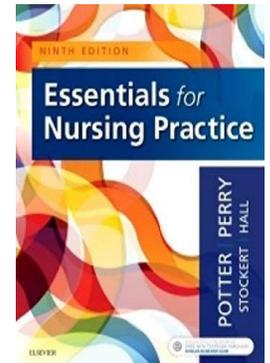


# TEST BANK - For Essentials for Nursing Practice 9th Edition

## Chapter 01: Professional Nursing

### Potter: Essentials for Nursing Practice, 9th Edition



#### MULTIPLE CHOICE

1. Which action by the nurse demonstrates implementation of Florence Nightingale's original theories about nursing care?
  - a. The patient is gently bathed and given fresh linens after giving birth.
  - b. The nurse forms a close therapeutic relationship with the patient.
  - c. The nurse helps the patient conserve energy for healing processes.
  - d. The nurse views the patient as a unique, ever-changing energy field.

ANS: A

Florence Nightingale worked to improve sanitation and healing environments for patients. Gently bathing and providing fresh linens to patients is an example of Nightingale's theory in practice. Formation of a close therapeutic relationship with the patient, energy conservation, and viewing patients as energy fields were not concepts included in Nightingale's theory of nursing practice.

DIF: Cognitive Level: Apply (Application)

OBJ: Discuss the influence of social, political, and economic changes on nursing practices.

TOP: Nursing Process: Implementation MSC: NCLEX: Basic Care and Comfort

2. The nurse is mandated by the state to complete 25 contact hours of nursing education before the nursing license may be renewed. Which term best describes this requirement?
  - a. In-service education
  - b. Advanced education
  - c. Continuing education
  - d. Certification education

ANS: C

Continuing education is required for professionals in many states. Continuing education involves formal, organized educational programs offered by universities, hospitals, state nurses' associations, professional nursing organizations, and educational and health care institutions. In-service education programs are instruction or training provided by a health care agency or institution designed to increase the knowledge, skills, and competencies of nurses and other health care professionals employed by the institution. Some roles for RNs in nursing require advanced graduate degrees, such as a clinical nurse specialist or nurse practitioner.

DIF: Cognitive Level: Apply (Application)

OBJ: Discuss the importance of education in professional nursing practice.

TOP: Nursing Process: Communication and Documentation

MSC: NCLEX: Management of Care

3. The nurse is caring for a patient who suddenly becomes acutely short of breath. The nurse elevates the head of the patient's bed, checks the patient's pulse oximetry, and administers 2 L of oxygen before notifying the patient's physician. Which term best describes the actions of the nurse?
  - a. Accountability



- b. Autonomy
- c. Licensure
- d. Certification

ANS: B

Autonomy is essential to professional nursing and involves the initiation of independent nursing interventions without medical orders. Accountability means that you are professionally and legally responsible for the type and quality of nursing care provided. To obtain licensure in the United States, RN candidates must pass the NCLEX-RN® examination administered by the individual State Boards of Nursing to obtain a nursing license. Beyond the NCLEX-RN®, some nurses choose to work toward certification in a specific area of nursing practice.

DIF: Cognitive Level: Apply (Application)

OBJ: Discuss the characteristics of professionalism in nursing.

TOP: Nursing Process: Implementation MSC: NCLEX: Management of Care

4. Which type of program is appropriate to educate staff about new fall prevention protocols that are to be implemented on the nursing unit?
- a. In-service education
  - b. Advanced education
  - c. Continuing education
  - d. Certification education

ANS: A

In-service education programs are instruction or training provided by a health care agency or institution designed to increase the knowledge, skills, and competencies of nurses and other health care professionals employed by the institution. Some roles for RNs in nursing require advanced graduate degrees, such as a clinical nurse specialist or nurse practitioner. Continuing education is required for professionals in many states. Continuing education involves formal, organized educational programs offered by universities, hospitals, state nurses' associations, professional nursing organizations, and educational and health care institutions.

DIF: Cognitive Level: Apply (Application)

OBJ: Discuss the importance of education in professional nursing practice.

TOP: Nursing Process: Teaching and Learning

MSC: NCLEX: Management of Care

5. Which program is appropriate for a nurse who wishes to become an expert in ostomy and wound care?
- a. Specialty certification
  - b. Master of Science program
  - c. Doctoral degree program
  - d. Continuing education program

ANS: A



Specialty certification programs are appropriate for nurses who wish to become experts in certain areas of nursing care such as perioperative care, wound care, or occupational health. Master of Science programs prepare nurses for advanced practice roles as educators, administrators, or clinical nurse leaders. Doctoral programs prepare nurses for advanced clinical practice and research. Continuing education is required for professionals in many states. Continuing education involves formal, organized educational programs offered by universities, hospitals, state nurses' associations, professional nursing organizations, and educational and health care institutions.

DIF: Cognitive Level: Apply (Application)

OBJ: Describe the roles and career opportunities for nurses.

TOP: Nursing Process: Teaching and Learning

MSC: NCLEX: Management of Care

6. Which action of the nurse demonstrates coordination of care for the patient?
- The nurse creates a warm, therapeutic relationship with the patient by actively listening to what the patient has to say.
  - The nurse works with the physical therapist to determine how to best transfer the patient from the bed to the chair.
  - The nurse educates the patient about energy conservation techniques to increase activity tolerance.
  - The nurse uses clear and objective language when documenting assessment findings in the patient's medical record.

ANS: B

Coordination of care involves working with other health care professionals to meet the needs of the individual patient. The nurse can do this by working with the physical therapist to determine how to best transfer the patient from the bed to the chair. Developing a warm therapeutic relationship demonstrates caring and effective communication. Educating the patient about energy conservation and charting clearly are not examples of coordination of care.

DIF: Cognitive Level: Apply (Application)

OBJ: Describe the roles and career opportunities for nurses.

TOP: Nursing Process: Implementation MSC: NCLEX: Management of Care

7. The nurse feels that an assigned duty is outside the scope of nursing practice. Which document is the best source to answer the nurse's concern?
- ANA Code of Ethics
  - State Nurse Practice Act
  - QSEN Initiative Act
  - Nurse's Bill of Rights

ANS: B



In the United States each State Board of Nursing oversees its Nurse Practice Act (NPA), which regulates the scope of nursing practice for the state and protects public health, safety, and welfare. The ANA's Code of Ethics for Nurses: Interpretation and Application (2010) provides a guide (not a law) for carrying out nursing responsibilities to ensure high-quality nursing care and provide for the ethical obligations of the profession. The Quality and Safety Education for Nurses (QSEN) initiative responds to reports about safety and quality patient care by the National Academy, Health and Medicine Division. The Nurses' Bill of Rights is a statement about the professional rights of nurses and does not dictate the scope of practice for nurses.

DIF: Cognitive Level: Apply (Application)

OBJ: Describe the purpose of professional standards of nursing practice.

TOP: Nursing Process: Implementation MSC: NCLEX: Management of Care

8. Which professional nursing organization ensures that nursing programs adequately prepare students to enter the nursing profession?
- Federal Nurses Association (FNA)
  - International Council of Nurses (ICN)
  - National League for Nursing (NLN)
  - National Student Nurses Association (NSNA)

ANS: C

The National League for Nursing (NLN) oversees nursing educational programs to help ensure that students are well prepared to enter the nursing profession. The Federal Nurses Association (FNA) is for nurses who are on active duty within the American Armed Forces. The National Student Nurses Association (NSNA) provides a voice for nursing students and does not oversee nursing programs. The International Council of Nurses (ICN) is a global organization that promotes quality nursing care for all people.

DIF: Cognitive Level: Understand (Comprehension)

OBJ: Discuss the importance of education in professional nursing practice.

TOP: Nursing Process: Teaching and Learning

MSC: NCLEX: Management of Care

## MULTIPLE RESPONSE

1. Which actions of the nurse demonstrate the nursing role of leader? (*Select all that apply.*)
- The nurse implements a new skin-care protocol to reduce decubitus ulcers.
  - The nurse develops a therapeutic relationship with the patient's family members.
  - The nurse ensures that the patient assignments are created fairly for each shift.
  - The nurse works to meet the patient's cultural preferences for personal care.
  - The nurse clearly communicates expected standards of care for the patients.

ANS: A, C, E

The nurse functions as a leader by implementing new protocols, ensuring that patient assignments are made fairly and clearly communicating the expected standards of care. Developing a therapeutic relationship and meeting the cultural preferences of patients are both caring behaviors of the nurse.

DIF: Cognitive Level: Apply (Application)

OBJ: Describe the roles and career opportunities for nurses.



TOP: Nursing Process: Implementation MSC: NCLEX: Management of Care

2. Which actions of the nurse demonstrate the nursing role of educator? (*Select all that apply.*)
- The nurse teaches the patient's family how to perform sterile dressing changes.
  - The nurse includes the patient in clinical decision making whenever possible.
  - The nurse provides written teaching materials in the patient's preferred language.
  - The nurse speaks about diabetes management at a professional conference.
  - The nurse assesses for adequate protein intake for a patient on a vegetarian diet.

ANS: A, C, D

The nurse acts as an educator by teaching the patient's family about care and speaking at professional conferences. Written teaching materials should be provided in the patient's preferred language to maximize learning and retention of information. Determining protein intake is part of the assessment process. Including the patient in clinical decision making demonstrates the role of nurse as advocate.

DIF: Cognitive Level: Apply (Application)

OBJ: Describe the roles and career opportunities for nurses.

TOP: Nursing Process: Implementation MSC: NCLEX: Management of Care

3. Which nursing actions incorporate informatics into nursing practice? (*Select all that apply.*)
- The nurse uses written materials to teach a patient who is hard of hearing.
  - The nurse uses an online database to learn more about the patient's disease.
  - The nurse uses a bar-code scanner to prevent medication administration errors.
  - The nurse teaches the patient's family how to perform range of motion.
  - The nurse checks the electronic record to review the patient's medical history.

ANS: B, C, E

Informatics is the use of technology such as electronic medical records, online databases for research and bar-code scanning to prevent medication errors. Informatics does not apply to patient teaching through written materials or demonstration of range of motion.

DIF: Cognitive Level: Apply (Application)

OBJ: Discuss the influence of social, political, and economic changes on nursing practices.

TOP: Nursing Process: Implementation MSC: NCLEX: Management of Care

4. Which action of the nurse demonstrates patient-centered care? (*Select all that apply.*)
- The nurse elevates the head of the bed when the patient becomes short of breath.
  - The nurse and patient work together to determine the patient's health goals.
  - The nurse checks the patient's name and birthdate before giving medications.
  - The nurse maintains privacy when conversing with the patient and providing care.
  - The nurse respects the patient's choice to refuse transfusion of blood products.

ANS: B, D, E

Patient-centered care is demonstrated by maintaining privacy, respecting the patient's choices and working together to determine the patient's health goals. Checking the patient's identifiers and elevating the head of the bed are routine nursing interventions that do not demonstrate patient-centered care.

DIF: Cognitive Level: Apply (Application)

OBJ: Discuss the characteristics of professionalism in nursing.

TOP: Nursing Process: Implementation MSC: NCLEX: Management of Care



**Chapter 02: Health and Wellness**  
**Potter: Essentials for Nursing Practice, 9th Edition**

---

**MULTIPLE CHOICE**

1. Which statement by the patient indicates to the nurse that the patient is in the preparation stage of smoking cessation?
  - a. "I don't ever want to quit smoking."
  - b. "I hope to quit smoking sometime before I die."
  - c. "I am really working hard to stop smoking."
  - d. "I stocked up on nicotine patches and gum."

ANS: D

"I stocked up on nicotine patches and gum" indicates that the patient is in the preparation stage of behavior change. "I hope to quit smoking sometime before I die" indicates that the patient is in the contemplation stage. "I am really working hard to stop smoking" indicates that the patient is in the action stage. "I don't ever want to quit smoking" indicates that the patient is in the precontemplation stage.

DIF: Cognitive Level: Apply (Application)

OBJ: Discuss the health belief, health promotion, basic human needs, and holistic health models of health and illness and their relationship to patients' attitudes toward health and health practices.

TOP: Nursing Process: Assessment MSC: NCLEX: Health Promotion and Maintenance

2. Which patient assessment finding must be addressed first according to Maslow's hierarchy of needs?
  - a. The patient is cyanotic and feels short of breath.
  - b. The patient refuses to participate in physical therapy.
  - c. The patient verbalizes anxiety about upcoming surgery.
  - d. The patient is unable to reposition in bed without assistance.

ANS: A

According to Maslow, individuals have to meet lower-level needs before they are able to satisfy higher-level needs. The lowest level on the hierarchy consists of very basic physiological needs such as oxygen, water, food (nutrition), sleep, and sex. The second level on the hierarchy consists of safety needs. The third level on the hierarchy is love and belongingness, which is a desire to belong to groups. The fourth level deals with the need for self-esteem.

DIF: Cognitive Level: Apply (Application)

OBJ: Discuss the health belief, health promotion, basic human needs, and holistic health models of health and illness and their relationship to patients' attitudes toward health and health practices.

TOP: Nursing Process: Assessment MSC: NCLEX: Management of Care

3. Which patient action demonstrates the concept of health promotion?
  - a. The patient receives the influenza vaccination every year.
  - b. The patient participates in cardiac rehabilitation after a heart attack.
  - c. The patient has yearly mammograms to screen for breast cancer.
  - d. The patient follows a macrobiotic, vegetarian diet with organic foods.

ANS: D



Health promotion includes activities to increase well-being and maximize health potential. Patients can do this by following a healthy diet free of chemicals and preservatives. Influenza vaccination, mammograms, and cardiac rehabilitation are examples of health protection to avoid illness, detect it early or maintain function despite chronic illness.

DIF: Cognitive Level: Apply (Application)

OBJ: Describe health promotion and illness prevention activities.

TOP: Nursing Process: Evaluation MSC: NCLEX: Health Promotion and Maintenance

4. Which assessment finding is an example of an internal variable that influences the patient's health beliefs?
- The patient's spiritual beliefs prohibit the use of blood transfusions.
  - The patient's family is homeless after being evicted from their apartment.
  - The patient relies on a pharmacy assistance program to pay for medications.
  - The patient and community prefer natural medicines over prescription drugs.

ANS: A

External variables for health beliefs and practices include family practices, socioeconomic factors, and cultural background. Emotional factors, intellectual background, and developmental stage represent internal variables.

DIF: Cognitive Level: Apply (Application)

OBJ: Describe the variables influencing health beliefs, health practices, and illness behaviors.

TOP: Nursing Process: Assessment MSC: NCLEX: Health Promotion and Maintenance

5. Which action *by the patient best* represents primary prevention?
- The patient utilizes a cane when walking to prevent falls.
  - The patient receives the influenza vaccination every year.
  - The patient participates in physical therapy after having a stroke.
  - The patient takes prescribed blood pressure medication every morning.

ANS: B

A healthy individual getting a flu shot is primary prevention. Primary prevention precedes disease or disability or dysfunction. Primary prevention aimed at health promotion includes health education programs, immunizations, and physical and nutritional fitness activities. Taking blood pressure medication every day is a secondary prevention because the patient is trying to prevent further complications. Physical therapy after a cerebrovascular accident and using a cane for ambulation are considered tertiary prevention as they prevent further complications.

DIF: Cognitive Level: Apply (Application)

OBJ: Compare and contrast the three levels of prevention.

TOP: Nursing Process: Implementation MSC: NCLEX: Health Promotion and Maintenance

6. Which assessment finding is a modifiable risk factor for disease?
- The patient has a family history of breast cancer.
  - The patient smokes two packs of cigarettes every day.
  - The patient was born with a congenital heart defect.
  - The patient's childhood home contained high levels of radon.

ANS: B



Modifiable risk factors for disease may be changed to prevent the patient from becoming ill. Tobacco use is an example of a modifiable risk factor. Childhood exposure to radon, congenital heart defect and family history of cancer are examples of nonmodifiable risk factors.

DIF: Cognitive Level: Apply (Application)

OBJ: Explain how different types of risk factors affect a person's health.

TOP: Nursing Process: Assessment MSC: NCLEX: Health Promotion and Maintenance

7. Which is an example of an acute illness?
- Type 2 diabetes
  - Multiple sclerosis
  - Alcohol addiction
  - Bacterial meningitis

ANS: D

Acute illnesses are considered to last for a short time before resolving, such as bacterial meningitis. Chronic illness lasts longer than 6 months and includes diseases such as diabetes, addiction, and multiple sclerosis.

DIF: Cognitive Level: Apply (Application)

OBJ: Explain how illness affects a patient and family.

TOP: Nursing Process: Assessment MSC: NCLEX: Physiological Adaptation

8. The diabetic patient sees the podiatrist regularly to prevent development of ulcers in the feet. Which term best describes this action of the patient?
- Health promotion
  - Primary prevention
  - Secondary prevention
  - Tertiary prevention

ANS: C

A healthy individual getting a flu shot is primary prevention. Primary prevention precedes disease or disability or dysfunction. Primary prevention aimed at health promotion includes health education programs, immunizations, and physical and nutritional fitness activities. Taking blood pressure medication every day is a secondary prevention because the patient is trying to prevent further complications. Physical therapy after a cerebrovascular accident and using a cane for ambulation are considered tertiary prevention as they prevent further complications. Health promotion includes activities to increase well-being and function rather than to prevent complications from existing disease.

DIF: Cognitive Level: Apply (Application)

OBJ: Compare and contrast the three levels of prevention.

TOP: Nursing Process: Implementation MSC: NCLEX: Health Promotion and Maintenance

9. Which statement indicates the patient's perception of susceptibility to illness as described by the Health Belief Model?
- "I am never going to get lung cancer so I refuse to stop smoking."
  - "Cancer is no big deal with all of the new treatments available now."
  - "I have been smoking for so many years that I will never be able to quit."
  - "I cannot afford the nicotine patches so I might as well keep on smoking."



ANS: A

The first component of the Health Belief Model involves the patient's assessment of susceptibility to illness. An example of this is the patient who denies the risk of lung cancer due to smoking. The second component of the Health Belief Model is the perception of the seriousness of the illness. An example of this is the patient who believes that cancer is no big deal. The third component of the Health Belief Model is the likelihood that the patient will take corrective action. An example of this is the patient who sees no need to quit smoking. The Health Promotion Model includes the readiness for the patient to change. In this case, the patient has no intention to quit smoking.

DIF: Cognitive Level: Apply (Application)

OBJ: Discuss the health belief, health promotion, basic human needs, and holistic health models of health and illness and their relationship to patients' attitudes toward health and health practices.

TOP: Nursing Process: Assessment MSC: NCLEX: Health Promotion and Maintenance

10. Which action by the patient reflects a cultural influence on health practices?
- The patient uses seaside purification rituals to ease arthritis pain.
  - The patient refuses to take blood pressure medicine due to the side effects.
  - The patient has annual mammograms to screen for breast cancer.
  - The patient avoids eating red meat due to a family history of heart disease.

ANS: A

Cultural background influences a person's beliefs, values, and customs. It influences personal health practices. An example of this is the patient's use of seaside purification rituals to ease arthritis pain. The patient's preventative screening tests and refusal to take medications due to side effects are not due to cultural influences. Family history is separate from cultural influence.

DIF: Cognitive Level: Apply (Application)

OBJ: Describe health promotion and illness prevention activities.

TOP: Nursing Process: Assessment MSC: NCLEX: Health Promotion and Maintenance

11. Which is an example of how a psychosocial variable affects the patient's health beliefs?
- The patient was diagnosed with rheumatoid arthritis as a young child.
  - The patient has always been terrified of needles and so never goes to the doctor.
  - The patient's neighborhood has few opportunities to buy fresh fruits or vegetables.
  - The patient requires three antihypertensive medications to control blood pressure.

ANS: B

Fear of needles is an example of how a psychosocial variable affects the patient's health beliefs. Diagnosis of arthritis, neighborhood availability of fresh fruits and the use of antihypertensive medications are not psychosocial variables.

DIF: Cognitive Level: Apply (Application)

OBJ: Describe the variables influencing health beliefs, health practices, and illness behaviors.

TOP: Nursing Process: Assessment MSC: NCLEX: Health Promotion and Maintenance

12. Which statement by the nurse will help the patient progress to the preparation stage for smoking cessation?
- "You will die of emphysema or lung cancer if you do not stop smoking."
  - "Research has shown that smoking causes emphysema and lung cancer."



- c. "The physician will give you nicotine patches to help you start to quit smoking."
- d. "You need to avoid people who smoke so you will not be tempted to start again."

ANS: C

Providing nicotine patches will help the patient to prepare to quit smoking. Threatening the patient with death and reminding the patient of the health risks due to smoking are not helpful. Encouraging the patient to avoid smokers to avoid temptation to start smoking again indicates that the patient is in the maintenance or action stage already.

DIF: Cognitive Level: Apply (Application)

OBJ: Discuss the health belief, health promotion, basic human needs, and holistic health models of health and illness and their relationship to patients' attitudes toward health and health practices.

TOP: Nursing Process: Implementation MSC: NCLEX: Health Promotion and Maintenance

13. Which is an example of a *Healthy People 2020* goal?
- a. Women and men will receive equally aggressive care for suspected heart attack.
  - b. The patient will participate in a physical therapy program after suffering a stroke.
  - c. The nurse will identify and address stressors unique to multicultural families.
  - d. The nurse will organize mobile mammograms for female patients in the local area.

ANS: A

*Healthy People 2020* includes 600 objectives written in 42 topic areas to provide direction for health care efforts on an individual, community, and national level. Eliminating differences in care for women and men with suspected heart attack is an example of a *Healthy People 2020* goal. Identifying stressors and organizing mammograms are examples of interventions.

*Healthy People 2020* focuses on health promotion and protection at the community level rather than recovery of the individual patient after acute illness.

DIF: Cognitive Level: Apply (Application)

OBJ: Discuss the nurse's role in caring for people, communities, and populations in various states of health and illness. TOP: Nursing Process: Planning

MSC: NCLEX: Health Promotion and Maintenance

14. Which action of the nurse addresses Maslow's need for love and belongingness?
- a. The nurse uses a gait belt and assists the patient to use a walker for ambulation.
  - b. The nurse encourages a widowed patient to join a bereavement support group.
  - c. The nurse plans daily care to allow for rest periods for the patient as needed.
  - d. The nurse reorients the patient to time and place during periods of acute confusion.

ANS: B

The widowed patient can help to achieve Maslow's need for love and belongingness by joining a bereavement support group. Use of a gait belt for ambulation meets the patient's basic physiological needs. Reorientation of a confused patient and allowing for rest periods do not facilitate the patient to achieve the feeling of belonging in a group.

DIF: Cognitive Level: Apply (Application)

OBJ: Discuss the health belief, health promotion, basic human needs, and holistic health models of health and illness and their relationship to patients' attitudes toward health and health practices.

TOP: Nursing Process: Implementation MSC: NCLEX: Health Promotion and Maintenance

15. Which action by the nurse helps to meet the *aesthetic* needs of the patient as described by Maslow?



- a. The nurse uses a drawsheet to carefully reposition the patient in bed.
- b. The nurse puts a beautiful handmade quilt on the bed for the patient to enjoy.
- c. The nurse collaborates with the health care team when scheduling care activities.
- d. The nurse assesses the patient's readiness to learn before beginning teaching.

ANS: B

Aesthetic needs address the patient's desire to appreciate things of beauty and balance. Meeting the patient's aesthetic needs can include putting a beautiful handmade quilt on the bed for the patient to enjoy. Using a drawsheet helps to meet the patient's physiological need for protection from injury. Collaboration with the health care team and assessing readiness for learning do not address aesthetic needs.

DIF: Cognitive Level: Apply (Application)

OBJ: Discuss the health belief, health promotion, basic human needs, and holistic health models of health and illness and their relationship to patients' attitudes toward health and health practices.

TOP: Nursing Process: Implementation MSC: NCLEX: Health Promotion and Maintenance

16. Which action by the nurse helps to meet the *cognitive* needs of the patient as described by Maslow?
- a. Encouraging early ambulation after surgery to prevent formation of blood clots.
  - b. Providing a calm environment when the patient becomes agitated and confused.
  - c. Teaching the patient's family how to perform sterile dressing changes.
  - d. Performing careful perineal care to avoid development of a urinary tract infection.

ANS: B

Providing a calm environment when the patient becomes agitated and confused helps to meet the cognitive needs of the patient. Encouraging postoperative ambulation meets physiological needs of the patient to prevent injury. Teaching the patient's family how to do dressing changes and performing careful perineal care do not facilitate cognitive function of the patient.

DIF: Cognitive Level: Apply (Application)

OBJ: Discuss the health belief, health promotion, basic human needs, and holistic health models of health and illness and their relationship to patients' attitudes toward health and health practices.

TOP: Nursing Process: Implementation MSC: NCLEX: Health Promotion and Maintenance

17. Which action of the nurse demonstrates the concept of the Holistic Health Model?
- a. The nurse incorporates the patient's religious restrictions, economic status and personal preferences when developing the nutrition plan.
  - b. The nurse has the patient demonstrate how to perform a sterile dressing change after teaching about the procedure.
  - c. The nurse consistently uses a 0-10 objective pain rating scale to achieve consistent pain management for the patient.
  - d. The nurse assists the patient to sit up slowly when getting out of bed to avoid fainting from orthostatic hypotension.

ANS: A

The nurse considers the patient's physical, emotional, and spiritual needs to plan care within the Holistic Health Model. The use of return demonstration, objective pain rating scales, and hypotension prevention measures address only the physical needs of the patient.

DIF: Cognitive Level: Apply (Application)



OBJ: Discuss the health belief, health promotion, basic human needs, and holistic health models of health and illness and their relationship to patients' attitudes toward health and health practices.

TOP: Nursing Process: Implementation MSC: NCLEX: Health Promotion and Maintenance

18. Which is an example of an environmental risk factor?
- The patient's drinking water contains high levels of lead.
  - The patient has a strong family history of autoimmune diseases.
  - The patient carefully follows a lactose-free, gluten-free diet.
  - The patient drinks one glass of red wine every night before bed.

ANS: A

Environmental risk factors include exposure to toxic chemicals through drinking water.

Family history, dietary preference, and alcohol intake are not examples of environmental risk factors.

DIF: Cognitive Level: Apply (Application)

OBJ: Explain how different types of risk factors affect a person's health.

TOP: Nursing Process: Assessment MSC: NCLEX: Health Promotion and Maintenance

19. Which assessment finding indicates that the family processes were interrupted by the patient's illness?
- The patient must now follow a gluten-free, low-carbohydrate diet.
  - The patient must use a walker for ambulation to prevent a fall or injury.
  - The patient's spouse had to return to work to maintain the family's income.
  - The patient must take three antihypertensive drugs to control high blood pressure

ANS: C

The need for the patient's spouse to return to work demonstrates that a family process was interrupted by the patient's illness. The need to change the patient's diet, need for multiple antihypertensive drugs, and use of a walker do not indicate changes to the family process.

DIF: Cognitive Level: Apply (Application)

OBJ: Explain how illness affects a patient and family.

TOP: Nursing Process: Assessment MSC: NCLEX: Psychosocial Integrity

20. Which assessment finding indicates that the patient's body image has been altered due to illness?
- The patient developed a strong dislike for any kind of spicy foods.
  - The patient feels uncomfortable wearing a swimsuit after colostomy surgery.
  - The patient refuses to take antihypertensive medications due to the side effects.
  - The patient drinks six glasses of cranberry juice daily to prevent bladder infections.

ANS: B

An example of altered body image after illness is the patient's discomfort when wearing a swimsuit after colostomy surgery. Dislike of spicy foods, refusal to take medication, and drinking cranberry juice do not illustrate altered body image.

DIF: Cognitive Level: Apply (Application)

OBJ: Explain how illness affects a patient and family.

TOP: Nursing Process: Assessment MSC: NCLEX: Health Promotion and Maintenance

## MULTIPLE RESPONSE

