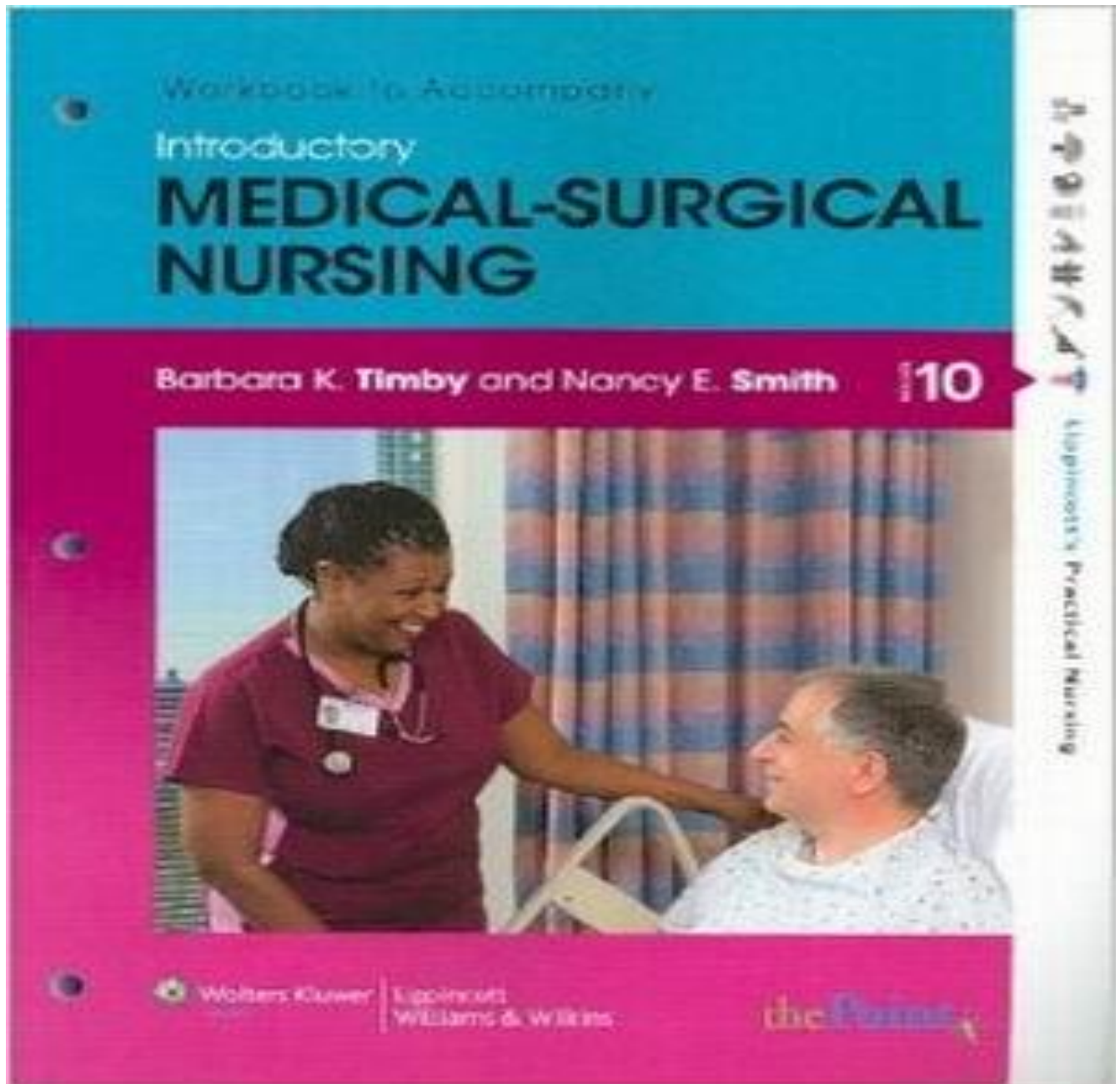


TEST BANK



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Introductory Medical-Surgical Nursing 10e Comprehensive Test Bank

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Appendix: Answers	

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

1) The nurse is assisting a postoperative client in using an incentive spirometer. Which of the following postoperative complications is this nurse attempting to avoid with this client? 1) _____

- A) Hemorrhage
- B) Pulmonary embolism
- C) Deep vein thrombosis
- D) Atelectasis

2) A client who is recovering from abdominal surgery has a penrose drain. Which of the following should the nurse include in the care of this client? 2) _____

- A) Make sure there is a safety pin on the end of the drain.
- B) Clean the wound with normal saline every two hours.
- C) Empty the drain every 30 minutes.

D) Remove the drain four hours postoperatively.

3) A client is in the recovery room. Which of the following members of the healthcare team should the nurse contact regarding the client's level of pain control? 3) _____

- A) The surgeon B) The anesthesiologist
- C) The scrub nurse D) The circulating nurse

4) During the assessment of a postoperative client's bowel sounds, the nurse auscultates high-pitched sounds over all four abdominal quadrants. The nurse realizes this finding could indicate: 4) _____

- A) Normal bowel function. B) The onset of stool.
- C) The onset of flatus. D) Paralytic ileus.

5) A client is being transferred from the operating room to the recovery room. The nurse in the recovery room will be providing which phase of nursing care? 5) _____

- A) Intraoperative B) Preoperative
- C) Restorative D) Postoperative

6) A client is being scheduled for surgery. Which of the following should be included in the preoperative teaching provided by the nurse? 6) _____

- A) The credentials of the anesthesiologist
- B) Information concerning the surgical procedure which will be performed by the surgeon
- C) Cost of the procedure
- D) Planned length of stay at the hospital

7) A client is being positioned for a hip replacement procedure. In which of the following positions will this client most likely be placed? 7) _____

- A) Dorsal recumbent B) Lateral chest
- C) Semi-sitting D) Prone

8) A postoperative client tells the nurse, "A book I read said that I should not eat after surgery for at least a week." Which of the following statements would be an appropriate nursing response? 8) _____

- A) "You don't need any food to heal anyway."
- B) "That's true."
- C) "That's not true. You could get an infection in your stomach."

D)"I'll be giving you intravenous feedings anyway."

9)An elderly postoperative client is given an antiemetic for nausea. Which of the following signs would indicate this client is experiencing a possible reaction to the medication? 9) _____

A)Dry mouth

B)Involuntary muscle movements

C)Breakthrough vomiting

D)Confusion

10)A client is signing a surgical consent. Afterwards, the nurse also signs the form. What is the meaning of the nursing signature? 10) _____

A)It means the client was alert and aware of what was being signed.

B)It means there is a likelihood of a successful outcome.

C)It means the client understood the procedure as described by the nurse.

D)It means the surgeon was too busy to wait for the client to sign the form.

11)A client's endotracheal tube is being removed after the surgical procedure. The intra-operative nurse realizes this client is in which phase of the general anesthesia process? 11) _____

A)Induction B) Maintenance

C)Reduction D) Emergence

12)An elderly client is being prepared for orthopedic surgery. The nurse realizes this client is at risk for which of the following? 12) _____

A)Prolonged effects of anesthesia because of herbal supplements

B)Decreased tolerance of general anesthesia

C)Increased hypotensive effects of anesthesia

D)Wound dehiscence

13)The client who is preparing for surgery asks the nurse to keep their glasses and hearing aid in-place until they are under anesthesia. Which of the following statements by the nurse demonstrates accurate, therapeutic communication? 13) _____

A)"I will contact the surgery department to discuss your requests."

B)"Certainly, you can keep them for that time."

C)"You cannot keep those in."

D)"The policies in the surgery unit will not allow it."

14)A client has just arrived in the recovery room. How often should the nurse assess the client? 14) _____

- A)Every 15 minutes for 30 minutes and then every one hour afterwards.
- B)Every 15 minutes for the first hour.
- C)Every hour.
- D)Every two hours.

15)A client who is being admitted for surgery asks the nurse why information is being collected about the client's use of herbal and natural supplements. Which of the following statements is an appropriate nursing response? 15) _____

- A)"The physician is in charge of medications."
- B)"Herbal supplements may interact with anesthesia agents."
- C)"Herbal remedies may cause pain relievers to be ineffective."
- D)"There is no need to take these preparations."

16)An elderly client is completing preoperative diagnostic testing. The nurse notes that the client's carbon dioxide level is elevated. Which of the following nursing interventions would be indicated for this client? 16) _____

- A)Monitor serum sodium level.
- B)Monitor serum potassium level.
- C)Monitor respiratory status and arterial blood gases.
- D)Monitor intake and output.

17)A client is prescribed patient-controlled analgesia for postoperative pain. Which of the following should the nurse instruct the client about this analgesia? 17) _____

- A)"Use this analgesia every hour on the hour."
- B)"Use this analgesia only when the pain is extremely severe."
- C)"Avoid the use of this because of the risk of addiction."
- D)"Use this analgesia regularly."

18)A client has received conscious sedation for a surgical procedure. The nurse realizes this client will most likely: 18) _____

- A)Respond to physical and verbal stimuli.
- B)Not respond to any stimuli.
- C)Need an endotracheal tube inserted.
- D)Need blood product replacements.

19) A client is in his fifth postoperative day and has sanguineous drainage with a thick, reddish appearance. The nurse realizes this client's wound is in which stage of healing?

19) _____

A) Stage III B) Stage IV C) Stage I D) Stage II

20) A recovery room nurse is consulting with a circulating nurse about a client who is having a surgical procedure. These nurses are most likely in which zone of the surgical department? 20) _____

A) Banned B) Semi-restricted

C) Restricted D) Unrestricted

21) A nurse has delegated the collection of vital signs, including blood pressure readings, to two unlicensed assistive personnel. The of this work means the nurse is:

21) _____

A) Not accountable for these vital signs.

B) Responsible to re-measure all of the vital signs.

C) Not responsible for these vital signs.

D) Accountable for the care that was delegated.

22) The nurse working on a quality improvement study wants to evaluate a client care process. Which of the following can the nurse use to evaluate this process? 22) _____

A) Variance analysis B) Critical pathway

C) Evidence-based practice D) Nursing process

23) The new nurse is studying the five core competencies for healthcare providers. Which of the following are a part of these core competencies? (Select all that apply.)

23) _____

A) Work in interdisciplinary teams.

B) Use informatics to deliver care.

C) Use evidence-based practice.

D) Replace quality improvement initiatives with work redesign methods.

E) Use primary nursing to deliver care.

24) A client tells the nurse, "I have an advance directive that I want you to follow." Which of the following will this document provide for the nurse? 24) _____

A) A complete plan of care for the client

B) The answers to any care dilemmas for the client

C)The client's preferences for healthcare should the client become mentally incapacitated

D)Directions regarding when to use universal precautions for the client

25)Client chart audits provide the nurses with information that impacts the future outcomes of client care. What should the nurses do with this information? 25) _____

A)Use the information to create an action plan to address any negative findings.

B)Nothing

C)Submit it to the agency's accrediting body.

D)Place it in a file to compare with the next set of audits.

26)The nurse is preparing a client to go home. Which of the following skills are the most important for the nurse to adequately prepare this client? 26) _____

A)Familiarity with adult learning principles

B)The ability to support client decision making

C)The ability to use critical thinking

D)The ability to follow written orders

27)The nurse is implementing a plan of care for a client. After providing care, what should the nurse do as the final step in the process? 27) _____

A)Reassess the client.

B)Give the charge nurse a report.

C)Document

D)Nothing

28)At the completion of an assessment, the nurse chooses a nursing diagnosis that best defines the client's health problems. Which type of clinical judgment will this nurse use? 28) _____

A)Diagnostic reasoning B) Evidence-based practice

C)Nursing process D) Critical pathway

29)A client tells the nurse, "I have pain in my leg when I stand too long." This information would be considered: 29) _____

A)Subjective data B) Objective data

C)Evaluative data D) Qualitative data

30)The nurse is consulting a critical pathway to help make client care decisions. Which type of care delivery model is this nurse most likely using to provide client