Brunner and Suddarth's Textbook of Medical - Surgical Nursing 16th edition Hinkle Test Bank

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Test Bank Questions
Chapter 1: Professional Nursing Practice

1. A nurse is involved in a program that aims to increase the use of health informatics. What is the **most** likely outcome of this program if it is successful?
A) Rapid access to client information by everyone involved in the client's care
B) Increased participation by clients in their care
C) Centralization of care into centers where there are more health professionals
D) Increased interprofessional collaboration

2. An 80-year-old client is admitted with a diagnosis of community-acquired pneumonia. During admission the client states, "I have a living will." What implication of this should the nurse recognize?
A) This document is always honored, regardless of circumstances.
B) This document specifies the client's wishes before hospitalization.
C) This document is binding for the duration of the client's life.
D) This document has been drawn up by the client's family to determine DNR status.

3. A nurse has been providing ethical care for many years and is aware of the need to maintain the ethical principle of nonmaleficence. Which of the following actions would be considered a violation of this principle?
A) Discussing a DNR order with a terminally ill client
B) Assisting a semi-independent client with ADLs
C) Refusing to administer pain medication as prescribed
D) Providing more care for one client than for another

4. The health care provider has recommended an amniocentesis for an 18-year-old primiparous client. The client is at 34 weeks' gestation and does not want this procedure but the health care provider arranges for the amniocentesis to be performed. The nurse should recognize that the provider is in violation of which ethical principle?
A) Veracity
B) Beneficence
C) Nonmaleficence
D) Autonomy

5. During a discussion with the client and the client's spouse, the nurse discovers that the client has a living will. How does the presence of a living will influence the client's care?
A) The client is legally unable to refuse basic life support.
B) The health care provider can override the client's desires for treatment if desires are not evidence based.
C) The client may nullify the living will during the hospitalization.
D) Power of attorney may change while the client is hospitalized.

6. A recent nursing graduate is aware of the differences between nursing actions that are independent and nursing actions that are interdependent. A nurse performs an interdependent nursing intervention when performing which action?
A) Auscultating a client's apical heart rate during an admission assessment
B) Providing mouth care to a client who is unconscious following a cerebrovascular accident
C) Administering an IV bolus of normal saline to a client with hypotension
D) Providing discharge teaching to a postsurgical client about the rationale for a course of oral antibiotics

7. A hospital audit reveals that four clients in the hospital have current orders for restraints. The nurse knows that restraints are an intervention of last resort, and that it is inappropriate to apply restraints to which of the following clients?
A) A postlaryngectomy client who is attempting to pull out the tracheostomy tube
B) A client in hypovolemic shock trying to remove the dressing over a central venous catheter
C) A client with urosepsis who is ringing the call bell incessantly to use the bedside commode
D) A client with depression who has just tried to commit suicide and whose medications are not achieving adequate symptom control

8. A care conference has been organized for a client with complex medical and psychosocial needs. When applying the principles of critical thinking to this client's care planning, the nurse should **most** exemplify what characteristic?
A) Willingness to observe behaviors
B) A desire to utilize the nursing scope of practice fully
C) An ability to base decisions on what has happened in the past
D) Openness to various viewpoints

9. The nurse is providing care for a client with chronic obstructive pulmonary disease (COPD). The nurse's most recent assessment reveals an SaO_2 of 89%. The nurse is aware that part of critical thinking is determining the significance of data that have been gathered. What characteristic of critical thinking is used in determining the **best** response to this assessment finding?
A) Extrapolation
B) Inference
C) Characterization
D) Interpretation

10. A nurse provides care on an orthopedic reconstruction unit and is admitting two new clients, both status post–knee replacement. What would be the **best** explanation as to why their care plans may be different from each other?
A) Clients may have different qualifications for government subsidies.
B) Individual clients are seen as unique and dynamic, with individual needs.

C) Nursing care may be coordinated by members of two different health disciplines.
D) Clients are viewed as dissimilar according to their attitude toward surgery.

11. The nurse is caring for a client whose family members are in a bitter conflict about the best course of treatment for the client. How should the nurse **best** address this challenging situation?
A) Seek guidance from the client's primary health care provider
B) Offer to act as a mediator in the family's conflict
C) Involve the institution's ethics committee
D) Educate the client about the need for assertiveness skills

12. The nurse is preparing a wellness program for seniors at a community center. Which concept of wellness should the nurse utilize when planning the program?
A) Wellness is the absence of sickness.
B) A person needs to be proactive in achieving wellness.
C) Each person views wellness in the same way.
D) Wellness is static and unchanging.

13. The nurse is engaging in critical thinking while caring for a group of clients. Which situation is an example of critical thinking by the nurse?
A) Following unit policy when administering pain medication
B) Administering an analgesic according to the health care provider's order
C) Working with the client to find a nonpharmacologic pain relief measure
D) Assessing the level of pain before administering pain medication according to health care provider's order

14. The public health nurse is presenting a health promotion class to a group of new parents. How should the nurse best define health?
A) Physical, mental, and social well-being
B) The absence of disease or stabilization of existing diseases
C) A state of having fulfillment in all domains of life
D) Individual and societal well-being

15. The nurse is admitting a client to the medical unit after they were transferred from the emergency department. What is the nurse's priority action at this time?
A) Identifying the immediate needs of the client
B) Checking the admitting health care provider's prescriptions
C) Obtaining a baseline set of vital signs
D) Allowing the family to be with the client

16. The student nurse is preparing for practice after graduation. Which action will the nurse take when exploring the legal basis for the scope of practice?
A) Consult the nurse practice act in the nurse's jurisdiction.

B) Consult the Nursing code of ethics.
C) Consult the institution's code of nursing conduct.
D) Consult the client for their preferences.

17. In the process of planning a client's care, the nurse suspects a history of alcohol use. What should the nurse take as the first step when planning this client's care?
A) Collecting and analyzing data that corroborate the finding
B) Establishing a plan to address the underlying problem
C) Assessing the severity of the problem
D) Evaluating the client's chances of recovery

18. The nurse is providing care for a client who has a diagnosis of pneumonia due to *Streptococcus pneumonia* infection. What action by the nurse would constitute recognizing cues as part of the clinical judgment model?
A) Auscultating lung sounds
B) Administering oxygen to keep O2 sats >92%
C) Sending client for a chest x-ray
D) Collecting sputum sample

19. A client agreed to be a part of a research study involving migraine headache management. The client asks the nurse if a placebo was given for pain management or if the new drug that is undergoing clinical trials was given. After discussing the client's distress, it becomes evident to the nurse that the client did not fully understand the informed consent document that was signed at the start of the research study. What is the best response by the nurse?
A) "Would you like to talk to the research team about not participating?"
B) "I have no idea what is being given for your migraine."
C) "What difference does it make? How is your headache?"
D) "You signed the informed consent documents prior to the treatment."

20. The nurse is developing nursing interventions to increase mobility in a new surgical client. Which activity would the nurse include in the plan of care?
A) Ambulate with the client twice a day.
B) Ask unlicensed assistive personnel (UAP) to ambulate client in the hall twice a day.
C) Encourage client to be up ad lib.
D) Allow the client to rest for a day before beginning activity

21. The nurse is developing a plan of care for a client admitted with chronic obstructive pulmonary disease. Using the Maslow hierarchy of needs, which action should the nurse give the highest priority?
A) The client can maintain oxygen saturations
B) Client is making their own healthcare decisions
C) Client feels good about themselves
D) The client feels safe

22. The nurse is caring for a client with cancer who is undergoing genetic testing. The nurse explains that genetic testing will affect which aspects of the client's care? Select all that apply.
A) Screening for genetic mutations
B) Diagnosing the specific type of cancer
C) Providing information on prognosis
D) Choosing specific treatments
E) Predicting lifespan

23. The nurse is asked to speak to members of a self-care education program. Which topic(s) would be a primary focus for promoting self-care? Select all that apply.
A) Disease prevention
B) Management of illness
C) Government advocacy and lobbying
D) Judicious use of online communities
E) Judicious use of the health care system

24. The nurse is evaluating the plan of care for a client who had a total hip replacement. Which action(s) will the nurse perform during this step of the nursing process? Select all that apply.
A) Determine if any new problems have arisen
B) Change expected outcomes if they are not realistic.
C) Determine whether priorities need to be reordered.
D) Discontinue nursing interventions that are no longer needed.
E) Check that pain assessments are being performed with vital signs.

25. The role of the nurse in healthcare has changed since the 1990s. What focused population health goals have led to the need to alter the role of the nurse? Select all that apply.
A) The need to decrease the cost of health care
B) The need to reduce unnecessary sickness and death
C) The need to improve the quality of nursing education
D) The need to increase the number of nursing jobs available
E) The need to increase the public perception of nursing

Test Bank Answer Key
Chapter 1: Professional Nursing Practice

1. **A.** The essence of health informatics is rapid and comprehensive access to client information. This can allow for a decentralization of care and it may or may not cause clients to become more involved in their care. Health informatics alone will not result in interprofessional collaboration.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Safe and Effective Care Environment: Management of Care
Cognitive Level: Apply
Integrated Process: Communication and Documentation
Page and Header: 5, Health Informatics

2. **B.** A living will is one type of advance directive. In most situations, living wills are limited to situations in which the client's medical condition is deemed terminal. The other answers are incorrect because living wills are not always honored in every circumstance, they are not binding for the duration of the client's life, and they are not drawn up by the client's family.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Safe and Effective Care Environment: Management of Care
Cognitive Level: Analyze
Integrated Process: Communication and Documentation
Page and Header: 17, Patient Self-Determination

3. **C.** The duty not to inflict as well as prevent and remove harm is termed nonmaleficence. Discussing a DNR order with a terminally ill client and assisting a client with ADLs would not be considered contradictions to the nurse's duty of nonmaleficence. Some clients justifiably require more care than others.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Safe and Effective Care Environment: Management of Care
Cognitive Level: Analyze
Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 15-16, 1-5: Common Ethical Principles

4. **D.** The principle of autonomy specifies that individuals have the ability to make a choice free from external constraints. The provider's actions in this case violate this principle. This action may or may not violate the principle of beneficence. Veracity centers on truth-telling and nonmaleficence is avoiding the infliction of harm.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Safe and Effective Care Environment: Management of Care
Cognitive Level: Analyze
Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 15-16, 1-5: Common Ethical Principles

5. **C.** Because living wills are often written when the person is in good health, it is not unusual for the client to nullify the living will during illness. A living will does not make a client legally unable to refuse basic life support. The health care provider may disagree with the client's wishes, but is ethically bound to carry out those wishes. A power of attorney is not synonymous with a living will.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Safe and Effective Care Environment: Management of Care
Cognitive Level: Apply
Integrated Process: Communication and Documentation
Page and Header: 17, Patient Self-Determination

6. **C.** Although many nursing actions are independent, others are interdependent, such as carrying out prescribed treatments; administering medications and therapies; collaborating with other health care team members to accomplish specific, expected outcomes; and to monitor and manage potential complications. Irrigating a wound, administering pain medication, and administering IV fluids are interdependent nursing actions and require a health care provider's order. An independent nursing action occurs when the nurse assesses a client's heart rate, provides discharge education, or provides mouth care.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Safe and Effective Care Environment: Management of Care
Cognitive Level: Analyze
Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 13, Implementation

7. **C.** Restraints should never be applied for staff convenience. The client with urosepsis who is frequently ringing the call bell is requesting assistance to the bedside commode; this is appropriate behavior that will not result in client harm. The other described situations could plausibly result in client harm; therefore, it is more appropriate to apply restraints in these instances.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Safe and Effective Care Environment: Safety and Infection Control
Cognitive Level: Analyze
Integrated Process: Nursing Process (Clinical Problem-solving Process)

Page and Header: 16, Restraints

8. **D.** Willingness and openness to various viewpoints are inherent in critical thinking; these allow the nurse to reflect on the current situation. An emphasis on the past, willingness to observe behaviors, and a desire to utilize the nursing scope of practice fully are not central characteristics of critical thinkers.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Safe and Effective Care Environment: Management of Care
Cognitive Level: Apply
Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 6-7, Critical Thinking, Clinical Reasoning, And Clinical Judgment

9. **D.** Nurses use interpretation to determine the significance of data that are gathered. This specific process is not described as extrapolation, inference, or characterization.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Physiological Integrity: Reduction of Risk Potential
Cognitive Level: Understand
Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 9-10,

10. **B.** Regardless of the setting, each client situation is viewed as unique and dynamic. Differences in insurance coverage and attitude may be relevant, but these should not fundamentally explain the differences in their nursing care. Nursing care should be planned by nurses, not by members of other disciplines.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Safe and Effective Care Environment: Management of Care
Cognitive Level: Analyze
Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 1-2, The Patient: Consumer Of Nursing And Health Care

11. **C.** Challenging ethical or moral situations often benefit from the involvement of the ethics committee. Acting independently in the role of mediator likely goes beyond the nurse's skill and scope of practice. The primary health care provider likely cannot resolve this issue independently. Assertiveness on the part of the client may or may not be beneficial.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Safe and Effective Care Environment: Management of Care
Cognitive Level: Apply

Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 17-18, Ethics Committees

12. **B.** Wellness is a proactive state involving self-care activities aimed at physical, psychological, social, and spiritual well-being. Wellness exists on a continuum and is not merely the absence of sickness. Wellness is subjective and, therefore, is not the same for each person. Because wellness is the ability to adjust and adapt to varying situations, the definition of wellness can change for a person over time.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Health Promotion and Maintenance
Cognitive Level: Understand
Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 3, Wellness

13. **C.** Critical thinking involves the formulation of options that are most appropriate for a situation and that are client-centered. By working with the client to find a pain relief measure for that client's specific situation, the nurse is exhibiting critical thinking. Following unit policy, administering medication according to a prescription by the health care provider, and assessing level of pain before administering a pain medication are examples of safe care but not critical thinking that is client-centered.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Physiological Integrity: Basic Care and Comfort
Cognitive Level: Apply
Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 6-7, Critical Thinking, Clinical Reasoning, And Clinical Judgment

14. **A.** The World Health Organization (WHO) defines health in the preamble to its constitution as a "state of complete physical, mental, and social well-being and not merely the absence of disease and infirmity." Health and illness are experienced on a continuum by each individual. The concept of wellness includes the additional consideration of societal well-being. Wellness has been thought of as being equivalent to health but is more comprehensive and interrelational and includes various aspects of life that lead to health: emotional, environmental, financial, intellectual, occupational, physical, social, and spiritual. Fulfillment is consistent with health, but the concepts are not synonymous.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Health Promotion and Maintenance
Cognitive Level: Apply
Integrated Process: Teaching/Learning
Page and Header: 3, Health

15. **A.** Among the nurse's important functions in health care delivery, identifying the client's immediate needs and working in concert with the client to address them is most important. The other nursing functions are important, but they are not the priority at this time.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Safe and Effective Care Environment: Management of Care
Cognitive Level: Apply
Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 1-2, The Patient: Consumer Of Nursing And Health Care

16. **A.** Nurses have a responsibility to comply with the nurse practice act of the jurisdiction in which they practice. A nurse's scope of practice is not determined by codes of ethics, codes of conduct, or client preferences.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Safe and Effective Care Environment: Management of Care
Cognitive Level: Understand
Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 1, Nursing

17. **A.** The first step is to collect and analyze data. After data is collected, then the nurse can assess the severity of the problem, establish a plan of care and finally evaluate the plan of care.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Safe and Effective Care Environment: Management of Care
Cognitive Level: Apply
Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 10, Assessment

18. **A.** The recognizing cues phase is where assessments are gathered. This would include auscultating lung sounds. Sending the client for a chest x ray, collecting a sputum sample, and administering oxygen are all part of the take action phase.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Safe and Effective Care Environment: Management of Care
Cognitive Level: Analyze
Integrated Process: Clinical Judgment
Page and Header: 7-8, Chart 1-1: Strategies for Developing Critical Thinking

19. **A.** Telling the truth (veracity) is one of the basic principles of nursing culture. Three ethical dilemmas in clinical practice that can directly conflict with this principle are the use of placebos (nonactive substances used for treatment), not revealing a diagnosis to a client, and revealing a diagnosis to persons other than the client with the diagnosis. The nurse should allow the participant to discontinue participation in the study if they did not understand the informed consent. Saying "What difference does it make?" or "You signed informed consent documents" is not helpful because these statements are not supportive. While it is true that the nurse does not know what treatment the client received, this statement is also not supportive.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Safe and Effective Care Environment: Management of Care
Cognitive Level: Analyze
Integrated Process: Communication and Documentation
Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 16, Trust Issues

20. **A.** The client should be ambulated as soon as possible after surgery. The nurse should be the person assisting the client the first few times they ambulate. The UAP may assist, but should not be the sole individual ambulating the client. Also, the client should be monitored and not allowed to move ad lib at first.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Physiological Integrity: Basic Care and Comfort
Cognitive Level: Apply
Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 12, Establishing Goals

21. **A.** Physiologic needs are the basic needs that must be met in order to progress to higher levels. Therefore, maintaining oxygen saturations would be the priority. Once those needs are met, the other needs can then be met.

Format: Multiple Choice
Chapter 1: Professional Nursing Practice
Client Needs: Safe and Effective Care Environment: Management of Care
Cognitive Level: Analyze
Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 2-3, The Patient’s Basic Needs: Maslow’s Hierarchy of Needs

22. **A, C, D.** Advances in genetic testing have improved the process of screening for genetic mutations in cancer cells, diagnosing specific types of cancer, and choosing specific treatments for certain types of cancers. Genetic testing does not provide information on prognosis nor does it predict lifespan.

Format: Multiple Selection
Chapter 1: Professional Nursing Practice

Client Needs: Health Promotion and Maintenance
Cognitive Level: Apply
Integrated Process: Teaching/Learning
Page and Header: 5, Advances In Technology And Genetics

23. **A, B, E.** Organized self-care education programs primarily emphasize health promotion, disease prevention, management of illness, and judicious use of the professional health care system. Topics such as lobbying and Internet activities would be secondary.

Format: Multiple Selection
Chapter 1: Professional Nursing Practice
Client Needs: Health Promotion and Maintenance
Cognitive Level: Understand
Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 3, Health Promotion

24. **A, B, C, D.** During the evaluation step of the nursing process, the nurse determines whether new actual or potential health problems have developed that need to be added to the plan of care. The nurse also checks the outcomes to determine whether they have been resolved, need modification, or whether new outcomes need to be developed. The nurse evaluates the priorities for care to see whether they need to be reordered. As the client's health conditions change, nursing interventions may also need to be added or discontinued. A chart audit to determine whether pain assessments have been completed is not part of the nursing process.

Format: Multiple Selection
Chapter 1: Professional Nursing Practice
Client Needs: Physiological Integrity: Reduction of Risk Potential
Cognitive Level: Apply
Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 13, Evaluation

25. **A, B.** The role of the nurse has expanded to improve the distribution of health care services and to decrease the cost of health care through health promotion. The other answers are incorrect because the expansion of roles in nursing did not occur to improve education, increase the number of nursing jobs, or increase public perception.

Format: Multiple Selection
Chapter 1: Professional Nursing Practice
Client Needs: Health Promotion and Maintenance
Cognitive Level: Understand
Integrated Process: Nursing Process (Clinical Problem-solving Process)
Page and Header: 4-5, Healthy People 2030