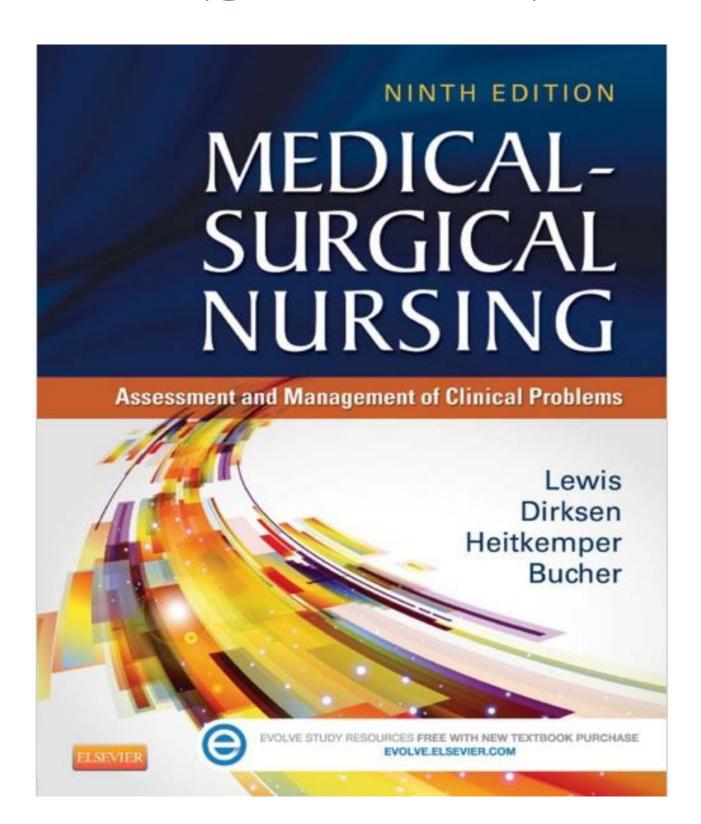
TEST BANK



Test Bank For Medical-Surgical Nursing: Assessment and Management of Clinical Problems 9th Edition

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Chapter 01: Professional Nursing Practice

Test Bank

MULTIPLE CHOICE

The nurse teaches a student nurse about how to apply the nursing process when providing patient care. Which statement, if made by the student nurse, indicates that teaching was successful?

The nursing process is a scientific-based method of diagnosing the patients health care problems.

The nursing process is a problem-solving tool used to identify and treat patients health care needs.

The nursing process is based on nursing theory that incorporates the biopsychosocial nature of humans.

The nursing process is used primarily to explain nursing interventions to other health care professionals.

ANS: B

The nursing process is a problem-solving approach to the identification and treatment of patients problems. Diagnosis is only one phase of the nursing process. The primary use of the nursing process is in patient care, not to establish nursing theory or explain nursing interventions to other health care professionals.

DIF: Cognitive Level: Understand (comprehension) REF: 7

TOP: Nursing Process: Implementation MSC: NCLEX: Safe and Effective Care Environment

The nurse describes to a student nurse how to use evidence-based practice guidelines when caring for patients. Which statement, if made by the nurse, would be the most accurate?

Inferences from clinical research studies are used as a guide.

Patient care is based on clinical judgment, experience, and traditions.

Data are evaluated to show that the patient outcomes are consistently met.

Recommendations are based on research, clinical expertise, and patient preferences.

ANS: D

Evidence-based practice (EBP) is the use of the best research-based evidence combined with clinician expertise. Clinical judgment based on the nurses clinical experience is part of EBP, but clinical decision making should also incorporate current research and research-based guidelines. Evaluation of patient outcomes is important, but interventions should be based on research from randomized control studies with a large number of subjects.

DIF: Cognitive Level: Remember (knowledge) REF: 11

TOP: Nursing Process: Planning MSC: NCLEX: Safe and Effective Care Environment

The nurse completes an admission database and explains that the plan of care and discharge goals will be developed with the patients input. The patient states, How is this different from what the doctor does? Which response would be most appropriate for the nurse to make?

The role of the nurse is to administer medications and other treatments prescribed by your doctor.

The nurses job is to help the doctor by collecting information and communicating any problemsthat occur.

Nurses perform many of the same procedures as the doctor, but nurses are with the patients for alonger time than the doctor.

In addition to caring for you while you are sick, the nurses will assist you to develop an individualized plan to maintain your health.

ANS: D

This response is consistent with the American Nurses Association (ANA) definition of nursing, which describes the role of nurses in promoting health. The other responses describe some of the dependent and collaborative functions of the nursing role but do not accurately describe the nurses role in the health care system.

DIF: Cognitive Level: Understand (comprehension) REF: 3

TOP: Nursing Process: Implementation MSC: NCLEX: Safe and Effective Care Environment

A patient who is paralyzed on the left side of the body after a stroke develops a pressure ulcer on the left hip Which nursing diagnosis is most appropriate?

Impaired physical mobility related to left-sided paralysis

Risk for impaired tissue integrity related to left-sided weakness

Impaired skin integrity related to altered circulation and pressure

Ineffective tissue perfusion related to inability to move independently ANS: C

The patients major problem is the impaired skin integrity as demonstrated by the presence of a pressure ulcer. The nurse is able to treat the cause of altered circulation and pressure by frequently repositioning the patient. Although left-sided weakness is a problem for the patient, the nurse cannot treat the weakness. The risk for diagnosis is not appropriate for this patient, who already has impaired tissue integrity. The patient does have ineffective tissue perfusion, but the impaired skin integrity diagnosis indicates more clearly what the health problem is.

DIF: Cognitive Level: Apply (application) REF: 7

TOP: Nursing Process: Diagnosis MSC: NCLEX: Physiological Integrity

A patient has been admitted to the hospital for surgery and tells the nurse, I do not feel comfortable leaving my children with my parents. Which action should the nurse take next?