

***Essential Health Assessment 2nd edition Thompson
Test Bank***

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Chapter 2: Interviewing the Patient for a Health History

Multiple Response

1. The nursing instructor is teaching a group of students the components of the health history interview. Which principles of behavior should the student remember when conducting a health assessment history? *Select all that apply.*

1. Remain sensitive.
2. Be nonjudgmental.
3. Give the appearance only of being genuine.
4. Demonstrate professional behaviors.
5. Show indifference.

2. In order to conduct effective assessments and health histories, the nurse must use a patient-centered approach using therapeutic communication. Which dimensions of patient-centered care should the nurse include? *Select all that apply.*

1. Empathy and compassion
2. Conditional regard
3. Genuineness
4. Respect
5. Caring

3. A patient comes to the clinic for an annual examination. To prepare for the health history interview, the nurse knows to include which of the following components? *Select all that apply.*

1. Reading the patient record as the health history is being conducted.
2. Leaving the patient dressed until it is time to perform the physical assessment.
3. Conducting the interview in a private place away from noise.
4. Allowing a short, limited amount of time to conduct the interview.
5. Standing at all times when talking to the patient.

4. The nurse is preparing to conduct a complete health history on a new patient who has just arrived at the walk-in clinic. The nurse is going to use the CLEAR mnemonic to collect information. Which of the following are components of CLEAR? *Select all that apply.*

1. Center
2. Listen
3. Empathy
4. Advocate
5. Respect

5. You are taking a health history on a patient who has not seen a healthcare provider in many years. He states, "I do not want to be here, but my wife is forcing me to see this doctor. All doctors want to do is put patients on drugs!" You know that communication skills will be very important during this patient encounter. What is the purpose of communication? *Select all that apply.*

1. Share information.
2. Share and exchange thoughts, perceptions, and feelings.
3. Send data only.
4. Confirm patient complaints.
5. Make a diagnosis.

6. Communication is both verbal and nonverbal. The following are nonverbal visual cues to be aware of during an interview. *Select all that apply.*

1. Slouching in the chair.
2. Frowning.
3. No eye contact.
4. Gestures.
5. Age-appropriate appearance.

7. A patient and her husband arrive at the community health center for a follow-up assessment. The patient has recently had a stroke and is aphasiac. She understands what you are saying but is unable to talk. Which of the following nursing interventions should be followed? *Select all that apply.*

1. Ask the husband the best way to communicate with his wife.
2. Find a large blackboard to write your questions on.
3. Offer the patient a white board or paper and pen.
4. Speak loudly so the patient understands.
5. Communicate one question or sentence at a time.

8. Communication is a reciprocal conversation. Identify barriers to communication. *Select all that apply.*

1. Asking too many questions.
2. Leading the patient.
3. Silence.
4. Offering false reassurance.
5. Stereotyping.

9. As the nurse prepares for a patient interview he or she recalls that effective communication includes which of the following? *Select all that apply.*

1. Avoid medical jargon.
2. Be authoritative.
3. Keep questions simple and clear.
4. Stand over the patient.
5. Avoid excessive note taking.

Multiple Choice

10. The mnemonic CLEAR is foundational for successful interviewing. The student nurse recognizes that this stands for which of the following terms?

1. Center, Listen, Empathy, Attention, and Respect.
2. Calm, Listen, Empathy, Attention, and Respect.
3. Center, Listen, Eye Contact, Attention, and Respect.
4. Calm, Listen, Eye Contact, Attention, and Respect.

11. The nurse is conducting a health history interview and suspects that the patient may have a hearing deficit. Which consideration is most appropriate for the nurse to make?

1. Speak directly to the patient's significant other.
2. Reduce any background noise in the room.
3. Speak quickly and use short, simple sentences.
4. Complete the health history as quickly as possible to reduce stress.

12. The patient has disclosed a visual impairment to the nurse. Which is the priority action for the nurse to remember before starting the physical assessment?

1. Speak clearly and loudly at all times during the assessment.
2. Acknowledge the patient by putting a hand on his or her shoulder.
3. Give short directions throughout the assessment.
4. Ask the patient how much he or she can see.

13. A patient's culture can influence the interview process. The nursing student recognizes that which of the following is true about how culture can influence the interview process?

1. A patient may have different definitions and perceptions of health and illness.
2. A patient cannot refuse to discuss personal matters out of concern for privacy.
3. A patient may project his or her own cultural beliefs on the nurse.
4. A patient may try to portray the cultural beliefs of the nurse.

14. When conducting the interview, the nurse needs to determine the reliability of the data collected. Which primary source would be considered the most reliable for the health history information?

1. The patient who is alert and oriented to person, place, and time.
2. The significant other who is answering all the questions.
3. The patient's medical record from the primary care provider.
4. An interpreter who speaks the patient's native language.

15. The nurse is preparing to conduct a health history on a patient and organizes the interview in a head-to-toe sequence. Which type of health history is the nurse going to conduct?

1. Comprehensive
2. Focused
3. Problem-based
4. Follow-up

16. The nurse is preparing to conduct a health history on a patient seen in the health clinic 2 days ago. Which type of health history is the nurse going to conduct?

1. Comprehensive
2. Focused
3. Problem-based
4. Follow-up

17. The nurse is preparing to conduct a health history on a patient being seen in the emergency room. Which type of health history is the nurse going to conduct?

1. Comprehensive
2. Focused
3. Basic
4. Follow-up

18. While conducting a health history during admission to the medical floor, the nurse asks the patient, "Have you ever had surgery?" This question is an example of which type of communication technique?

1. Open-ended question
2. Closed-ended question

3. Indirect question
4. Clarification question

19. The nursing student is learning how to use various therapeutic communication techniques. The student recognizes which of these as an example of confrontation?

1. "You look angry."
2. "This must be very hard for you."
3. "Do you feel worried about your dog?"
4. "How can I help you?"

20. You are completing a health history on a 32-year-old woman who is reporting that, "she may have a problem using heroin and other drugs." You are being attentive to the patient's report and nonverbal cues. The patient is looking down as she is telling her story. What communication technique is the nurse demonstrating?

1. Silence
2. Respect
3. Active listening
4. Exploring

21. A home health nurse is assessing a 94-year-old patient with a severe cognitive impairment. The daughter with whom the patient lives states that her mom only eats less than half of all her meals. What will you document?

1. Patient is reliable. Cared for by her daughter. Eating half of her meals.
2. Report by daughter. Eating 50% of her meals. Patient lives with her daughter.
3. Patient is unreliable. Report by daughter. Patient is only eating less than 50% of each meal.
4. Patient is unreliable. Eating about 50% of each meal.

22. A nurse in the emergency department is completing an emergency assessment for a teenager just admitted for injuries from a motor vehicle accident. Which of the following documentations is a pertinent negative report?

1. "My leg hurts so bad. I can't stand it."
2. Denies headache and blurry vision.
3. Reports feeling nauseous and dizzy.
4. "It wasn't my fault. I couldn't stop."

23. Which question or statement would be the best approach to elicit further information when conducting a health history interview?

1. "Why didn't you go to the doctor when you began to have this pain?"
2. "Are you feeling better now than you did during the night?"
- 3 "Tell me more about what you think is causing your pain."
4. "You should not wait to get medical help next time."

24. A resident at an assisted living facility comes to the nurse's office and states, "My bowel movements have been fluctuating for the last 2 weeks." How should the nurse respond?

1. "What do you mean by fluctuating?"
2. "Why don't you use a laxative every night?"
3. "When was the last time that you moved your bowels?"
4. "Everyone experiences bowel problems as they age."

25. During the summarization phase of the interview it is important to:

1. Encourage the patient to tell his or her history of present illness.
2. Complete documenting the data as told by the patient.
3. Clarify the patient's report, needs, feelings, and concerns.
4. Ask the patient if he or she has any questions.

26. The nurse has completed a health history. Both objective and subjective information have been obtained during the assessment. Which is classified as subjective data?

1. Patient appears sleepy.
2. No distress noted.
3. Abdomen is soft and nontender.
4. Patient states she feels anxious and tense.

27. You are assessing a patient who does not seem to understand your questions and explanations. What should be your next action?

1. Continue on with the assessment.
2. Speak loudly so the patient can hear you.
3. Ask the patient if he or she understands what you are saying.
4. Omit the explanations and continue with the assessment.

28. A patient is having his annual physical examination. You are doing a health history related to male breasts. You ask the patient if he has ever palpated his breasts. He responds, "I cannot believe that you asked me that question. I am not a woman and cannot get breast cancer." The nurse responds, "You sound surprised. You don't think that men can get breast cancer?" What type of communication technique is the nurse using?

1. Focusing
2. Facilitation
3. Reflecting
4. Exploring

29. Your patient reports that he thinks that he may have a problem with drinking too much beer. The nurse states, "So, do you drink about two beers every day?" What type of communication technique is this question?

1. Leading the patient
2. Transitional statement
3. Clarification
4. Exploring

30. You are about to start the health history. The patient is present with his daughter. Which of the following priority steps should you take before you start the health history?

1. Organize your thoughts prior to the assessment.
2. Wash your hands in front of the patient.
3. Obtain permission from the patient for the daughter to be present.
4. Assess your professional appearance and demeanor.

31. The patient just had abdominal surgery and reports that she is feeling bloated and crampy. The nurse inspects her abdomen and finds it to be bloated. The nurse tells the patient, "You will feel better tomorrow." This is an example of which communication technique?

1. Respect
2. Using clichés
3. Giving opinions
4. Using patronizing language

32. The visiting nurse is going to start an interview at a patient's home. The patient is watching television. The patient is hard of hearing and reports that her left ear is her good ear. Which nursing intervention should take highest priority?

1. Speak in simple, focused sentences.

2. Ask to have the television volume turned down.
3. Be descriptive when giving directions.
4. Use drawings and a white board to ask questions.

33. You are about to start an interview with the husband and wife present. The husband tells the nurse that his wife doesn't speak English well, and that he can interpret for her. Why is it not recommended to use family members as an interpreter during an assessment?

1. A family member may be too objective when giving information.
2. A family member may purposely omit information.
3. A family member can never be trusted.
4. A family member may share too much.

34. Which consideration should the nurse recognize as priority when interviewing the patient?

1. Gender
2. Socioeconomic status
3. Developmental level
4. Education

35. The patient is telling you that she is very upset because her mother passed away last month. She states, "I do not know how I am going to survive without my mom. I loved her so much."

The nurse says, "I am so sorry to hear about the passing of your mom. This must be a very difficult time for you." What communication technique is the nurse demonstrating?

1. Empathy
2. Facilitation
3. Reflecting
4. Clarification

36. The hospital nurse is conducting the initial interview with a patient who does not speak the same language as the nurse. What is a general principle when finding an interpreter?

1. Direct all your questions to the interpreter without looking at the patient.
2. Use your resources to find a trained face-to-face interpreter.
3. If a family member is available, ask him or her to be the interpreter.
4. Ask all the questions first so the interpreter can then ask the patient all at once.

37. As you enter the examination room to start the health history interview, the patient immediately starts yelling at you because he waited 45 minutes in the waiting room. He is angry and upset. You should:

1. Tell the patient to lower his voice and stop yelling.
2. Put your hand on the patient's shoulder and tell him it will never happen again.
3. Not argue with the patient and be empathetic.
4. Tell the patient that you will be right back and go get the health-care provider.

Completion

38. The three phases of the interview, in order, are: 1) _____, 2) _____, and 3) _____.

Answers

Multiple Response

1. The nursing instructor is teaching a group of students the components of the health history interview. Which principles of behavior should the student remember when conducting a health assessment history? *Select all that apply.*

1. Remain sensitive.
2. Be nonjudgmental.
3. Give the appearance only of being genuine.
4. Demonstrate professional behaviors.
5. Show indifference.

ANS: 1, 2, 4

Page: 11

	Feedback
1.	This is correct. The exchange of information, feelings, and concerns takes place during the assessment process. The nurse should be sensitive to the patient's report.
2.	This is correct. The exchange of information, feelings, and concerns takes place during the assessment process. The nurse should be nonjudgmental to the patient's report.
3.	This is incorrect. The exchange of information, feelings, and concerns takes place during the assessment process. The nurse should not only give the appearance of being genuine but be authentically genuine during the health history.
4.	This is correct. The exchange of information, feelings, and concerns takes place during the assessment process. The nurse should demonstrate professionalism during the health history interview.
5.	This is incorrect. The exchange of information, feelings, and concerns takes place during the assessment process. The nurse should show interest and concern to the patient's report.

2. In order to conduct effective assessments and health histories, the nurse must use a patient-centered approach using therapeutic communication. Which dimensions of patient-centered care should the nurse include? *Select all that apply.*

1. Empathy and compassion
2. Conditional regard
3. Genuineness
4. Respect
5. Caring

ANS: 1, 3, 4, 5

Page: 11

	Feedback
1.	This is correct. Therapeutic communication encompasses empathy and compassion during a health history interview. Empathy and compassion are a deep awareness of and insight into the feelings, emotions, and behavior of another person and their meaning and significance.
2.	This is incorrect. Therapeutic communication encompasses unconditional regard, not conditional regard, during a health history interview. Unconditional regard means respecting and accepting a patient as a unique individual.
3.	This is correct. Therapeutic communication encompasses being genuine during a health history interview. Genuineness is being honest with the patient.
4.	This is correct. Therapeutic communication encompasses respect during a health history. Respect is a moral value. It demonstrates that you have a positive feeling for every patient and accept each patient as a person who has unique qualities.
5.	This is correct. Therapeutic communication encompasses caring during a health history. Caring is the essence of nursing and connotes responsiveness between the nurse and the patient.

3. A patient comes to the clinic for an annual examination. To prepare for the health history interview, the nurse knows to include which of the following components? *Select all that apply.*

1. Reading the patient record as the health history is being conducted.
2. Leaving the patient dressed until it is time to perform the physical assessment.
3. Conducting the interview in a private place away from noise.
4. Allowing a short, limited amount of time to conduct the interview.
5. Standing at all times when talking to the patient.

ANS: 2, 3

Page: 13

	Feedback
1.	This is incorrect. The nurse should not read the patient record during the health history interview. This should be done prior to seeing the patient.
2.	This is correct. To help the patient be more comfortable, the nurse should leave the patient dressed until it is time to perform the physical assessment.
3.	This is correct. To prevent distractions, the nurse should conduct the interview in a private place away from noise.
4.	This is incorrect. The nurse should not have a short, limited amount of time to collect a thorough health history. The nurse should allow for plenty of time to conduct the interview so that the patient can answer all questions thoroughly.
5.	This is incorrect. The nurse should not always stand when talking to the patient. The nurse should stand or sit at the level of the patient during the interview.

4. The nurse is preparing to conduct a complete health history on a new patient who has just arrived at the walk-in clinic. The nurse is going to use the CLEAR mnemonic to collect information. Which of the following are components of CLEAR? *Select all that apply.*

1. Center
2. Listen
3. Empathy
4. Advocate
5. Respect

ANS: 1, 2, 3, 5

Page: 12

	Feedback
1.	This is correct. The C in the CLEAR mnemonic in communication stands for center. CLEAR stands for Center, Listen, Empathy, Attention, and Respect.
2.	This is correct. The L in the CLEAR mnemonic in communication stands for listen. CLEAR stands for Center, Listen, Empathy, Attention, and Respect.
3.	This is correct. The E in the CLEAR mnemonic in communication stands for empathy. CLEAR stands for Center, Listen, Empathy, Attention, and Respect.
4.	This is incorrect. Although it is important to advocate for patients, the A in the CLEAR mnemonic in communication stands for attention.
5.	This is correct. The R in the CLEAR mnemonic in communication stands for respect. CLEAR stands for Center, Listen, Empathy, Attention, and Respect.

5. You are taking a health history on a patient who has not seen a healthcare provider in many years. He states, "I do not want to be here, but my wife is forcing me to see this doctor. All doctors want to do is put patients on drugs!" You know that communication skills will be very important during this patient encounter. What is the purpose of communication? *Select all that apply.*

1. Share information.
2. Share and exchange thoughts, perceptions, and feelings.
3. Send data only.
4. Confirm patient complaints.
5. Make a diagnosis.

ANS: 1, 2

Page: 13

	Feedback
1.	This is correct. The purpose of communication is to share content: the actual subject

	matter, words, gestures, and substance of the message.
2.	This is correct. The purpose of communication is to share and exchange thoughts, perceptions, and feelings.
3.	This is incorrect. The purpose of communication is not to only send data but to send, receive, and gather data.
4.	This is incorrect. The purpose of communication is not to confirm patient complaints but to share patient concerns.
5.	This is incorrect. Nurses do not diagnose patients.

6. Communication is both verbal and nonverbal. The following are nonverbal visual cues to be aware of during an interview. *Select all that apply.*

1. Slouching in the chair.
2. Frowning.
3. No eye contact.
4. Gestures.
5. Age-appropriate appearance.

ANS: 1, 2, 3, 4

Page: 13

	Feedback
1.	This is correct. Slouching in the chair is considered to be nonverbal body language.
2.	This is correct. Frowning is a facial expression and is considered to be nonverbal body language.
3.	This is correct. If the patient does not make eye contact, this is considered nonverbal body language.
4.	This is correct. Gestures are considered to be nonverbal body language.
5.	This is incorrect. Age-appropriate appearance is a general survey of the patient for objective data during a physical assessment.

7. A patient and her husband arrive at the community health center for a follow-up assessment. The patient has recently had a stroke and is aphasiac. She understands what you are saying but is unable to talk. Which of the following nursing interventions should be followed? *Select all that apply.*

1. Ask the husband the best way to communicate with his wife.
2. Find a large blackboard to write your questions on.
3. Offer the patient a white board or paper and pen.
4. Speak loudly so the patient understands.
5. Communicate one question or sentence at a time.

ANS: 1, 2, 3, 5

Page: 17

	Feedback
1.	This is correct. It is important to ask the patient (or significant other if present) about the best way to communicate.
2.	This is correct. Writing down questions or using pictures can help the patient communicate.
3.	This is correct. It is helpful to have the patient write or draw if they are unable to speak.
4.	This is incorrect. Since the patient does not have a hearing impairment, it is not necessary to speak loudly. Instead, focus on speaking slowly and clearly.
5.	This is correct. Communicating one question or sentence at a time can help the patient to better understand what you are saying.

8. Communication is a reciprocal conversation. Identify barriers to communication. *Select all that apply.*

1. Asking too many questions.
2. Leading the patient.
3. Silence.
4. Offering false reassurance.
5. Stereotyping.

ANS: 1, 3, 5

Page: 15

	Feedback
1.	This is correct. Only ask one question at a time for clarity and to disallow misunderstanding.
2.	This is incorrect. Do not lead the patient; patients tell you what they want you to hear and may not always be truthful in their self-report.
3.	This is correct. It is important to give the patient enough time to think through the answer so silence can improve communication.
4.	This is incorrect. Never tell the patient that everything will be fine when it may not be.
5.	This is correct. Be objective during the assessment; every patient is unique and should be respected regardless of race, religion, gender, sexual preference, or age.

9. As the nurse prepares for a patient interview he or she recalls that effective communication includes which of the following? *Select all that apply.*

1. Avoid medical jargon.
2. Be authoritative.

3. Keep questions simple and clear.
4. Stand over the patient.
5. Avoid excessive note taking.

ANS: 1, 3, 5

Page: 16

	Feedback
1.	This is correct. Effective communication includes avoiding medical terminology that may not be understood by the patient.
2.	This is incorrect. Effective communication is not being authoritative during the patient encounter. Patients need to feel comfortable. Nurses should make sure that they have a shared understanding of the patient's report, problems, and concerns.
3.	This is correct. Effective communication will keep the questions simple for clear understanding.
4.	This is incorrect. Standing over the patient can be intimidating. You should be either sitting or standing at the same level of the patient.
5.	This is correct. Nurses should avoid taking excessive notes and concentrate on listening to the patient and taking notes as needed.

Multiple Choice

10. The mnemonic CLEAR is foundational for successful interviewing. The student nurse recognizes that this stands for which of the following terms?

1. Center, Listen, Empathy, Attention, and Respect.
2. Calm, Listen, Empathy, Attention, and Respect.
3. Center, Listen, Eye Contact, Attention, and Respect.
4. Calm, Listen, Eye Contact, Attention, and Respect.

ANS: 1

Page: 12

	Feedback
1.	This is correct. The mnemonic CLEAR is foundational for successful interviewing. It stands for Center, Listen, Empathy, Attention, and Respect.
2.	This is incorrect. Although it is important to be calm when interviewing, it is not part of the CLEAR mnemonic.
3.	This is incorrect. Although it is important to use eye contact when interviewing, it is not part of the CLEAR mnemonic.
4.	This is incorrect. Although it is important to be calm and use eye contact when interviewing, they are not part of the CLEAR mnemonic.

11. The nurse is conducting a health history interview and suspects that the patient may have a hearing deficit. Which consideration is most appropriate for the nurse to make?

1. Speak directly to the patient's significant other.
2. Reduce any background noise in the room.
3. Speak quickly and use short, simple sentences.
4. Complete the health history as quickly as possible to reduce stress.

ANS: 2

Page: 16

	Feedback
1.	This is incorrect. You can ask the patient's significant other about the best way to communicate, but it is important to speak directly to the patient.
2.	This is correct. You should reduce background noise for a patient who is hard of hearing.
3.	This is incorrect. Face the patient and speak slowly and clearly. You should use short and simple sentences for a patient who is hard of hearing.
4.	This is incorrect. You should not complete the health history as quickly as possible because the patient who is hard of hearing requires extra time. Allow for extra time and do not rush the assessment.

12. The patient has disclosed a visual impairment to the nurse. Which is the priority action for the nurse to remember before starting the physical assessment?

1. Speak clearly and loudly at all times during the assessment.
2. Acknowledge the patient by putting a hand on his or her shoulder.
3. Give short directions throughout the assessment.
4. Ask the patient how much he or she can see.

ANS: 4

Page: 16

	Feedback
1.	This is incorrect. The patient has a visual impairment, not a hearing impairment. You do not need to speak loudly.
2.	This is incorrect. You should always ask permission first before touching a visually impaired patient.
3.	This is incorrect. You should be descriptive when giving directions to a visually impaired patient.
4.	This is correct. Introduce yourself and explain the purpose and sequence of the patient assessment. Ask the patient: "How much can you see?"

13. A patient's culture can influence the interview process. The nursing student recognizes that which of the following is true about how culture can influence the interview process?

1. A patient may have different definitions and perceptions of health and illness.
2. A patient cannot refuse to discuss personal matters out of concern for privacy.
3. A patient may project his or her own cultural beliefs on the nurse.
4. A patient may try to portray the cultural beliefs of the nurse.

ANS: 1

Page: 19

	Feedback
1.	This is correct. A patient's culture can influence the interview process. A patient may have different definitions and perceptions of health and illness.
2.	This is incorrect. A patient can refuse to discuss personal matters out of concern for privacy.
3.	This is incorrect. A patient cannot project his or her own cultural beliefs on the nurse.
4.	This is incorrect. The patient would not know the cultural beliefs of the nurse and therefore could not portray the cultural beliefs of the nurse.

14. When conducting the interview, the nurse needs to determine the reliability of the data collected. Which primary source would be considered the most reliable for the health history information?

1. The patient who is alert and oriented to person, place, and time.
2. The significant other who is answering all the questions.
3. The patient's medical record from the primary care provider.
4. An interpreter who speaks the patient's native language.

ANS: 1

Page: 21

	Feedback
1.	This is correct. When conducting the interview, the nurse needs to determine the reliability of the data collected. The most reliable person is the patient, as long as the patient is cognitively intact.
2.	This is incorrect. When conducting the interview, the nurse needs to determine the reliability of the data collected. A significant other who is answering all the questions is a secondary source. The most reliable source in this case is the patient who is alert and oriented.
3.	This is incorrect. When conducting the interview, the nurse needs to determine the reliability of the data collected. The patient's medical record is a secondary source.
4.	This is incorrect. When conducting the interview, the nurse needs to determine the

	reliability of the data collected. The most reliable person is the patient, as long as the patient is cognitively intact. There is no indication in the scenario that an interpreter is needed.
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15. The nurse is preparing to conduct a health history on a patient and organizes the interview in a head-to-toe sequence. Which type of health history is the nurse going to conduct?

1. Comprehensive
2. Focused
3. Problem-based
4. Follow-up

ANS: 1

Page: 21

	Feedback
1.	This is correct. A comprehensive health history looks at the whole patient and reviews all body systems.
2.	This is incorrect. A focused health history focuses specifically on an acute problem or symptom that the patient is experiencing.
3.	This is incorrect. A problem-based health history is the same as a focused health history, which focuses specifically on an acute problem or symptom that the patient is experiencing.
4.	This is incorrect. A follow-up health history occurs after a patient has been seen and concentrates on new data since the last history.

16. The nurse is preparing to conduct a health history on a patient seen in the health clinic 2 days ago. Which type of health history is the nurse going to conduct?

1. Comprehensive
2. Focused
3. Problem-based
4. Follow-up

ANS: 4

Page: 21

	Feedback
1.	This is incorrect. The comprehensive health history looks at the whole patient and reviews all body systems, head to toe.
2.	This is incorrect. The focused health history focuses specifically on an acute problem or symptom that the patient is experiencing.

3.	This is incorrect. The problem-based health history focuses specifically on an acute problem or symptom that the patient is experiencing.
4.	This is correct. The follow-up history occurs after a patient has been seen and is concentrated on new data since the last history.

17. The nurse is preparing to conduct a health history on a patient being seen in the emergency room. Which type of health history is the nurse going to conduct?

1. Comprehensive
2. Focused
3. Basic
4. Follow-up

ANS: 2

Page: 21

	Feedback
1.	This is incorrect. The patient is presenting at the emergency room with a specific complaint. The health history will focus on the health problem. Comprehensive health history looks at the whole patient and reviews all body systems, head to toe.
2.	This is correct. Because this patient is presenting at the emergency room with a specific symptom, a focused or problem-based health history focuses specifically on an acute problem or symptom that the patient is experiencing.
3.	This is incorrect. A basic health history is too generalized. The health history needs to focus on the specific problem.
4.	This is incorrect. The patient needs a focused health history related to the reason for seeking care. A follow-up history occurs after a patient has been seen and concentrates on new data since the last history.

18. While conducting a health history during admission to the medical floor, the nurse asks the patient, "Have you ever had surgery?" This question is an example of which type of communication technique?

1. Open-ended question
2. Closed-ended question
3. Indirect question
4. Clarification question

ANS: 2

Page: 19

	Feedback
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1.	This is incorrect. This is an example of a closed-ended or direct question. This type of question is used by the nurse to obtain specific information. Open-ended questions are used for collection of narrative information and are not answered with a one- or two-word response.
2.	This is correct. This is an example of a closed-ended or direct question. This type of question is used by the nurse to obtain specific information.
3.	This is incorrect. This is not an indirect question. The question is a focused or direct question to identify specific information.
4.	This is incorrect. This is not a clarification question. Clarification questions are used to clarify responses that are ambiguous or confusing, or to summarize a person's words to ensure that the interviewer is on the right track.

19. The nursing student is learning how to use various therapeutic communication techniques. The student recognizes which of these as an example of confrontation?

1. "You look angry."
2. "This must be very hard for you."
3. "Do you feel worried about your dog?"
4. "How can I help you?"

ANS: 1

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	Feedback
1.	This is correct. This is an effective communication technique that best demonstrates a confrontation statement: "You look angry." Give the patient honest and respectful feedback about what you see or hear that is inconsistent with what the patient is telling you.
2.	This is incorrect. The statement "This must be very hard for you" is an example of empathy.
3.	This is incorrect. The question "Do you feel worried about your dog?" is an example of reflection.
4.	This is incorrect. "How can I help you?" is an example of an open-ended question.

20. You are completing a health history on a 32-year-old woman who is reporting that, "she may have a problem using heroin and other drugs." You are being attentive to the patient's report and nonverbal cues. The patient is looking down as she is telling her story. What communication technique is the nurse demonstrating?

1. Silence
2. Respect
3. Active listening

4. Exploring

ANS: 3

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	Feedback
1.	This is incorrect. The patient is speaking and telling her story. Silence is refraining from speaking. Planned absence of verbal remarks allows the patient and the nurse to think over or feel what is being discussed.
2.	This is incorrect. There are no respectful comments in this scenario. The patient is telling her story.
3.	This is correct. The communication technique of active listening pays close attention to the patient's report and nonverbal cues. The nurse will maintain good eye contact and express a willingness to listen.
4.	This is incorrect. The nurse is not encouraging the patient to give more details in this scenario.

21. A home health nurse is assessing a 94-year-old patient with a severe cognitive impairment. The daughter with whom the patient lives states that her mom only eats less than half of all her meals. What will you document?

1. Patient is reliable. Cared for by her daughter. Eating half of her meals.
2. Report by daughter. Eating 50% of her meals. Patient lives with her daughter.
3. Patient is unreliable. Report by daughter. Patient is only eating less than 50% of each meal.
4. Patient is unreliable. Eating about 50% of each meal.

ANS: 3

Page: 17

	Feedback
1.	This is incorrect. The patient has severe cognitive impairment and is not reliable.
2.	This is incorrect. Reliability is not documented in this statement.
3.	This is correct. Some patients may be unreliable because of decreased cognitive ability or mentation. Secondary sources will be needed to provide information for the health history. If this occurs, document: "Patient is unreliable. Report by patient's daughter."
4.	This is incorrect. The daughter is a secondary source and this needs to be documented. Also, the patient is eating less than half her meals.

22. A nurse in the emergency department is completing an emergency assessment for a teenager just admitted for injuries from a motor vehicle accident. Which of the following documentations is a pertinent negative report?

1. "My leg hurts so bad. I can't stand it."
2. Denies headache and blurry vision.
3. Reports feeling nauseous and dizzy.
4. "It wasn't my fault. I couldn't stop."

ANS: 2

Page: 21

	Feedback
1.	This is incorrect. The report of pain as a symptom is a pertinent positive.
2.	This is correct. Patient denial of specific symptoms are pertinent negatives.
3.	This is incorrect. A report of feeling nauseous is a pertinent positive.
4.	This is incorrect. This is neither a pertinent positive nor pertinent negative. The patient is trying to tell someone that the motor vehicle accident was not his fault.

23. Which question or statement would be the best approach to elicit further information when conducting a health history interview?

1. "Why didn't you go to the doctor when you began to have this pain?"
2. "Are you feeling better now than you did during the night?"
- 3 "Tell me more about what you think is causing your pain."
4. "You should not wait to get medical help next time."

ANS: 3

Page: 19

	Feedback
1.	This is incorrect. Although this inquiry is an open-ended question, why they didn't go to the doctor is relevant to treating the patient.
2.	This is incorrect. Although it is important to ask about how the patient is feeling, this is a closed-ended question that will not help gather specific details.
3.	This is correct. This is an example of an open-ended question that will help to elicit patient information.
4.	This is incorrect. This statement is patronizing and could cause the patient to share less information.

24. A resident at an assisted living facility comes to the nurse's office and states, "My bowel movements have been fluctuating for the last 2 weeks." How should the nurse respond?

1. "What do you mean by fluctuating?"
2. "Why don't you use a laxative every night?"
3. "When was the last time that you moved your bowels?"
4. "Everyone experiences bowel problems as they age."

ANS: 1

Page: 15

	Feedback
1.	This is correct. This question is seeking clarification of the word “fluctuating.” Obtain clarification if the patient does not clearly express the problem or issue and you are confused about what the patient is saying to you.
2.	This is incorrect. This is a barrier to communication. The nurse needs to further assess the patient’s constipation. The patient is not clear by what she means by “fluctuating.”
3.	This is incorrect. Determining the onset of the constipation is important, but the patient is not clear by what she means by “fluctuating.” It could mean that she has periods of diarrhea and periods of constipation.
4.	This is incorrect. This is a barrier communication technique. This is stereotyping older adults.

25. During the summarization phase of the interview it is important to:

1. Encourage the patient to tell his or her history of present illness.
2. Complete documenting the data as told by the patient.
3. Clarify the patient’s report, needs, feelings, and concerns.
4. Ask the patient if he or she has any questions.

ANS: 3

Page: 20

	Feedback
1.	This is incorrect. Encouraging the patient to tell his or her history of present illness is done during the working phase of the interview.
2.	This is incorrect. Completion of documenting the data as told by the patient is done after the interview is finished.
3.	This is correct. Clarifying the patient’s report, needs, feelings, and concerns is completed during the summarization phase.
4.	This is incorrect. Asking the patient if he or she has any questions is done at the end of the working phase.

26. The nurse has completed a health history. Both objective and subjective information have been obtained during the assessment. Which is classified as subjective data?

1. Patient appears sleepy.
2. No distress noted.
3. Abdomen is soft and nontender.

4. Patient states she feels anxious and tense.

ANS: 4
Page: 19

	Feedback
1.	This is incorrect. This is objective data because you are observing that the patient is sleepy.
2.	This is incorrect. This is objective data because you are observing that the patient is not in distress.
3.	This is incorrect. This is objective data because you are observing that the abdomen is soft and nontender.
4.	This is correct. Subjective data is defined as: what the person says about himself or herself. Of the responses above, <i>patient states she feels anxious and tense</i> is the only subjective statement. All other responses are objective.

27. You are assessing a patient who does not seem to understand your questions and explanations. What should be your next action?

1. Continue on with the assessment.
2. Speak loudly so the patient can hear you.
3. Ask the patient if he or she understands what you are saying.
4. Omit the explanations and continue with the assessment.

ANS: 3
Page: 17

	Feedback
1.	This is incorrect. You should first establish whether the patient understands what you are saying or explaining. If the patient does not understand, an alternative approach would be recommended.
2.	This is incorrect. It does not appear that the patient is hard of hearing. If the patient does not understand, the nurse should speak in very simple and clear language.
3.	This is correct. It is important to ask the patient directly if they understand what you are saying. If the patient is unreliable, communicate with secondary sources.
4.	This is incorrect. Explanations should not be omitted. The patient should be a copartner in care and the nurse should use an alternative approach to help the patient understand.

28. A patient is having his annual physical examination. You are doing a health history related to male breasts. You ask the patient if he has ever palpated his breasts. He responds, "I cannot believe that you asked me that question. I am not a woman and cannot get breast cancer." The

nurse responds, “You sound surprised. You don’t think that men can get breast cancer?” What type of communication technique is the nurse using?

1. Focusing
2. Facilitation
3. Reflecting
4. Exploring

ANS: 3

Page: 15

	Feedback
1.	This is incorrect. This is not a focused question. Focusing asks specific questions to collect and clarify data that the patient may not be stating during the interview.
2.	This is incorrect. This is not facilitation. Facilitation uses simple verbal statements or words to encourage the patient to continue to tell the story. Use statements like “uh-huh,” “Mmmm,” or “And then?”
3.	This is correct. Reflecting or stating the observed repeats the patient’s words specifically to encourage elaboration of the patient’s self-report. This encourages more discussion.
4.	This is incorrect. This is not exploring. Exploring encourages the patient to give you more details.

29. Your patient reports that he thinks that he may have a problem with drinking too much beer. The nurse states, “So, do you drink about two beers every day?” What type of communication technique is this question?

1. Leading the patient
2. Transitional statement
3. Clarification
4. Exploring

ANS: 1

Page: 15

	Feedback
1.	This is correct. The nurse is leading the patient by putting numbers on the number of beers the patient may drink. Do not lead the patient. Patients tell you what they want you to hear and may not always be truthful in their self-reports.
2.	This is incorrect. This is not a transitional statement. Transitional statements help direct the interview to another significant area.
3.	This is incorrect. This is not a clarification question. A clarification question would ask, “What do you mean that you are drinking too much beer?”
4.	This is incorrect. This is not an exploring question. An exploring question or statement

	would ask, "Tell me more about how much beer you drink."
--	--

30. You are about to start the health history. The patient is present with his daughter. Which of the following priority steps should you take before you start the health history?

1. Organize your thoughts prior to the assessment.
2. Wash your hands in front of the patient.
3. Obtain permission from the patient for the daughter to be present.
4. Assess your professional appearance and demeanor.

ANS: 3

Page: 20

	Feedback
1.	This is incorrect. Although it is important to organize your thoughts prior to the assessment, this is not the priority step prior to taking the health assessment.
2.	This is incorrect. Although it is best practice to wash your hands in front of the patient, this is not the priority step prior to taking the health assessment.
3.	This is correct. If family members are present during the interview, the nurse should clarify who is present rather than assume it is the wife, daughter, parent, or significant other. It is the nurse's responsibility to obtain permission from the patient for the family members to be present and participate in the interview process.
4.	This is incorrect. Although it is important to assess your professional appearance and demeanor prior to the assessment, this is not the priority step prior to taking the health assessment.

31. The patient just had abdominal surgery and reports that she is feeling bloated and crampy. The nurse inspects her abdomen and finds it to be bloated. The nurse tells the patient, "You will feel better tomorrow." This is an example of which communication technique?

1. Respect
2. Using clichés
3. Giving opinions
4. Using patronizing language

ANS: 2

Page: 16

	Feedback
1.	This is incorrect. This is not showing respect. This statement is minimizing the symptoms the patient is feeling.
2.	This is correct. Clichés (e.g., "You will feel better tomorrow") show disregard for the

	patient's feelings. This is giving false reassurance.
3.	This is incorrect. This statement is not giving your opinion. The patient did not ask, "What should I do?"
4.	This is incorrect. Patronizing language communicates superiority or disapproval. This statement did not communicate disapproval.

32. The visiting nurse is going to start an interview at a patient's home. The patient is watching television. The patient is hard of hearing and reports that her left ear is her good ear. Which nursing intervention should take highest priority?

1. Speak in simple, focused sentences.
2. Ask to have the television volume turned down.
3. Be descriptive when giving directions.
4. Use drawings and a white board to ask questions.

ANS: 2

Page: 16

	Feedback
1.	This is incorrect. Speaking in simple, focused sentences is advantageous for the cognitively impaired patient.
2.	This is correct. Hearing loss is a common human sensory deficit affecting the patient's ability to communicate. Reduce background noise in the room.
3.	This is incorrect. Being descriptive when giving directions is for the visually impaired patient.
4.	This is incorrect. Use drawings and a white board to ask questions for the aphasic patient who has brain dysfunction.

33. You are about to start an interview with the husband and wife present. The husband tells the nurse that his wife doesn't speak English well, and that he can interpret for her. Why is it not recommended to use family members as an interpreter during an assessment?

1. A family member may be too objective when giving information.
2. A family member may purposely omit information.
3. A family member can never be trusted.
4. A family member may share too much.

ANS: 2

Page: 18

	Feedback
1.	This is incorrect. A family member may be too subjective when giving information, not

	objective.
2.	This is correct. A family member may purposefully omit information, which can negatively impact the assessment.
3.	This is incorrect. Although some family members may purposefully omit information, many family members can be trusted. Some have the patient's best information in mind and can be trusted to speak truthfully.
4.	This is incorrect. This is not a concern when having a family member interpret for a patient. Instead, the opposite may occur because a family member may not know every detail about the patient's situation. In addition, the patient may not want the family member to know the truth so the family member may not know everything that may be helpful for the assessment.

34. Which consideration should the nurse recognize as priority when interviewing the patient?

1. Gender
2. Socioeconomic status
3. Developmental level
4. Education

ANS: 3

Page: 13

	Feedback
1.	This is incorrect. Gender is not a priority when interviewing a patient. It is important for the nurse to consider the developmental level of the patient and use words that the patient will understand during the interview.
2.	This is incorrect. Socioeconomic status should not be a priority when interviewing a patient. It is important for the nurse to consider the developmental level of the patient and use words that the patient will understand during the interview.
3.	This is correct. It is important for the nurse to consider the developmental level of the patient and use words that the patient will understand during the interview.
4.	This is incorrect. Education should not be a priority when interviewing a patient. It is important for the nurse to consider the developmental level of the patient and use words that the patient will understand during the interview.

35. The patient is telling you that she is very upset because her mother passed away last month. She states, "I do not know how I am going to survive without my mom. I loved her so much." The nurse says, "I am so sorry to hear about the passing of your mom. This must be a very difficult time for you." What communication technique is the nurse demonstrating?

1. Empathy
2. Facilitation

3. Reflecting
4. Clarification

ANS: 1

Page: 11

	Feedback
1.	This is correct. Empathy shares and accepts the patient's feelings. Empathy is caring about and for the patient as you are speaking together. In this scenario, the nurse is caring about and for the patient who just lost her mother.
2.	This is incorrect. Facilitation uses simple verbal statements or words to encourage the patient to continue to tell the story such as "uh-huh" or "Mmmm."
3.	This is incorrect. Reflecting is stating the observed. The nurse would repeat the patient's words specifically to encourage elaboration of the patient's self-report. This encourages more discussion.
4.	This is incorrect. This is not clarification. You would obtain clarification if the patient does not clearly express the problem or issue and you are confused about what the patient is saying to you.

36. The hospital nurse is conducting the initial interview with a patient who does not speak the same language as the nurse. What is a general principle when finding an interpreter?

1. Direct all your questions to the interpreter without looking at the patient.
2. Use your resources to find a trained face-to-face interpreter.
3. If a family member is available, ask him or her to be the interpreter.
4. Ask all the questions first so the interpreter can then ask the patient all at once.

ANS: 2

Page: 18

	Feedback
1.	This is incorrect. You should not look at the interpreter when asking questions. During the interview and assessment look at the patient, not the interpreter.
2.	This is correct. Use your resources to find a trained face-to-face interpreter. A professional interpreter will be able to convey objective information between you and the patient. Ask the patient about any preference for a same-gender interpreter.
3.	This is incorrect. It is not recommended to use family members during an assessment to interpret for the patient because they could be subjective, give their own answers, or omit information.
4.	This is incorrect. You should not cluster the questions. Ask simple and clear questions one at a time. The nurse should also provide time for the patient to ask questions.

37. As you enter the examination room to start the health history interview, the patient immediately starts yelling at you because he waited 45 minutes in the waiting room. He is angry and upset. You should:

1. Tell the patient to lower his voice and stop yelling.
2. Put your hand on the patient's shoulder and tell him it will never happen again.
3. Not argue with the patient and be empathetic.
4. Tell the patient that you will be right back and go get the health-care provider.

ANS: 3

Page: 15

	Feedback
1.	This is incorrect. You should not try to confront the patient but be calm and reassuring.
2.	This is incorrect. You should never touch a patient without his or her permission. In this situation, the patient is very angry and it may be unsafe to touch the patient.
3.	This is correct. Be calm, reassuring, and empathetic. Do not argue with the patient.
4.	This is incorrect. This may provoke the patient to become angrier because he already waited 45 minutes. Stay with the patient and start the interview by speaking softly and using simple questions.

Completion

38. The three phases of the interview, in order, are: 1) _____, 2) _____, and 3) _____.

ANS: introductory, working, summarization

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Feedback: The three phases of the interview, in order, are: the introductory phase, the working phase, and the summarization phase.