Level: Knowledge REF: 17 | 18

OBJ: Client Needs: Health Promotion and Maintenance

TOP: Nursing Process: Planning

22. The nurse should be aware that the well-known program “warm lines”:
- Was developed as a reaction to impersonal telephonic nursing care
 - Was set up to take complaints about health maintenance organizations (HMOs)
 - Is the second option when 911 hotlines are busy
 - Refers to community service telephone lines designed to provide new parents with encouragement and basic information

ANS: D

Warm lines are one aspect of telephonic nursing specifically designed to provide new parents with encouragement and basic information.

Warm lines are part of telephonic nursing care; they are designed to provide new parents with encouragement and basic information.

Warm lines and similar services sometimes are set up by HMOs to provide new parents with encouragement and basic information.

The name “warm lines” may have been suggested by the term *hotlines*, but these are not emergency numbers. They are designed to provide new parents with encouragement and basic information.

DIF: Cognitive Level: Knowledge REF: 34

OBJ: Client Needs: Health Promotion and Maintenance

TOP: Nursing Process: Assessment

23. When weighing the advantages and disadvantages of home care for perinatal services, nurses should keep in mind that home care:
- Is more dangerous for vulnerable neonates at risk of acquiring an infection from the nurse
 - Is more cost-effective for the nurse than office visits
 - Allows the nurse to interact with and include family members in teaching
 - Is made possible by the ready supply of nurses with expertise in maternity care

ANS: C

Treating the whole family is an advantage of home care.

Making neonates go out in weather and in public is more risky.

Office visits are more cost-effective for providers such as nurses because less travel time is involved.

Unfortunately, home care options are limited by the lack of nurses with expertise in maternity care.

DIF: Cognitive Level: Application REF: 35

OBJ: Client Needs: Psychosocial Integrity

TOP: Nursing Process: Implementation

24. *Healthy People 2010* has established national health priorities that focus on a number of maternal-child health indicators. Nurses are assuming greater roles in assessing family health and providing care across the perinatal continuum. Therefore, it is important for the nurse to be aware that significant progress has been made in:
- The reduction of fetal deaths and use of prenatal care
 - Low birth weight and preterm birth
 - Elimination of health disparities based on race
 - Infant mortality and the prevention of birth defects

ANS: A

Trends in maternal child health indicate that progress has been made in relation to reduced infant and fetal deaths and increased prenatal care.

Notable gaps remain in the rates of low birth weight and preterm births.

According to the March of Dimes, persistent disparities still exist between African-Americans and non-Hispanic Caucasians.

Many of these negative outcomes are preventable through access to prenatal care and the use of preventive health practices. This demonstrates the need for comprehensive community-based care for all mothers, infants, and families.

DIF: Cognitive Level: Knowledge REF: 17

OBJ: Client Needs: Health Promotion and Maintenance

TOP: Nursing Process: Assessment

25. A nurse is planning care for a client with a different cultural background. What is an appropriate goal?
- Strive to keep the client's cultural background from influencing health needs.
 - Encourage the continuation of cultural practices in the hospital setting.
 - In a nonjudgmental way attempt to change the client's cultural beliefs.
 - As necessary adapt the client's cultural practices to her health needs.

ANS: D

Whenever possible, the nurse should facilitate the integration of cultural practices into health needs.

The cultural background is part of the individual. It would be very difficult to eliminate

The cultural practices need to be evaluated within the context of the health care setting to determine if they are conflicting.

It is not appropriate to attempt to change someone's cultural practices.

DIF: Cognitive Level: Application REF: 27 | 28

OBJ: Client Needs: Psychosocial Integrity

TOP: Nursing Process: Planning

MULTIPLE RESPONSE

- While completing an assessment, the nurse should be aware of ailments for which homeless women are at higher risk. Choose all that apply.
 - Tuberculosis
 - Chlamydia
 - Anemia
 - Hypothermia

e. Alcoholism

ANS: A, B, C, D, E

Poor living conditions contribute to higher rates of infectious disease. Many homeless individuals engage in sexual favors, which may expose them to sexually transmitted infections (STIs). Poor nutrition can lead to anemia. Exposure to cold temperatures and harsh environmental surroundings may lead to hypothermia. Many homeless people turn to alcohol as a coping mechanism.

DIF: Cognitive Level: Analysis

REF: 33

OBJ: Client Needs: Safe and Effective Care Environment

TOP: Nursing Process: Assessment

COMPLETION

1. _____ refers to the view that one's own cultures way of doing things is always the best.

ANS:

Ethnocentrism

Although the United States is a culturally diverse nation, the prevailing practice of health care is based on the beliefs held by members of the dominant culture, primarily Caucasians of European descent. Cultural relativism is the opposite of ethnocentrism. It refers to learning about and applying the standard's of another's culture.

DIF: Cognitive Level: Knowledge

REF: 21 | 23

OBJ: Client Needs: Psychosocial Integrity

TOP: Nursing Process: Assessment