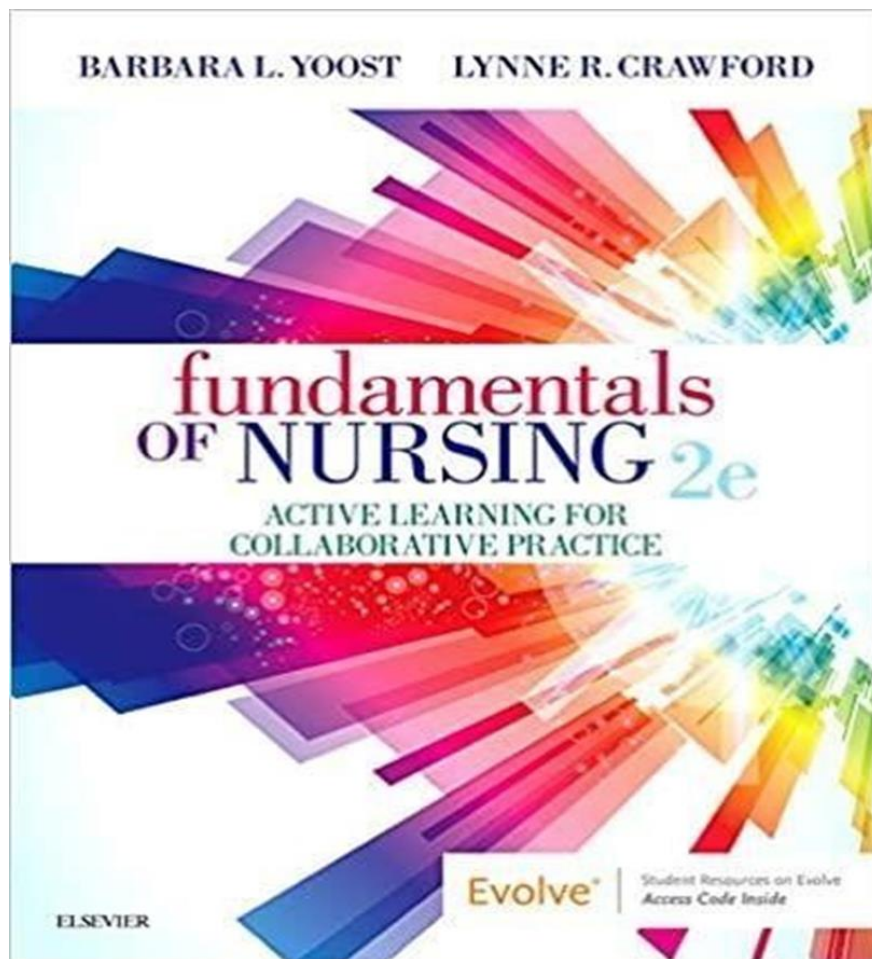


TEST BANK

FUNDAMENTALS OF NURSING: ACTIVE
LEARNING FOR COLLABORATIVE PRACTICE
2ND EDITION, BY BARBARA L YOOST



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Chapter 01: Nursing, Theory, and Professional Practice

MULTIPLE CHOICE

1. A group of students are discussing the impact of non-nursing theories in clinical practice. The students would be correct if they chose which theory to prioritize patient care?
 - a. Erikson's Psychosocial Theory
 - b. Paul's Critical Thinking Theory
 - c. Maslow's Hierarchy of Needs
 - d. Rosenstock's Health Belief Model

ANS: C

Maslow's hierarchy of needs specifies the psychological and physiologic factors that affect each person's physical and mental health. The nurse's understanding of these factors helps with formulating nursing diagnoses that address the patient's needs and values to prioritize care. Erikson's Psychosocial Theory of Development and Socialization is based on individuals' interacting and learning about their world. Nurses use concepts of developmental theory to critically think in providing care for their patients at various stages of their lives. Rosenstock (1974) developed the psychological Health Belief Model. The model addresses possible reasons for why a patient may not comply with recommended health promotion behaviors. This model is especially useful to nurses as they educate patients.

DIF: Remembering

REF: p. 8 | pp. 10-11

OBJ: 1.4

TOP: Planning

MSC: NCLEX Client Needs Category: Safe and Effective Care Environment: Management of Care

NOT: Concepts: Care Coordination

2. A nursing student is preparing study notes from a recent lecture in nursing history. The student would credit Florence Nightingale for which definition of nursing?
 - a. The imbalance between the patient and the environment decreases the capacity for health.
 - b. The nurse needs to focus on interpersonal processes between nurse and patient.
 - c. The nurse assists the patient with essential functions toward independence.
 - d. Human beings are interacting in continuous motion as energy fields.

ANS: A

Florence Nightingale's (1860) concept of the environment emphasized prevention and clean air, water, and housing. This theory states that the imbalance between the patient and the environment decreases the capacity for health and does not allow for conservation of energy. Hildegard Peplau (1952) focused on the roles played by the nurse and the interpersonal process between a nurse and a patient. Virginia Henderson described the nurse's role as substitutive (doing for the person), supplementary (helping the person), or complementary (working with the person), with the ultimate goal of independence for the patient. Martha Rogers (1970) developed the Science of Unitary Human Beings. She stated that human beings and their environments are interacting in continuous motion as infinite energy fields.

DIF: Understanding

REF: p. 7

OBJ: 1.1

TOP: Planning

MSC: NCLEX Client Needs Category: Health Promotion and Maintenance

NOT: Concepts: Health Promotion

3. Which nurse established the American Red Cross during the Civil War?
- Dorothea Dix
 - Linda Richards
 - Lena Higbee
 - Clara Barton

ANS: D

Clara Barton practiced nursing in the Civil War and established the American Red Cross. Dorothea Dix was the head of the U.S. Sanitary Commission, which was a forerunner of the Army Nurse Corps. Linda Richards was America's first trained nurse, graduating from Boston's Women's Hospital in 1873, and Lena Higbee, superintendent of the U.S. Navy Nurse Corps, was awarded the Navy Cross in 1918.

DIF: Remembering

REF: p. 5

OBJ: 1.3

TOP: Assessment MSC: NCLEX Client Needs Category: Health Promotion and Maintenance

NOT: Concepts: Professionalism

4. The nursing instructor is researching the five proficiencies regarded as essential for students and professionals. Which organization, if explored by the instructor, would be found to have added safety as a sixth competency?
- Quality and Safety Education for Nurses (QSEN)
 - Institute of Medicine (IOM)
 - American Association of Colleges of Nursing (AACN)
 - National League for Nursing (NLN)

ANS: A

The Institute of Medicine report, *Health Professions Education: A Bridge to Quality* (2003), outlines five core competencies. These include patient-centered care, interdisciplinary teamwork, use of evidence-based medicine, quality improvement, and use of information technology. QSEN added safety as a sixth competency. *The Essentials of Baccalaureate Education for Professional Nursing Practice* are provided and updated by the American Association of Colleges of Nursing (AACN) (2008). The document offers a framework for the education of professional nurses with outcomes for students to meet. The National League for Nursing (NLN) outlines and updates competencies for practical, associate, baccalaureate, and graduate nursing education programs.

DIF: Remembering

REF: p. 17

OBJ: 1.1

TOP: Planning

MSC: NCLEX Client Needs Category: Safe and Effective Care Environment: Management of Care

NOT: Concepts: Care Coordination

5. The nurse manager is interviewing graduate nurses to fill existing staffing vacancies. When hiring graduate nurses, the nurse manager realizes that they will probably not be considered "competent" until:
- They graduate and pass NCLEX.
 - They have worked 2 to 3 years.
 - Their last year of nursing school.
 - They are actually hired.

ANS: B

Benner's model identifies five levels of proficiency: novice, advanced beginner, competent, proficient, and expert. The student nurse progresses from novice to advanced beginner during nursing school and attains the competent level after approximately 2 to 3 years of work experience after graduation. To obtain the RN credential, a person must graduate from an approved school of nursing and pass a state licensing examination called the National Council Licensure Examination for Registered Nurses (NCLEX-RN) usually taken soon after completion of an approved nursing program.

DIF: Remembering

REF: p. 13

OBJ: 1.7

TOP: Planning

MSC: NCLEX Client Needs Category: Safe and Effective Care Environment: Management of Care

NOT: Concepts: Care Coordination

6. The prospective student is considering options for beginning a career in nursing. Which degree would best match the student's desire to conduct research at the university level?
- Associate Degree in Nursing (ADN)
 - Bachelor of Science in Nursing (BSN)
 - Doctor of Nursing Practice (DNP)
 - Doctor of Philosophy in Nursing (PhD)

ANS: D

Doctoral nursing education can result in a doctor of philosophy (PhD) degree. This degree prepares nurses for leadership roles in research, teaching, and administration that are essential to advancing nursing as a profession. Associate Degree in Nursing (ADN) programs usually are conducted in a community college setting. The nursing curriculum focuses on adult acute and chronic disease; maternal/child health; pediatrics; and psychiatric/mental health nursing. ADN RNs may return to school to earn a bachelor's degree or higher in an RN-to-BSN or RN-to-MSN program. Bachelor's degree programs include community health and management courses beyond those provided in an associate degree program. A newer practice-focused doctoral degree is the doctor of nursing practice (DNP), which concentrates on the clinical aspects of nursing. DNP specialties include the four advanced practice roles of NP, CNS, CNM, and CRNA.

DIF: Remembering

REF: pp. 15-16

OBJ: 1.8

TOP: Assessment

MSC: NCLEX Client Needs Category: Safe and Effective Care Environment: Management of Care

NOT: Concepts: Care Coordination

7. During a staff meeting, the nurse manager announces that the hospital will be seeking Magnet status. In order to explain the requirements for this award, the nurse manager will contact the:
- American Nurses Association (ANA).
 - American Nurses Credentialing Center (ANCC).
 - National League for Nursing (NLN).
 - Joint Commission.

ANS: B

The American Nurses Credentialing Center (ANCC) awards Magnet Recognition to hospitals that have shown excellence and innovation in nursing. The ANA is a professional organization that provides standards of nursing practice. The National League for Nursing (NLN) outlines and updates competencies for practical, associate, baccalaureate, and graduate nursing education programs. The Joint Commission is the accrediting organization for health care facilities in the United States.

DIF: Remembering

REF: p. 14 | pp. 16-17

OBJ: 1.9 TOP: Assessment

MSC: NCLEX Client Needs Category: Safe and Effective Care Environment: Management of Care

NOT: Concepts: Care Coordination

8. The nurse is caring for a patient who refuses two units of packed red blood cells. The nurse notifies the health care provider of the patient's decision. The nurse is acting in the role of the:
- Manager.
 - Change agent.
 - Advocate.
 - Educator.

ANS: C

As the patient's advocate, the nurse interprets information and provides the necessary education. The nurse then accepts and respects the patient's decisions even if they are different from the nurse's own beliefs. The nurse supports the patient's wishes and communicates them to other health care providers. A nurse manages all of the activities and treatments for patients. A nurse manages all of the activities and treatments for patients. In the role of change agent, the nurse works with patients to address their health concerns and with staff members to address change in an organization or within a community. The nurse ensures that the patient receives sufficient information on which to base consent for care and related treatment. Education becomes a major focus of discharge planning so that patients will be prepared to handle their own needs at home.

DIF: Applying

REF: pp. 3-4

OBJ: 1.2

TOP: Implementation

MSC: NCLEX Client Needs Category: Safe and Effective Care Environment: Management of Care

NOT: Concepts: Care Coordination

9. The nursing student develops a plan of care based on a recently published article describing the effects of bedrest on a patient's calcium blood levels. In creating the plan of care, the nursing student has the obligation to:
- Critically appraise the evidence and determine validity.
 - Ensure that the plan of care does not alter current practice.
 - Change the process even when there is no problem identified.
 - Maintain the plan of care regardless of initial outcome.

ANS: A

Evidence-based practice (EBP) is an integration of the best-available research evidence with clinical judgment about a specific patient situation. The nurse assesses current and past research, clinical guidelines, and other resources to identify relevant literature. The application of EBP includes critically appraising the evidence to assess its validity, designing a change for practice, assessing the need for change and identifying a problem, and integrating and maintaining change while monitoring process and outcomes by reevaluating the application of evidence and assessing areas for improvement.

DIF: Applying REF: p. 4 OBJ: 1.2 TOP: Implementation
MSC: NCLEX Client Needs Category: Safe and Effective Care Environment: Management of Care
NOT: Concepts: Care Coordination

10. The nurse is delegating frequent blood pressure (BP) measurements for a patient admitted with a gunshot wound to a licensed practical nurse (LPN). When delegating, the nurse understands that:
- He/she may assume that the LPN is able to perform this task appropriately.
 - The LPN is ultimately responsible for the patient findings and assessment.
 - The LPN may perform the tasks assigned without further supervision.
 - He/she retains ultimate responsibility for patient care and supervision is needed.

ANS: D

The RN retains ultimate responsibility for patient care, which requires supervision of those to whom patient care is delegated. In the process of collaboration, the nurse delegates certain activities to other health care personnel. The RN needs to *know* the scope of practice or capabilities of each health care member. For example, UAPs are capable of performing basic care that includes providing hygienic care, taking vital signs, helping the patient ambulate, and assisting with eating.

DIF: Understanding REF: p. 5 OBJ: 1.2
TOP: Implementation
MSC: NCLEX Client Needs Category: Safe and Effective Care Environment: Management of Care
NOT: Concepts: Care Coordination

11. The nurse is preparing to discharge a patient admitted with fever of unknown origin. The patient states, "I never got past the fifth grade in school. Don't read much. Never saw much sense in it. But I do OK. I can read most stuff. But my doctor explains things good, and doesn't think that my sickness is serious." The nurse should:
- Provide discharge medication information from a professional source to provide the most information.
 - Expect that the patient may return to the hospital if the discharge process is poorly done.
 - Assume that the physician and the patient have a good rapport and that the physician will clarify everything.
 - Defer offering the patient the opportunity to get the influenza vaccine because of the rapport that he has with his physician.

ANS: B

Low health literacy is associated with increased hospitalization, greater emergency care use, lower use of mammography, and lower receipt of influenza vaccine. A goal of patient education by the nurse is to inform patients and deliver information that is understandable by examining their level of health literacy. The more understandable health information is for patients, the closer the care is coordinated with need.

DIF: Applying REF: p. 3 OBJ: 1.2 TOP: Implementation
MSC: NCLEX Client Needs Category: Safe and Effective Care Environment: Management of Care
NOT: Concepts: Health Promotion