Test Bank for Medical-Surgical Nursing 7th Edition by Linton

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Nursing



Test Bank

Chapter 02: Medical-Surgical Practice Settings Linton: Medical-Surgical Nursing, 7th Edition

MULTIPLE CHOICE

- 1. While a home health nurse is making the entry to a service assessment on a homebound patient, the spouse of the patient asks whether Medicare will cover the patient's ventilator therapy and insulin injections. What is the best response by the nurse?
 - a. "Yes, Medicare will cover both the ventilator therapy and the insulin injections."
 - b. "No, Medicare will not cover either of these ongoing therapies."
 - c. "Medicare will cover the ventilator therapy, but it does not cover the insulin injections."
 - d. "Medicare will cover the ongoing insulin therapy, but it does not cover a highly technical skill such as ventilator therapy."

ANS: C

Medicare will cover skilled nursing tasks such as ventilator therapy, but common tasks that can be taught to the family or the patient are not covered.

DIF: Cognitive Level: Application REF: pp. 12-13 OBJ: 3 | 4

TOP: Medicare Coverage for Home Health KEY: Nursing Process Step: Implementation

MSC: NCLEX: Safe, Effective Care Environment: Coordinated Care

- 2. The wife of a patient asks the nurse whether her husband would be considered for placement in a skilled nursing care facility when he is discharged from the general hospital. The patient is incontinent, has mild dementia but is able to ambulate with a walker, and must have help to eat and dress himself. What is the nurse's most appropriate response?
 - a. "Yes, your husband would qualify for a skilled care facility because of his inability to feed and dress himself."
 - b. "No, your husband's disabilities would not qualify him for a skilled facility."
 - c. "Yes, your husband qualifies for placement in a skilled care facility because of his dementia."
 - d. "Yes, anyone who is willing to pay can be placed in a skilled nursing facility."

ANS: B

Placement in a skilled nursing facility must be authorized by a physician. A clear need for rehabilitation must be evident, or severe deficits in self-care that have a potential for improvement and require the services of a registered nurse, a physical therapist, or a speech therapist must exist.

DIF: Cognitive Level: Analysis REF: p. 13 OBJ: 6

TOP: Placement Qualifications for Skilled Nursing Facility

KEY: Nursing Process Step: Implementation

MSC: NCLEX: Safe, Effective Care Environment

- 3. A nurse has noted that a newly admitted resident to an extended care facility stays in her room, does not take active part in activities, and leaves the meal table after having eaten very little. The nurse should analyze this relocation response as
 - a. regression.

- b. social withdrawal.
- c. depersonalization.
- d. passive aggressive.

ANS: B

Social withdrawal is a frequent response to relocation.

DIF: Cognitive Level: Application REF: p. 21 OBJ: 10

TOP: Relocation Response KEY: Nursing Process Step: Assessment

MSC: NCLEX: Psychosocial Integrity: Coping and Adaptation

- 4. A nurse clarifies to a new patient in a rehabilitation center what rehabilitation means. What statement made by the patient indicates a correct understanding?
 - a. "I will return to my previous level of functioning."
 - b. "I will be counseled into a new career."
 - c. "I will develop better coping skills to accept his disability."
 - d. "I will attain the greatest degree of independence possible."

ANS: D

The rehabilitation process works to promote independence at whatever level the patient is capable of achieving.

DIF: Cognitive Level: Comprehension REF: p. 15 OBJ: 7

TOP: Rehabilitation Goals KEY: Nursing Process Step: Implementation

MSC: NCLEX: Health Promotion and Maintenance: Coordinated Care

- 5. A nurse assesses a patient who needs to be reminded to take premeasured oral medications, wash, go to meals, and undress and come to bed at night, but coming and going as he pleases is considered safe for him. What facility placement would be most appropriate for this patient?
 - a. Skilled care
 - b. Intermediate care
 - c. Sheltered housing
 - d. Domiciliary care

ANS: D

Domiciliary care provides room, board, and supervision, and residents may come and go as they please. Sheltered housing does not provide 24-hour care.

DIF: Cognitive Level: Comprehension REF: p. 19 OBJ: 3 | 9

TOP: "Levels of Care, Criteria for Domiciliary Residence"

KEY: Nursing Process Step: Assessment

- 6. A nurse is making a list of the members of the rehabilitation team, so the different types of services available to patients may be taught to a group of families. Which lists should be used?
 - a. Physical therapist, nurse, family members, and personal physician
 - b. Occupational therapist, dietitian, nurse, and patient
 - c. Rehabilitation physician, laboratory technician, patient, and family
 - d. Vocational rehabilitation specialist, patient, and psychiatrist

ANS: A

The rehabilitation team usually consists of all of the choices except the laboratory technician, dietitian, and psychiatrist. (The mental health role is represented by the psychologist.)

DIF: Cognitive Level: Comprehension REF: p. 17 OBJ: 7

TOP: Rehabilitation Team Members KEY: Nursing Process Step: Planning

MSC: NCLEX: Safe, Effective Care Environment: Coordinated Care

- 7. A nurse explains the level of disability to a patient who was injured in a construction accident that resulted in the loss of both his right arm and right leg. This loss has affected his quality of life and ability to return to previous employment. At what level should the client be classified as being disabled?
 - a. I
 - b. II
 - c. III
 - d. IV

ANS: B

The patient is limited in the use of his right arm for feeding himself, dressing himself, and driving his car, which are three main activities of daily living. He may be able to work if workplace modifications are made.

DIF: Cognitive Level: Application REF: p. 15 OBJ: 8

TOP: Levels of Disability KEY: Nursing Process Step: Implementation

MSC: NCLEX: Safe, Effective Care Environment: Coordinated Care

- 8. A nurse explains that in 1990, the Americans with Disabilities Act (ADA) was passed. For which extended services for the disabled persons did this act provide?
 - a. Covering the costs for the rehabilitation of disabled World War I servicemen by providing job training
 - b. Extending protection to the disabled in the military sector, such as wheelchair ramps on military bases
 - c. Extending protection to the disabled in private areas, such as accessibility to public restaurant bathrooms and telephones
 - d. Affording disabled persons full access to all health care services

ANS: C

The ADA of 1990 extended the previous legislative Acts of 1920, 1935, and 1973. The ADA now covers private sector individuals and public businesses in particular.

DIF: Cognitive Level: Comprehension REF: p. 16 OBJ: 8

TOP: Americans with Disabilities Act (ADA) of 1990

KEY: Nursing Process Step: Assessment

- 9. A frail patient in a long-term care facility asks the nurse if a bath is to be given this morning. What is the best reply by the nurse to encourage independence and give the patient the most flexibility?
 - a. "Based on your room number, you get bathed on Monday, Wednesday, and Friday. Today is Tuesday."
 - b. "If you want to eat breakfast in the dining room with the others, you may sponge

yourself off in your bathroom."

- c. "When your daughter comes this evening, ask her if she can give you a bath."
- d. "I will bring a basin of water for a sponge off for right now. After breakfast, we will talk about a bath schedule."

ANS: D

The resident should be provided as much flexibility as possible and support for independence.

DIF: Cognitive Level: Application REF: p. 22 OBJ: 11

TOP: Maintenance of Autonomy in Extended Care Facility

KEY: Nursing Process Step: Implementation

MSC: NCLEX Physiological Integrity: Basic Care and Comfort

- 10. A computer programmer who lost both legs is being retained by his employer, who has made arrangements for a ramp and a special desk to accommodate the patient's wheelchair. What is the disability level of the computer programmer?
 - a. I
 - b. II
 - c. III
 - d. IV

ANS: B

Level II allows for workplace accommodation, which is the desk modification in this case.

DIF: Cognitive Level: Analysis REF: p. 15 OBJ: N/A TOP: Reasonable Accommodation KEY: Nursing Process Step: N/A

MSC: NCLEX: N/A

- 11. A partially paralyzed forklift operator is to be retrained by vocational rehabilitation services for less demanding office work. What law provides for this rehabilitation?
 - a. Vocational Rehabilitation Act of 1920
 - b. Social Security Act of 1935
 - c. Rehabilitation Act of 1973
 - d. Americans with Disabilities Act of 1990

ANS: C

The Rehabilitation Act of 1973 provided a comprehensive approach and expanded resources for public vocational training.

DIF: Cognitive Level: Comprehension REF: p. 16 OBJ: 7

TOP: Rehabilitation Legislation KEY: Nursing Process Step: Implementation

MSC: NCLEX: Safe, Effective Care Environment: Coordinated Care

- 12. The home health care nurse performs all the following actions. Which is the only action that is reimbursable under Medicare payment rules?
 - a. Observing a spouse cleaning and changing a dressing
 - b. Taking a frail couple for a walk to provide exercise
 - c. Watching a patient measure out all medications
 - d. Teaching a patient to self-administer insulin

ANS: D

Medicare reimburses skilled techniques that are clearly spelled out; these include teaching but not return demonstration—type actions by patient or family.

DIF: Cognitive Level: Comprehension REF: pp. 12-13 OBJ: 4

TOP: Medicare Reimbursable Actions KEY: Nursing Process Step: Assessment

MSC: NCLEX: Safe, Effective Care Environment: Coordinated Care

- 13. A patient with multiple sclerosis must be fed, bathed, and dressed. How should the nurse assess this patient?
 - a. Disabled
 - b. Disadvantaged
 - c. Handicapped
 - d. Impaired

ANS: D

Feeding oneself, dressing, and bathing are activities of daily living. The patient is impaired in this scenario.

DIF: Cognitive Level: Analysis REF: p. 15 OBJ: 7

TOP: Principles of Rehabilitation | Defining Levels of Loss of Functioning Independently

KEY: Nursing Process Step: Implementation

MSC: NCLEX: Physiological Integrity

- 14. Which law initially provided for rehabilitation of disabled Americans?
 - a. Vocational Rehabilitation Act of 1920
 - b. Social Security Act of 1935
 - c. Rehabilitation Act of 1973
 - d. Americans with Disabilities Act of 1990

ANS: A

The U.S. government has passed four pieces of legislation to identify and meet the needs of disabled individuals with each one being more inclusive. The first one was passed in 1920.

DIF: Cognitive Level: Knowledge REF: p. 16 OBJ: 8
TOP: Rehabilitation Legislation KEY: Nursing Process Step: N/A

MSC: NCLEX: N/A

- 15. A client was admitted to a long-term residential care facility. On what should the admitting nurse tell the family the concepts of long-term care are based?
 - a. Amount of activities the resident can do for herself
 - b. Maintenance care with an emphasis on incontinence
 - c. Successful adaptation to the regulations of the home
 - d. Maintenance of as much function as possible

ANS: D

Maintenance of function and encouraging autonomy and independence are some of the basic concepts of long-term care.

DIF: Cognitive Level: Comprehension REF: p. 18 OBJ: 11

TOP: Principles of Nursing Home Care KEY: Nursing Process Step: Implementation

- 16. A 58-year-old patient with diabetes is recuperating from a broken hip and is concerned about how to pay for rehabilitation. The nurse should inform this patient that funds for rehabilitation are available from which resource?
 - a. Vocational Rehabilitation Act of 1920
 - b. Rehabilitation Act of 1973
 - c. Disabled American Veterans Act of 1990
 - d. Title V, Health of Crippled Americans 1935

ANS: B

The Rehabilitation Act of 1973 assists in paying for rehabilitation for those who are younger than 65 years of age and who will benefit from vocational rehabilitation through teaching.

DIF: Cognitive Level: Comprehension REF: p. 16 OBJ: 8

TOP: Legislation for Funding Health Care

KEY: Nursing Process Step: Planning

MSC: NCLEX: Safe, Effective Care Environment: Coordinated Care

- 17. What is an example of a description of community health nursing?
 - a. Visiting patients in their homes after hospital discharge to assess their personal health status
 - b. Asking a nursing assistant (NA) to identify the health services most needed in the patient's personal life
 - c. Meeting with residents of low-income housing to identify their health care needs
 - d. Developing a hospital-based home health care service

ANS: C

Whereas community-based nursing looks at identified community needs and provides care at all levels of wellness and illness, community health nursing seeks to provide services to groups to modify or create systems of care.

DIF: Cognitive Level: Comprehension REF: pp. 10-11 OBJ: 2

TOP: Defining Community-Based Nursing versus Community Health Nursing

KEY: Nursing Process Step: Implementation

MSC: NCLEX: Health Promotion and Maintenance: Coordinated Care

- 18. Home health nurses have some different nursing activities than those of community health nurses. Which statement best describes the home health nurse's activities?
 - a. Conducting health education classes in a senior citizens' common residence building
 - b. Conducting blood pressure screening on a regular basis at a local mall
 - c. Visiting and assessing the home care and further teaching needs of a patient who has been recently discharged from the hospital
 - d. Acting as a nurse consultant to a chronic psychiatric section in a state institution

ANS: C

The home health nurse works with individuals in the home; the other descriptors are community nurse activities.

DIF: Cognitive Level: Comprehension REF: p. 13 OBJ: 1 | 5

TOP: Activities of the Home Health Nurse

KEY: Nursing Process Step: Implementation

- 19. Based on guidelines from the Americans with Disability Act (ADA), which question is an appropriate choice for the director of nurses to ask a nurse with an artificial leg who is applying for a staff position in an extended care facility?
 - a. "How long have you had your prosthesis?"
 - b. "How many flights of stairs are you able to climb without assistance?"
 - c. "Are you able to lift a load of 45 lb?"
 - d. "Has your disability caused you to miss work?"

ANS: C

Queries to disabled job applicants can be made relative to specific job functions, but they cannot be asked relative to the severity of the disability or the degree of disability in general.

DIF: Cognitive Level: Application REF: p. 16 OBJ: 7 | 8

TOP: ADA KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

- 20. A nurse reminds a resident in a long-term care facility that he has autonomy in many aspects of his institutionalization. What is an example of autonomy?
 - a. Selection of medication times
 - b. Availability of his own small electrical appliances
 - c. Smoking in the privacy of his own room
 - d. Application of advance directives

ANS: D

The application of advance directives is an autonomous decision. Agency protocols relative to medication times, access to private electrical devices, and smoking are rarely waived; these policies are not in the control of the resident.

DIF: Cognitive Level: Comprehension REF: p. 22 OBJ: 10

TOP: Autonomy KEY: Nursing Process Step: Implementation MSC: NCLEX: Psychosocial Integrity: Coping and Adaptation

MULTIPLE RESPONSE

- 1. What care skills are safe and appropriate for the licensed practical nurse (LPN) to teach family members in the home health care setting? (*Select all that apply*.)
 - a. Insulin injection
 - b. Sterile dressing changes
 - c. Venipunctures
 - d. Periodic Foley catheter insertions
 - e. Instillation of eye drops
 - f. Changing dressings on small wounds

ANS: A, E, F

Insulin injections, instillation of eye drops, and small wound dressing changes are safe to teach a nonprofessional caregiver. Sterile dressings, venipunctures, and inserting Foley catheters are considered skilled, and the costs for these are reimbursed by Medicare.

DIF: Cognitive Level: Comprehension REF: p. 13 OBJ: 3

TOP: Skills Taught by Home Health Nurse

KEY: Nursing Process Step: Planning

MSC: NCLEX: Safe, Effective Care Environment: Safety and Infection Control

- 2. The nursing care plan in a long-term care facility calls for the documentation of regressive behavior of a newly admitted 82-year-old resident who has had congestive heart failure and osteoarthritis. Of these behaviors observed by the nurse, which should be documented as regression? (*Select all that apply*.)
 - a. Talks nonstop to staff and other residents.
 - b. Wets and soils self several times a day.
 - c. Wakes in the middle of the night and is unable to return to sleep.
 - d. Wears the same clothes day after day.
 - e. Cries frequently for no apparent reason.

ANS: B, D, E

Behaviors that are infantile or immature in the absence of dementia are considered regressive. Frequent episodes of crying and inattention to personal hygiene are regressive in nature. Excessive talking and wakefulness may be related to relocation anxiety, but they are not considered regressive.

DIF: Cognitive Level: Analysis REF: pp. 20-21 OBJ: 10

TOP: Impact of Relocation KEY: Nursing Process Step: Assessment

MSC: NCLEX: Psychosocial Integrity: Coping and Adaptation

- 3. From what do most quality-of-care problems in home health care result? (*Select all that apply*.)
 - a. Patient's noncompliance
 - b. Family's reluctance to participate in the care
 - c. Inadequate documentation
 - d. Limited funding
 - e. Defective communication among care team members

ANS: C, E

Inadequate communication and incomplete documentation create most of the quality-of-care problems.

DIF: Cognitive Level: Comprehension REF: pp. 11-12 OBJ: 2

TOP: Communication in Home Health Setting KEY: Nursing Process Step: Implementation

MSC: NCLEX: Safe, Effective Care Environment: Coordinated Care

- 4. An 80-year-old man is newly admitted to a long-term care facility and suddenly becomes incontinent of urine at night. What nursing interventions should be used to help restore self-toileting? (*Select all that apply*.)
 - a. Waking the resident every 2 hours and escorting him to the bathroom
 - b. Leaving a night-light on
 - c. Discouraging the use of long-legged pajama bottoms
 - d. Placing a urinal at the bedside
 - e. Keeping the room uncluttered

ANS: B, C, D, E

Providing light in an uncluttered room, encouraging clothing that does not impede self-toileting, and making the urinal available increase independence and alleviate situations that make self-toileting difficult. Waking a resident not only disturbs his or her rest, but doing so also increases dependency on the staff.

DIF: Cognitive Level: Application REF: pp. 11-12 OBJ: 10 | 11

TOP: Independence in Long-Term Care Center

KEY: Nursing Process Step: Planning

MSC: NCLEX: Physiological Integrity: Physiological Adaptation

COMPLETION

	The nurse clarifies that an impairment that creates a measurable diminished capacity to work is $a(n)$
	ANS: disability

When there is a measurable impairment that changes the individual's lifestyle, it is referred to as a disability.

DIF: Cognitive Level: Knowledge REF: p. 15 OBJ: N/A

TOP: Rehabilitation Concepts KEY: Nursing Process Step: Implementation

MSC: NCLEX: Health Promotion and Maintenance: Coordinated Care

- 2. What should the home health nurse do when teaching a family member the skill of injecting insulin effectively? Prioritize these nursing interventions for this situation. _____ (Place the events in the appropriate sequence. Do not separate answers with a space or punctuation. Example: ABCD.)
 - a. Offer instruction at an appropriate pace.
 - b. Write down the steps of the procedure.
 - c. Assess the level of knowledge of the family member.
 - d. Inquire about the preferred learning style.
 - e. Evaluate the family member's performance.

ANS:

CBDAE

Effective teaching depends on assessing the level of knowledge, breaking down the skill in steps, offering instruction in the preferred style, pacing the instruction appropriately, and evaluating the performance.

DIF: Cognitive Level: Application REF: p. 14 OBJ: 1
TOP: Home Health Teaching KEY: Nursing Process Step: Planning

MSC: NCLEX: Physiological Integrity: Basic Care and Comfort

- 3. Prioritize the steps in solving an ethical dilemma. _____ (Place the events in the appropriate sequence. Do not separate answers with a space or punctuation. Example: ABCD.)
 - a. Evaluate the outcome.
 - b. Plan an approach.

- c. Visualize the consequences.
- d. Take action.
- e. Identify the problem.

ANS:

EBCDA

To solve an ethical dilemma, one must clearly identify the problem, plan an approach, visualize the consequences, take action, and evaluate the outcome.

DIF: Cognitive Level: Comprehension REF: p. 11 OBJ: 7
TOP: Solving an Ethical Dilemma KEY: Nursing Process Step: N/A

MSC: NCLEX: N/A