# TEST BANK



Test Bank for Fundamentals of Nursing 9th Edition by Carol Taylor, Pamela Lynn, Jennifer Bartlett

# Chapter 1, Introduction to Nursing

An oncology nurse with 15 years of experience, certification in the area of oncology nursing, and a master's degree is considered to be an expert in her area of practice and works on an oncology unit in a large teaching hospital. Based upon this description, which of the following career roles best describes this nurse's role, taking into account her

- 1. qualifications and experience?
- A) Clinical nurse specialist
  B) Nurse entrepreneur
  C) Nurse practitioner
  D) Nurse educator
  Ans: A
  Feedback:

A clinical nurse specialist is a nurse with an advanced degree, education, or experience who is considered to be an expert in a specialized area of nursing. The clinical nurse specialist carries out direct patient care; consultation; teaching of patients, families, and staff; and research. A nurse practitioner has an advanced degree and works in a variety of settings to deliver primary care. A nurse educator usually has an advanced degree and teaches in the educational or clinical setting. A nurse entrepreneur may manage a clinic or health-related business.

What guidelines do nurses follow to identify the patient's health care needs and strengths, to establish and carry out a plan of care to meet those needs, and to evaluate the effectiveness of the plan to meet established outcomes?

A)	Nursing	process
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- B) ANA Standards of Professional Performance
- C) Evidence-based practice guidelines
- D) Nurse Practice Acts

Ans: A

# Feedback:

The nursing process is one of the major guidelines for nursing practice. Nurses implement their roles through the nursing process. The nursing process is used by the nurse to identify the patient's health care needs and strengths, to establish and carry out a plan of care to meet those needs, and to evaluate the effectiveness of the plan to meet established outcomes.

Which of the following organizations is the best source of information when a nurse wishes to determine whether an action is within the scope of nursing practice?

- A) American Nurses Association (ANA)
- B) American Association of Colleges in Nursing (AACN)
- C) National League for Nursing (NLN)
- D) International Council of Nurses (ICN)

Ans: A

# Feedback:

The ANA produces the 2003 *Nursing: Scope and Standards of Practice*, which defines the activities specific and unique to nursing. The AACN addresses educational standards, while the NLN promotes and fosters various aspects of nursing.

The ICN provides a venue for national nursing organizations to collaborate, but does not define standards and scope of practice.

- 4. Who is considered to be the founder of professional nursing?
- A) Dorothea Dix
- B) Lillian Wald
- C) Florence Nightingale
- D) Clara Barton

Ans: C

# Feedback:

Florence Nightingale is considered to be the founder of professional nursing. She elevated the status of nursing to a respected occupation, improved the quality of nursing care, and founded modern nursing education. Although the other choices are women who were important to the development of nursing, none of them is considered the founder.

5. Which of the following nursing pioneers established the Red Cross in the United States in 1882?

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- A) Florence Nightingale
- B) Clara Barton
- C) Dorothea Dix
- D) Jane Addams
- Ans: B

#### Feedback:

Clara Barton volunteered to care for wounds and feed union soldiers during the civil war, served as the supervisor of nurses for the Army of the James, organized hospitals and nurses, and established the Red Cross in the United States in 1882.

A nurse practitioner is caring for a couple who are the parents of an infant diagnosed with Down Syndrome. The nursemakes referrals for a parent support group for the family. This is an example of which nursing role?

- A) Teacher/Educator
- B) Leader
- C) Counselor
- D) Collaborator

Ans: C

### Feedback:

Counseling skills involve the use of therapeutic interpersonal communication skills to provide information, make appropriate referrals, and facilitate the patient's problem-solving and decision-making skills. The teacher/educator uses communication skills to assess, implement, and evaluate individualized teaching plans to meet learning needs of clients and their families. A leader displays an assertive, self-confident practice of nursing when providing care, effecting change, and functioning with groups. The collaborator uses skills in organization, communication, and advocacy to facilitate the functions of all members of the health care team as they provide patient care.

A nurse is providing nursing care in a neighborhood clinic to single, pregnant teens. Which of the following actions is 7. the best example of using the counselor role as a nurse?

- A) Discussing the legal aspects of adoption for teens wishing to place their infants with a family
- B) Searching the Internet for information on child care for the teens who wish to return to school
- C) Conducting a client interview and documenting the information on the client's chart
- D) Referring a teen who admits having suicidal thoughts to a mental health care specialist
- Ans: D

# Feedback:

The role of the counselor includes making appropriate referrals. Discussing legal issues is the role of the advocate and searching for information on the Internet is the role of a researcher. Conducting a client interview would fall under the role of the caregiver.

- A nurse instructor explains the concept of health to her students. Which of the following statements accurately describes8. this state of being?
- A) Health is a state of optimal functioning.
- B) Health is an absence of illness.
- C) Health is always an objective state.
- D) Health is not determined by the patient.

#### Ans: A

#### Feedback:

Health is a state of optimal functioning or well-being. As defined by the World Health Organization, one's health includes physical, social, and mental components and is not merely the absence of disease or infirmity. Health is often a subjective state; a person may be medically diagnosed with an illness but still consider himself or herself healthy.

A nurse incorporates the health promotion guidelines established by the U.S. Department of Health document: *Healthy* 9. *People 2010*. Which of the following is a health indicator discussed in this document?

- A) Cancer
- B) Obesity
- C) Diabetes
- D) Hypertension

Ans: B

# Feedback:

The 10 leading indicators of health established by *Healthy People 2010* are: physical activity, excessive weight and obesity, tobacco use, substance abuse, responsible sexual behavior, mental health, injury and violence, environmental quality, immunizations, and access to health care.

- 10. Which of the following is a criteria that defines nursing as profession?
- A) an undefined body of knowledge
- B) a dependence on the medical profession
- C) an ability to diagnose medical problems
- D) a strong service orientation

Ans:	D	
	Feedback:	
	Nursing is recognized increasingly as a profession based on the following defining criteria: well-defined body of specific and unique knowledge; strong service orientation; recognized authority by a professional group; code of ethics; professional organization that sets standards; ongoing research; and autonomy.	
11.	After graduation from an accredited program in nursing and successfully passing the NCLEX, what gives the nurse a legal right to practice?	
A)	Enrolling in an advanced degree program	
B)	Filing NCLEX results in the county of residence	
C)	Being licensed by the State Board of Nursing	
D)	Having a signed letter confirming graduation	
Ans:	C	
	Feedback:	
	The Board of Nursing in each state has the legal authority to allow graduates of approved schools of nursing to take the licensing examination. Those who successfully meet the requirements for licensure are given a license to practice nursing in the state. It is illegal to practice nursing without a license issued by the State Board of Nursing. A nurse does not have the legal right to practice nursing by enrolling in an advanced degree program, filing NCLEX results, or having a letter confirming graduation.	
12.	A health care facility determined that a nurse employed on a medical unit was documenting care that was not being given, and subsequently reported the action to the State Board of Nursing. How might this affect the nurse's license to practice nursing?	
A)	It will have no effect on the ability to practice nursing.	
B)	The nurse can practice nursing at a less-skilled level.	
C)	The nurse's license may be revoked or suspended.	
D)	The nurse's license will permanently carry a felony conviction.	
Ans:	C	
	Feedback:	
	The license and the right to practice nursing can be denied, revoked, or suspended for professional misconduct, such as a	

The license and the right to practice nursing can be denied, revoked, or suspended for professional misconduct, such as a crime. Other areas of professional misconduct include incompetence, negligence, and chemical impairment. Committing a felony does affect the legal right to practice nursing, does not allow the nurse to practice at a lower level, and is not attached to the license.

While providing care to the diabetic patient the nurse determines that the patient has a knowledge deficit regarding insulin administration. This nursing action is described in which phase of the nursing process?

- A) evaluation
- B) implementation
- C) planning

D) nursing diagnosis

Ans: D

# Feedback:

14.

Nursing focuses on human responses to actual or potential health problems. Identifying the problems occur in the nursing diagnosis phase. Mutually establishing expected outcomes with the patient occurs in the planning phase. Implementation of the individualized interventions, and evaluation of outcomes are also phases in the nursing process.

A nurse is caring for a client who is a chronic alcoholic. The nurse educates the client about the harmful effects of alcohol and educates the family on how to cope with the client and his alcohol addiction. Which of the following skills is the nurse using?

B)  Comforting    C)  Counseling    D)  Assessment    Ans:  C	A)	Caring
D) Assessment	B)	Comforting
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Ans: C	D)	Assessment
	Ans:	C

# Feedback:

The nurse is using counseling skills to educate the client about the harmful effects of alcohol. The nurse can also suggest rehabilitative care for the client. The nurse uses therapeutic communication techniques to encourage verbal expression and to understand the client's perspective. Caring, comforting, and assessment may require active listening, but counseling is based upon the active listening and interaction between the client and the counselor.

A nurse is caring for a client with quadriplegia who is fully conscious and able to communicate. What skills of the nurse 15. would be the most important for this client?

A)	Comforting	N
B)	Assessment	IN
C)	Counseling	
D)	Caring	
Ans:	D	

# Feedback:

The client needs assistance in performing activities of daily life. This would require implementation of caring skills from the nurse. Comforting, counseling, and assessment skills are also required, but the priority is the caring skill. Comforting skills involve providing safety and security to the client, whereas counseling skills are implemented while providing health education and emotional support. Assessment skills would be required when collecting data from the client.

A nurse is assigned the care of a client who has been admitted to the health care facility with high fever. Which nursing 16. skill should be put into practice at the first contact with the client?

- A) Assessment
- B) Caring
- C) Comforting
- D) Counseling
- Ans: A

Feedback:

On admission of the client to a health care facility, the nurse would be required to conduct an initial assessment of the client. Therefore, the nurse would implement his or her nursing skills in this case. This can be done by interviewing, observing, and examining the client. Caring skills are put into practice once the nursing needs are determined. Comforting and counseling skills may not have a major role in assessing client problems.

A nurse is caring for a client with a hernia. Which of the following statements should the nurse use while counseling the 17. client about his condition?

- A) "Open hernioplasty is the best surgery for you."
- B) "Open and laparoscopic hernioplasty are available."
- C) "You are not a suitable candidate for hernioplasty."
- D) "I had a bad experience when I underwent hernioplasty."

Ans: B

#### Feedback:

A counselor should provide the client with unbiased information from which to choose. Therefore, the statement that "Open and laparoscopic hernioplasty are available" should be used by the nurse when counseling a client with hernia. The nurse should, however, refrain from giving a personal opinion, so it should not be mentioned which surgery is best for the client; likewise, the nurse should not bring up his or her own past experiences. By reserving personal opinions, a nurse promotes the right of every person to make his or her own decisions and choices on matters affecting health and illness care. Telling the client about his suitability to surgery or the best surgery for him may be biased from the experiences of the past.

A registered nurse assigns the task of tracheostomy suctioning of a client to the LPN. The LPN informs the nurse that she has never done the procedure practically on a client. What should be the most appropriate response from the

- 18. registered nurse?
- A) "You are through with your theory class, so you should know."
- B) "Take the help of the nurse who knows to perform the procedure."
- C) "Take the help of the procedure manual and act accordingly."
- D) "I will help you in performing the procedure on the client."

Ans: D

#### Feedback:

Although the registered nurse has assigned the task to the LPN, the overall responsibility lies with the registered nurse. The registered nurse is answerable for the client's care, not the LPN. Telling the LPN that she should know the procedure because it is taught in class is inappropriate; putting theory into application would require supervision. Asking the LPN to refer to the manual and perform the procedure is incorrect because the LPN may commit mistakes. The LPN is not confident about the procedure and therefore should not be asked to do the task alone or with another nurse who knows the procedure.

A nurse at a health care facility provides information, assistance, and encouragement to clients during the various phases 19. of nursing care. In which of the following activities does the nurse use counseling skills?

- A) Educating a group of young girls about AIDS
- B) Telling a client to localize the pain in his abdomen
- C) Encouraging a client to walk without support
- D) Assisting a lactating mother in feeding her child