



Test Bank Complete For Fundamentals of Nursing  
11th Edition

**Chapter 01: Nursing Today**  
**Potter: Fundamentals of Nursing, 11th Edition**

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**MULTIPLE CHOICE**

1. Which nurse **most** likely kept records on sanitation techniques and the effects on health? a. Florence Nightingale  
b. Mary Nutting  
c. Clara Barton  
d. Lillian Wald

ANS: A

Nightingale was the first practicing nurse epidemiologist. Her statistical analyses connected poor sanitation with cholera and dysentery. Mary Nutting, Clara Barton, and Lillian Wald came after Nightingale, each contributing to the nursing profession in her own way. Mary Nutting was instrumental in moving nursing education into universities. Clara Barton founded the American Red Cross. Lillian Wald helped open the Henry Street Settlement.

DIF: Understand (comprehension)

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

TOP: Evaluation

MSC: Health Promotion and Maintenance

2. The nurse prescribes strategies and alternatives to attain expected outcome. Which standard of nursing practice is the nurse following? a. Assessment  
b. Diagnosis  
c. Planning  
d. Implementation

ANS: C

In planning, the registered nurse develops a plan that prescribes strategies and alternatives to attain expected outcomes. During assessment, the registered nurse collects comprehensive data pertinent to the patient's health and/or the situation. In diagnosis, the registered nurse analyzes the assessment data to determine the diagnoses or issues. During implementation, the registered nurse implements (carries out) the identified plan.

DIF: Understand (comprehension)

OBJ: Discuss the development of professional nursing roles.

TOP: Planning

MSC: Management of Care

3. An experienced medical-surgical nurse chooses to work in obstetrics. Which level of proficiency is the nurse upon initial transition to the obstetrical floor? a. Novice  
b. Proficient  
c. Competent  
d. Advanced beginner

ANS: A

A beginning nursing student or any nurse entering a situation in which there is no previous level of experience (e.g., an experienced operating room nurse chooses to now practice in home health) is an example of a novice nurse. A proficient nurse perceives a patient's clinical situation as a whole, is able to assess an entire situation, and can readily transfer knowledge gained from multiple previous experiences to a situation. A competent nurse understands the organization and specific care required by the type of patients (e.g., surgical, oncology, or orthopedic patients). This nurse is a competent practitioner who is able to anticipate nursing care and establish long-range goals. A nurse who has had some level of experience with the situation is an advanced beginner. This experience may only be observational in nature, but the nurse is able to identify meaningful aspects or principles of nursing care.

DIF:Apply (application)

OBJ:Discuss the development of professional nursing roles.

TOP:

Evaluation

MSC: Management of Care

4. A nurse assesses a patient's fluid status and decides that the patient needs to drink more fluids. The nurse then encourages the patient to drink more fluids. Which concept is the nurse demonstrating?
- Licensure
  - Autonomy
  - Certification
  - Accountability

ANS: B

Autonomy is an essential element of professional nursing that involves the initiation of independent nursing interventions without medical orders. To obtain licensure in the United States, the RN candidate must pass the NCLEX-RN. Beyond the NCLEX-RN, the nurse may choose to work toward certification in a specific area of nursing practice. Accountability means that you are responsible, professionally and legally, for the type and quality of nursing care provided.

DIF:Apply (application)

OBJ:Discuss the roles and career opportunities for nurses.

TOP: Implementation

MSC: Management of Care

5. A nurse prepares the budget and policies for an intensive care unit. Which role is the nurse implementing?
- Educator
  - Manager
  - Advocate
  - Caregiver

ANS: B

A manager coordinates the activities of members of the nursing staff in delivering nursing care and has personnel, policy, and budgetary responsibility for a specific nursing unit or

facility. As an educator, you explain concepts and facts about health, describe the reason for routine care activities, demonstrate procedures such as self-care activities, reinforce learning or patient behavior, and evaluate the patient's progress in learning. As a patient advocate, you protect your patient's human and legal rights and provide assistance in asserting these rights if the need arises. As a caregiver, you help patients maintain and regain health, manage disease and symptoms, and attain a maximal level function and independence through the healing process.

DIF:Apply (application)

OBJ:Discuss the roles and career opportunities for nurses. TOP: Implementation MSC: Management of Care

6. The nurse has been working in the clinical setting for several years as an advanced practice nurse. However, the nurse has a strong desire to pursue research and theory development. To fulfill this desire, which program should the nurse attend?
- Doctor of Nursing Science degree (DNSc)
  - Doctor of Philosophy degree (PhD)
  - Doctor of Nursing Practice degree (DNP)
  - Doctor in the Science of Nursing degree (DSN)

ANS: B

Some doctoral programs prepare nurses for more rigorous research and theory development and award the research-oriented Doctor of Philosophy (PhD) in nursing. Professional doctoral programs in nursing (DSN or DNSc) prepare graduates to apply research findings to clinical nursing. The DNP is a practice doctorate that prepares advanced practice nurses such as nurse practitioners.

DIF:Understand (comprehension)

OBJ:Compare and contrast the educational programs available for professional registered nurse (RN) education. TOP: Teaching/Learning MSC: Management of Care

7. A nurse attends a workshop on current nursing issues provided by the American Nurses Association. Which type of education did the nurse receive?
- Graduate education
  - Inservice education
  - Continuing education
  - Registered nurse education

ANS: C

Continuing education involves formal, organized educational programs offered by universities, hospitals, state nurses associations, professional nursing organizations, and educational and health care institutions. After obtaining a baccalaureate degree in nursing, you can pursue graduate education leading to a master's or doctoral degree in any number of graduate fields, including nursing. Inservice education programs are instruction or training provided by a health care facility or institution. Registered nurse education is the education preparation for an individual intending to be an RN.

DIF:Apply (application)

OBJ:Compare and contrast the educational programs available for professional registered nurse (RN) education. TOP: Teaching/Learning MSC: Management of Care

8. A nurse identifies gaps between local and best practices. Which Quality and Safety Education for Nurses (QSEN) competency is the nurse demonstrating?
- Safety
  - Patient-centered care
  - Quality improvement
  - Teamwork and collaboration

ANS: C

Quality improvement identifies gaps between local and best practices. Safety minimizes risk of harm to patients and providers through both system effectiveness and individual performance. Patient-centered care recognizes the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values, and needs. Teamwork and collaboration allows effective functioning within nursing and interprofessional teams, fostering open communication, mutual respect, and shared decision making.

DIF:Understand (comprehension)

OBJ:Discuss the roles and career opportunities for nurses. TOP: Evaluation MSC: Management of Care

9. A nurse has compassion fatigue. What is the nurse experiencing?
- Lateral violence and intrapersonal conflict
  - Burnout and secondary traumatic stress
  - Short-term grief and single stressor
  - Physical and mental exhaustion

ANS: B

Compassion fatigue is a term used to describe a state of burnout and secondary traumatic stress. Compassion fatigue may contribute to what is described as lateral violence (nurse-nurse interactions, not intrapersonal). Frequent, intense, or prolonged exposure to grief and loss places nurses at risk for developing compassion fatigue. Stressors, not a single stressor, contribute to compassion fatigue. Physical and mental exhaustion describes burnout only.

DIF:Understand (comprehension)

OBJ:Discuss the influence of social, historical, political, and economic changes on nursing practices. TOP: Assessment MSC: Health Promotion and Maintenance

10. A patient is scheduled for surgery. When getting ready to obtain the informed consent, the patient tells the nurse, —I have no idea what is going to happen. I couldn't ask any questions.‡ The nurse does not allow the patient to sign the permit and notifies the health care provider of the situation. Which role is the nurse displaying?
- Manager

- b. Patient educator
- c. Patient advocate
- d. Clinical nurse specialist

ANS: C

As a patient advocate, the nurse protects the patient's human and legal rights, including the right of the patient to understand procedures before signing permits. Although nurses can be educators, it is the responsibility of the surgeon to provide education for the patient in preparation for surgery, and it is the nurse's responsibility to notify the health care provider if the patient is not properly educated. Managers coordinate the activities of members of the nursing staff in delivering nursing care, and clinical nurse specialists are experts in a specialized area of nursing practice in a variety of settings.

DIF:Apply (application)

OBJ:Discuss the roles and career opportunities for nurses. TOP: Evaluation MSC: Management of Care

11. The patient requires routine gynecological services after giving birth to her son, and while seeing the nurse-midwife, the patient asks for a referral to a pediatrician for the newborn. Which action should the nurse-midwife take initially?
- a. Provide the referral as requested.
  - b. Offer to provide the newborn care.
  - c. Refer the patient to the supervising provider.
  - d. Tell the patient that is not allowed to make referrals.

ANS: B

The practice of nurse-midwifery involves providing independent care for women during normal pregnancy, labor, and delivery, as well as care for the newborn. After being apprised of the midwifery role, if the patient insists on seeing a pediatrician, the nurse-midwife should provide the referral. The supervising provider is an obstetric provider, not a pediatrician. A nurse-midwife can make referrals.

DIF:Analyze (analysis)

OBJ:Discuss the roles and career opportunities for nurses. TOP: Implementation MSC: Management of Care

12. The nurse has a goal of becoming a certified registered nurse anesthetist (CRNA). Which activity is appropriate for a CRNA?
- a. Manages gynecological services such as PAP smears.
  - b. Works under the guidance of an anesthesiologist.
  - c. Obtains a PhD degree in anesthesiology.
  - d. Coordinates acute medical conditions.

ANS: B

Nurse anesthetists provide surgical anesthesia under the guidance and supervision of an anesthesiologist, who is a physician (health care provider) with advanced knowledge of

surgical anesthesia. Nurse practitioners, not CRNAs, manage self-limiting acute and chronic stable medical conditions; certified nurse-midwives provide gynecological services such as routine Papanicolaou (Pap) smears. The CRNA is an RN with an advanced education in a nurse anesthesia accredited program. A PhD is not a requirement.

DIF: Understand (comprehension)

OBJ: Discuss the roles and career opportunities for nurses. TOP: Implementation MSC: Management of Care

13. A nurse teaches a group of nursing students about nurse practice acts. Which information is **most** important to include in the teaching session about nurse practice acts?
- Protects the nurse.
  - Protects the public.
  - Protects the provider.
  - Protects the hospital.

ANS: B

The nurse practice acts regulate the scope of nursing practice and protect public health, safety, and welfare. They do not protect the nurse, provider, or hospital.

DIF: Understand (comprehension)

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

TOP: Teaching/Learning MSC: Management of Care

14. A bill has been submitted to the State House of Representatives that is designed to reduce the cost of health care by increasing the patient-to-nurse ratio from a maximum of 2:1 in intensive care units to 3:1. What should the nurse realize?
- Legislation is politics beyond the nurse's control.
  - National programs have no bearing on state politics.
  - The individual nurse can influence legislative decisions.
  - Focusing on nursing care provides the best patient benefit.

ANS: C

Nurses can influence policy decisions at all governmental levels. One way is to get involved by participating in local and national efforts. This effort is critical in exerting nurses' influence early in the political process. Legislation is not beyond the nurse's control. National program can have bearing on state politics. The question is focusing on legislation and health care costs, not nursing care.

DIF: Analyze (analysis)

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

TOP: Evaluation MSC: Management of Care

15. A nurse is using a guide that provides principles of right and wrong to provide care to patients. Which guide is the nurse using?
- Code of ethics
  - Standards of practice

- c. Standards of professional performance
- d. Quality and safety education for nurses

ANS: A

The code of ethics is the philosophical ideals of right and wrong that define the principles you will use to provide care to your patients. The standards of practice describe a competent level of nursing care. The ANA Standards of Professional Performance describe a competent level of behavior in the professional role. Quality and safety education for nurses addresses the challenge to prepare nurses with the competencies needed to continuously improve the quality of care in their work environments.

DIF: Understand (comprehension)

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

TOP: Implementation MSC: Management of Care

16. A graduate of a baccalaureate degree program plans to start working as a registered nurse (RN) in the emergency department. Which action must the nurse take **first**?
- a. Obtain certification for an emergency nurse.
  - b. Pass the National Council Licensure Examination.
  - c. Take a course on genomics to provide competent emergency care.
  - d. Complete the Hospital Consumer Assessment of Healthcare Providers Systems.

ANS: B

Currently, in the United States, the most common way to become a registered nurse (RN) is through completion of an associate degree or baccalaureate degree program. Graduates of both programs are eligible to take the National Council Licensure Examination for Registered Nurses (NCLEX-RN) to become registered nurses in the state in which they will practice. Certification can be obtained after passing the NCLEX and working for the specified amount of time. Genomics is a newer term that describes the study of all the genes in a person and interactions of these genes with one another and with that person's environment. Consumers can also access Hospital Consumer Assessment of Healthcare Providers Systems (HCAHPS) to obtain information about patients' perspectives on hospital care.

DIF: Remember (knowledge)

OBJ: Compare and contrast the educational programs available for professional registered nurse (RN) education. TOP: Implementation MSC: Management of Care

17. While providing care to a patient, the nurse is responsible, both professionally and legally, for the appropriateness and proper execution of the care. Which concept does this describe?
- a. Autonomy
  - b. Accountability
  - c. Patient advocacy
  - d. Patient education

ANS: B

Accountability means that the nurse is responsible, professionally and legally, for the type and quality of nursing care provided. Autonomy is an essential element of professional nursing that involves the initiation of independent nursing interventions without medical orders. As a patient advocate, the nurse protects the patient's human and legal rights and provides assistance in asserting these rights if the need arises. As an educator, the nurse explains concepts and facts about health, describes the reasons for routine care activities, demonstrates procedures such as self-care activities, reinforces learning or patient behavior, and evaluates the patient's progress in learning.

DIF:Remember (knowledge)

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

TOP: Evaluation

MSC: Management of Care

18. A nurse is teaching the staff about Benner's levels of proficiency. In which order should the nurse place the levels from beginning level to ending level?
1. Expert
  2. Novice
  3. Proficient
  4. Competent
  5. Advanced beginner
- a. 2, 4, 5, 1, 3
  - b. 2, 5, 4, 3, 1
  - c. 4, 2, 5, 3, 1
  - d. 4, 5, 2, 1, 3

ANS: B

Benner's levels of proficiency are as follows: novice, advanced beginner, competent, proficient, and expert.

DIF:Understand (comprehension)

OBJ:Discuss the development of professional nursing roles.

TOP: Teaching/Learning

MSC: Management of Care

### MULTIPLE RESPONSE

1. A nurse is preparing a teaching session about contemporary influences on nursing. Which examples should the nurse include? (*Select all that apply.*)
  - a. Human rights
  - b. Affordable Care Act
  - c. Demographic changes
  - d. Medically underserved
  - e. Decreasing health care costs

ANS: A, B, C, D

Multiple external forces affect nursing, including the need for nurses' self-care, Affordable Care Act (ACA) and rising (not decreasing) health care costs, demographic changes of the population, human rights, and increasing numbers of medically underserved.

DIF: Understand (comprehension)

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

TOP: Teaching/Learning MSC: Management of Care

2. After licensure, the nurse wants to stay current in knowledge and skills. Which programs are the **most** common ways nurses can do this? (*Select all that apply.*)
- Master's degree
  - Inservice education
  - Doctoral preparation
  - Continuing education
  - National Council Licensure Examination retakes

ANS: B, D

Continuing education programs help nurses maintain current nursing skills, gain new knowledge and theory, and obtain new skills reflecting the changes in the health care delivery system. Inservice education programs are provided by a health care facility to increase the knowledge, skills, and competencies of nurses employed by the institution. Both can help the nurse stay current. Master's degree programs are valuable for those in the role of nurse educator, nurse administrator, or advanced practice nurse. Professional doctoral programs in nursing (DSN or DNSc) prepare graduates to apply research findings to clinical nursing. National Council Licensure Examination retakes are not to keep current; this test is taken to enter RN practice.

DIF: Understand (comprehension)

OBJ: Compare and contrast the educational programs available for professional registered nurse (RN) education. TOP: Teaching/Learning MSC: Management of Care

3. A nurse wants to become an advanced practice registered nurse. Which options should the nurse consider? (*Select all that apply.*)
- Patient advocate
  - Nurse administrator
  - Certified nurse-midwife
  - Clinical nurse specialist
  - Certified nurse practitioner

ANS: C, D, E

Although all nurses should function as patient advocates, —advanced practice nurse is an umbrella term for an advanced clinical nurse such as a certified nurse practitioner, clinical nurse specialist, certified registered nurse anesthetist, or certified nurse-midwife. A nurse administrator is not an example of advanced practice.

DIF: Understand (comprehension)

OBJ: Discuss the roles and career opportunities for nurses. TOP: Teaching/Learning MSC: Management of Care

4. The nurse manager from the oncology unit has had two callouts; the orthopedic unit has had multiple discharges and probably will have to cancel one or two of its nurses. The orthopedic unit has agreed to —float two of its nurses to the oncology unit if oncology can —float a nursing assistant to the orthopedic unit to help with obtaining vital signs. Which concepts does this situation entail? (*Select all that apply.*)
- Autonomy
  - Informatics
  - Accountability
  - Political activism
  - Teamwork and collaboration

ANS: A, C, E

Staffing is an independent nursing intervention and is an example of autonomy. Along with increased autonomy comes accountability or responsibility for outcomes of an action. When nurses work together, this is teamwork and collaboration. Informatics is the use of information and technology to communicate, manage knowledge, mitigate error, and support decision making. Political activism usually involves more than day-to-day activities such as unit staffing.

DIF: Analyze (analysis)

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

TOP: Evaluation MSC: Management of Care

## Chapter 02: Health Care Delivery System

### Potter: Fundamentals of Nursing, 11th Edition

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#### MULTIPLE CHOICE

1. The nurse is caring for a patient whose insurance coverage is Medicare. The nurse should consider which information when planning care for this patient?
- Capitation provides the hospital with a means of recovering variable charges.
  - The hospital will be paid for the full cost of the patient's hospitalization.
  - Diagnosis-related groups (DRGs) provide a fixed reimbursement of cost.
  - Medicare will pay the national average for the patient's condition.

ANS: C

In 1983, Congress established the prospective payment system (PPS), which grouped inpatient hospital services for Medicare patients into diagnosis-related groups (DRGs), each of which provides a fixed reimbursement amount based on assigned DRG, regardless of a patient's length of stay or use of services. Capitation means that providers receive a fixed amount per patient or enrollee of a health care plan. DRG reimbursement is based on case severity, rural/urban/regional costs, and teaching costs, not national averages.

DIF: Understand (comprehension)

OBJ: Explain the concept of —pay for value, used to reward hospitals financially.

TOP: Planning MSC: Management of Care

2. A nurse is teaching the staff about integrated health care systems. Which model of care should the nurse include in the teaching about seam-less care delivery?
- Affordable Care Act
  - Hospital Value–Based Purchasing
  - Bundled Payments for Care Improvements
  - The patient-centered medical home model

ANS: D

Basically, two types of integrated health care systems are found: an organizational structure that follows economic imperatives (such as combining financing with all providers, from hospitals, clinics, and physicians to home care and long-term care facilities) and a structure that supports an organized care delivery approach (coordinating care activities and services into seamless functioning). The patient-centered medical home model is an example of an integrated health care system that strengthens the physician-patient relationship with coordinated, goal-oriented, individualized care. All the other options are more related to the financial accessibility of health care.

DIF: Understand (comprehension)

OBJ: Explain the concept of —pay for value,|| used to reward hospitals financially.

TOP: Teaching/Learning

MSC: Management of Care

3. A nurse is teaching a family about health care plans. Which information from the nurse indicates a correct understanding of the Affordable Care Act?
- A family can choose whether to have health insurance with no consequences.
  - Primary care physician payments from Medicaid services can equal Medicare.
  - Adult children up to age 26 are allowed coverage on the parent’s plan.
  - Quality hospital outcome scores are tied directly to patient satisfaction.

ANS: C

The Affordable Care Act ties payment to organizations offering Medicare Advantage plans to the quality ratings of the coverage they offer. If hospitals perform poorly in quality scores, they receive lower payments for services. Quality outcome measures include patient satisfaction, more effective management of care by reducing complications and readmissions and improving care coordination. All individuals are required to have some form of health insurance by 2014 or pay a penalty through the tax code. Primary care physician payments for Medicaid services increased to equal Medicare payments. Implementation of insurance regulations prevents private insurance companies from denying insurance coverage for any reason and from charging higher premiums based on health status and gender.

DIF: Remember (knowledge)

OBJ: Explain the concept of —pay for value,|| used to reward hospitals financially.

TOP: Teaching/Learning

MSC: Management of Care

4. A nurse is caring for a patient in the hospital. When should the nurse begin discharge planning?