Medical Surgical Nursing 7th edition Bauldoff Test Bank

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LeMone & Burke's Medical-Surgical Nursing, 7e **(Bauldoff/Gubrud/Carno)**
Chapter 2 Health and Illness Care of Adults

1) The nurse is caring for a patient with heart failure. What should the nurse include when planning holistic care for this patient?
1. Spiritual needs
2. Measuring intake and output
3. Daily weights
4. Ambulating with assistance
Answer: 1
Explanation: 1. Holistic healthcare considers all aspects of an individual (physical, psychosocial, cultural, spiritual, and intellectual) as essential components of individualized care.
2. Measuring intake and output meets the patient's physical needs and would not address holistic needs.
3. Daily weights focus solely on the patient's physical needs and would not address holistic needs.
4. Ambulating with assistance focuses solely on the patient's physical needs and would not address holistic needs.
Page Ref: 25
Cognitive Level: Applying
Client Need & Sub: Psychosocial Integrity: Religious and Spiritual Influences on Health
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: IX.3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Relationship-Centered Care; Knowledge; Factors that contribute to or threaten health | Nursing/Integrated Concepts: Nursing Process: Planning
Learning Outcome: 2.1 Define health and the health-illness continuum, and discuss factors affecting the health of individuals, families, communities, and special populations.
MNL Learning Outcome: 1. Consider the impact of health, wellness, illness, and injury to patients and their families.

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2) A patient reports never experiencing major illnesses and has enjoyed good health without much effort. How should the nurse identify this patient's definition of health?
1. Absence of disease
2. Effortless
3. Fortunate
4. Integrated method of functioning
Answer: 1
Explanation: 1. The patient is defining health as being the absence of disease because of not experiencing any major illnesses and not expending much effort to do so.
2. The nurse has no way of knowing if the patient believes health is effortless.
3. The nurse has no way of knowing if the patient believes health is fortunate.
4. An integrated method of functioning is the definition of wellness which the patient is not describing.
Page Ref: 25
Cognitive Level: Analyzing
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: IX.3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management, and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Relationship-Centered Care; Knowledge; Factors that contribute to or threaten health | Nursing/Integrated Concepts: Nursing Process: Assessment
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3) During an assessment, the nurse learns that a patient has a genetic predisposition to the development of several disease processes. Which illness should the nurse realize is associated with genetic makeup?
1. Cancer
2. Hypertension
3. Osteoporosis
4. Myocardial infarction
Answer: 1
Explanation: 1. Chronic illnesses that are associated with genetic makeup include sickle cell disease, hemophilia, diabetes mellitus, and cancer.
2. Hypertension is associated with a cultural group.
3. Osteoporosis is associated with a cultural group.
4. Myocardial infarction is associated with age and lifestyle factors.
Page Ref: 25
Cognitive Level: Analyzing
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.2. Conduct a health history, including environmental exposure and a family history that recognizes genetic risks, to identify current and future health problems | NLN Competencies: Relationship-Centered Care; Knowledge; Factors that contribute to or threaten health | Nursing/Integrated Concepts: Nursing Process: Assessment
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4) The nurse is assessing a patient who is a Native American. For which health problem should the nurse assess the patient?
1. Diabetes mellitus
2. Eye disorders
3. Hypertension
4. Osteoporosis
Answer: 1
Explanation: 1. Diabetes mellitus is among the leading causes of illness in Native Americans. This is what the nurse should include in the assessment of this patient.
2. Eye disorders are more common in Chinese Americans.
3. Hypertension is more common in African Americans.
4. Osteoporosis is more common in Caucasian women of small stature and Scandinavian heritage.
Page Ref: 26
Cognitive Level: Applying
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
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5) During an assessment, a patient reports being lactose intolerant. Within which cultural group is this food intolerance common?
1. Mexican Americans
2. Scandinavian Americans
3. Indian Americans
4. Mediterranean Americans
Answer: 1
Explanation: 1. Mexican Americans, African Americans, Native Americans, and Asians may be lactose intolerant.
2. Lactose intolerance is not common in Scandinavian Americans.
3. Lactose intolerance is not common in Indian Americans.
4. Lactose intolerance is not common in Mediterranean Americans.
Page Ref: 26
Cognitive Level: Analyzing
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
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6) A patient with a respiratory illness is a factory worker and uses public transportation to get to work. Which will be impacted by the patient's socioeconomic status?
1. Lifestyle
2. Cognitive abilities
3. Education level
4. Developmental level
Answer: 1
Explanation: 1. Lifestyle and environmental influences are affected by one's income level.
2. Cognitive development affects whether people view themselves as healthy or ill and may affect their health practices.
3. Educational level affects the ability to understand and follow guidelines for health.
4. Developmental level is not related to socioeconomic status.
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Cognitive Level: Analyzing
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
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7) The nurse is reviewing the goals for *Healthy People 2020* with a group of patients in an outpatient clinic. What should the nurse include in this presentation? Select all that apply.
1. Attain high-quality, longer lives free of preventable disease, disability, injury, and premature death.
2. Achieving health equity, eliminating disparities, and improving the health of all groups.
3. Creating social and physical environments that promote good health for all.
4. Promoting healthy development and healthy behaviors across every stage of life.
5. Achieving a body weight 20% less than recommended in current standardized height/weight charts.
Answer: 1, 2, 3, 4
Explanation: 1. Attaining high-quality, longer lives free of preventable disease, disability, injury, and premature death is one of the *Healthy People 2020* goals and should be included in the presentation.
2. Achieving health equity, eliminating disparities, and improving the health of all groups is one of the *Healthy People 2020* goals and should be included in the presentation.
3. Creating social and physical environments that promote good health for all is one of the *Healthy People 2020* goals and should be included in the presentation.
4. Promoting healthy development and healthy behaviors across every stage of life is one of the *Healthy People 2020* goals and should be included in the presentation.
5. Achieving a body weight 20% less than recommended in current standardized height/weight charts is not a *Healthy People 2020* goal and might be considered dangerous.
Page Ref: 35
Cognitive Level: Applying
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention; chronic disease management | Nursing/Integrated Concepts: Nursing Process: Implementation/Teaching/Learning
Learning Outcome: 2.2 Compare and contrast health risks, assessment, and health promotion for the young adult, middle adult, and older adult.
MNL Learning Outcome: 2. Recognize the health risks of individuals across the lifespan, families, and communities and the role of nursing in health promotion and maintenance.

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8) The nurse is instructing a patient on nutritional needs by using MyPlate. What should the nurse emphasize when using this food guide?
1. Consuming nutrient-dense foods and beverages.
2. Ways to limit exposure to carcinogens
3. Activities to reduce the onset of diabetes mellitus
4. Avoiding overuse of aerobic exercise
Answer: 1
Explanation: 1. The U.S. Department of Agriculture provides a general guideline for what to eat each day, illustrated in MyPlate. One overarching concept for this guide is to focus on consuming nutrient-dense foods and beverages.
2. MyPlate was not created to instruct patients on ways to limit exposure to carcinogens.
3. MyPlate was not created to reduce the onset of diabetes mellitus.
4. MyPlate was not created to avoid the overuse of aerobic exercise.
Page Ref: 36
Cognitive Level: Applying
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention; chronic disease management | Nursing/Integrated Concepts: Nursing Process: Implementation/Teaching/Learning
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9) A patient asks for suggestions to help improve current health status. What should the nurse instruct this patient?
1. Participate in a continuous physical activity for 30 minutes, 5 or more days each week.
2. Obtain sun exposure every day.
3. Reduce tobacco use.
4. Sleep at least 6 hours each night.
Answer: 1
Explanation: 1. Practices for healthy living include participating in a continuous physical activity for 30 minutes 5 or more days each week.
2. Sun exposure should be limited and should always involve application of a sunscreen.
3. Smoking and the use of tobacco products should be eliminated, not just reduced.
4. The patient should be instructed to sleep 7 to 8 hours each day.
Page Ref: 36
Cognitive Level: Applying
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Context and Environment; Knowledge; apply health promotion/disease prevention strategies; apply health policy | Nursing/Integrated Concepts: Nursing Process: Implementation
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10) A patient reports drinking four alcoholic beverages every day and smoking one pack of cigarettes. Which is this patient predisposed to develop?
1. Disease
2. Illness
3. Injury
4. Infection
Answer: 1
Explanation: 1. The term *disease* describes an alteration in structure and function of the body or mind. One cause of disease is exposure to chemicals such as alcohol and tobacco. Ingesting four alcoholic beverages and smoking one pack of cigarettes per day exposes the body to chemicals that can lead to the development of a disease.
2. An illness is a person's response to a disease and is highly individualized.
3. There is not enough information to determine if the alcohol and cigarettes will cause the patient to develop an injury.
4. There is not enough information to determine if the alcohol and cigarettes will cause the patient to develop an infection.
Page Ref: 36
Cognitive Level: Analyzing
Client Need & Sub: Health Promotion and Maintenance: High Risk Behaviors
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention, chronic disease management | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: 2.3 Differentiate between disease, illness, and injury, and describe illness behaviors and needs of the patient with acute, critical, and chronic illness.
MNL Learning Outcome: 3. Consider the differences between disease, illness, and injury and the behaviors and needs of the patient with various levels of illness.

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11) A patient reports a new onset of a health problem. Which is the primary reason for a patient to seek medical attention?
1. Pain
2. Bleeding
3. Vomiting
4. Fatigue
Answer: 1
Explanation: 1. The subjective symptom of pain is the primary reason people seek healthcare.
2. Bleeding is an objective symptom that varies with the disease process.
3. Vomiting is an objective symptom that varies with the disease process.
4. Fatigue is a subjective symptom that varies with the disease process.
Page Ref: 36
Cognitive Level: Analyzing
Client Need & Sub: Physiological Integrity: Reduction of Risk Potential
Standards: QSEN Competencies: I.C.9. Recognize that patient expectations influence outcomes in management of pain or suffering | AACN Essentials Competencies: IX.8. Implement evidence-based nursing interventions as appropriate for managing the acute and chronic care of patients and promoting health across the lifespan | NLN Competencies: Quality and Safety; Knowledge; Current best practices | Nursing/Integrated Concepts: Nursing Process: Assessment
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12) While being treated for one disease process, a patient begins demonstrating manifestations of another disease process. Which type of disease is the patient experiencing?
1. Iatrogenic
2. Communicable
3. Congenital
4. Degenerative
Answer: 1
Explanation: 1. An iatrogenic disease is caused by medical therapy.
2. A communicable disease spreads from one person to another.
3. A congenital disease exists at or before birth.
4. A degenerative disease results from the deterioration or impairment of organs or tissues.
Page Ref: 37
Cognitive Level: Analyzing
Client Need & Sub: Physiological Integrity: Reduction of Risk Potential
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: IX.8. Implement evidence-based nursing interventions as appropriate for managing the acute and chronic care of patients and promoting health across the lifespan | NLN Competencies: Quality and Safety; Knowledge; Current best practices | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: 2.3 Differentiate between disease, illness, and injury, and describe illness

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behaviors and needs of the patient with acute, critical, and chronic illness.
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13) A patient reports feeling fine even after being diagnosed with chronic kidney failure. What is the patient likely to manifest?
1. Signs of an illness
2. An iatrogenic disease
3. A psychosomatic illness
4. An idiopathic disorder
Answer: 1
Explanation: 1. An illness is a person's response to a disease. The person responds to personal perception of the disease and to the perception of others. Because the patient is diagnosed with chronic kidney failure, signs of an illness are likely to manifest.
2. An iatrogenic disease is caused by medical therapy.
3. Psychosomatic illnesses are characterized by physiologic symptoms caused by mental or emotional disturbance.
4. An idiopathic disorder has no known cause.
Page Ref: 36
Cognitive Level: Analyzing
Client Need & Sub: Physiological Integrity: Reduction of Risk Potential
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: IX.8. Implement evidence-based nursing interventions as appropriate for managing the acute and chronic care of patients and promoting health across the lifespan | NLN Competencies: Quality and Safety; Knowledge; Current best practices | Nursing/Integrated Concepts: Nursing Process: Assessment
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14) A patient reports not feeling well for a few days and has been using an over-the-counter medication without improvement. Which illness behavior is this patient demonstrating?
1. Seeking medical care
2. Experiencing symptoms
3. Assuming the sick role
4. Assuming a dependent role
Answer: 1
Explanation: 1. The patient is reporting not feeling well, which describes the behavior of seeking medical care.
2. Experiencing symptoms occurs when the patient realizes feelings of being unwell.
3. Assuming the sick role occurs after seeking medical care.
4. Assuming a dependent role occurs upon hospitalization.
Page Ref: 38
Cognitive Level: Analyzing
Client Need & Sub: Physiological Integrity: Reduction of Risk Potential
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: IX.8. Implement evidence-based nursing interventions as appropriate for managing the acute and chronic care of patients and promoting health across the lifespan | NLN Competencies: Quality and Safety; Knowledge; Current best practices | Nursing/Integrated Concepts: Nursing Process: Assessment
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15) A patient wants to be discharged to home and resume normal activities of daily living. In which stage of illness behavior is the patient entering?
1. Achieving recovery and rehabilitation
2. Seeking medical care
3. Assuming a dependent role
4. Experiencing symptoms
Answer: 1
Explanation: 1. Achieving recovery and rehabilitation is the final stage of an acute illness and occurs when the patient gives up the dependent role and resumes normal activities and responsibilities.
2. Seeking medical care occurs when the patient sees a healthcare provider for diagnosis of an illness.
3. The patient assumes a dependent role when entering the hospital for care.
4. Experiencing symptoms is the first stage of an acute illness.
Page Ref: 38
Cognitive Level: Analyzing
Client Need & Sub: Physiological Integrity: Physiological Adaptation
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: IX.8. Implement evidence-based nursing interventions as appropriate for managing the acute and chronic care of patients and promoting health across the lifespan | NLN Competencies: Quality and Safety; Knowledge; Current best practices | Nursing/Integrated Concepts: Nursing Process: Assessment
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16) A patient with a chronic illness is not currently experiencing any symptoms and plans to stop following the identified course of care because the disease is cured. How should the nurse respond to this patient?
1. "The treatment plan is the reason you are not experiencing symptoms, so it would be best if you did not stop the plan."
2. "That does sound like a good idea."
3. "You can always resume the plan if the symptoms return."
4. "Plan to wean yourself off the treatment plan and not discontinue it all at once."
Answer: 1
Explanation: 1. Patients with a chronic illness need to learn how to manage an ongoing treatment plan even in periods of remission. The treatment plan is the reason the patient is not experiencing any symptoms and the patient should be encouraged to follow the plan.
2. The nurse should not encourage the patient to stop the treatment plan by agreeing that it is a good idea.
3. The nurse should not say that the plan can always be resumed if the symptoms return.
4. The nurse should not suggest that the patient make any alterations in the treatment plan such as weaning off the plan.
Page Ref: 39
Cognitive Level: Applying
Client Need & Sub: Health Promotion and Maintenance: Self-Care
Standards: QSEN Competencies: I.C.1. Value seeing healthcare situations "through patients' eyes" | AACN Essentials Competencies: IX.8. Implement evidence-based nursing interventions as appropriate for managing the acute and chronic care of patients and promoting health across the lifespan | NLN Competencies: Quality and Safety; Knowledge; Current best practices | Nursing/Integrated Concepts: Nursing Process: Implementation
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17) The nurse is planning care for a patient with a chronic illness. What intervention should the nurse include in the plan of care?
1. Instruct on ways to minimize the impact of the chronic illness.
2. Encourage to seek medical care weekly.
3. Limit activities until symptoms subside.
4. Suggest lifestyle alterations to prepare for more challenging symptom management in the future.
Answer: 1
Explanation: 1. Nursing interventions for the person with a chronic illness include modifying lifestyle to adapt to and minimize the impact of the disease.
2. Encouraging the patient to seek medical care weekly does not support effective interaction with the healthcare system on an ongoing basis.
3. Limiting activities until symptoms subside does not improve well-being and quality of life.
4. Suggesting lifestyle alterations to prepare for more challenging symptom management in the future does not improve well-being or quality of life.
Page Ref: 39
Cognitive Level: Applying
Client Need & Sub: Health Promotion and Maintenance: Self-Care
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18) The nurse is planning an education session to discuss primary levels of disease prevention. Which topics should the nurse include in this presentation?
1. Elimination of smoking and alcohol use
2. Locations for diabetes screening
3. Schedule colonoscopy examinations as prescribed
4. Use of available community rehabilitation facilities
Answer: 1
Explanation: 1. Primary prevention involves activities to prevent illness and disease and includes smoking cessation and abstinence from alcohol.
2. Screening activities such as glucose testing are a form of secondary prevention.
3. Screening activities such as colonoscopy examinations are a form of secondary prevention.
4. Rehabilitation activities are considered a tertiary level of prevention.
Page Ref: 40
Cognitive Level: Applying
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
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19) The nurse is planning interventions to meet a patient's tertiary care needs. Which would be applicable for the patient?
1. Providing preoperative instructions
2. Instruction in self-examination of breasts
3. Screening for glaucoma
4. Counseling on healthy nutrition
Answer: 1
Explanation: 1. The tertiary level of care focuses on stopping the disease process and returning the individual to a useful place in society. Providing preoperative instructions is a tertiary-level intervention.
2. Instructing in self-examination of the breasts is a secondary-level intervention.
3. Screening for glaucoma is a secondary-level intervention.
4. Counseling on healthy nutrition is a primary-level intervention.
Page Ref: 40
Cognitive Level: Applying
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20) A patient is diagnosed with an ear infection and has been prescribed antibiotics. Which level of intervention has the patient received?
1. Secondary
2. Primary
3. Tertiary
4. Acute
Answer: 1
Explanation: 1. The secondary level involves activities that emphasize early diagnosis and treatment of an illness to stop the pathologic process and enable the person to return to a former state of health as soon as possible. This includes receiving treatment such as antibiotic therapy for an infection.
2. Primary activities promote health and delay the occurrence of disease.
3. Tertiary interventions focus on stopping the disease process and returning the individual to society within the constraints of a disability.
4. There is no acute level of intervention.
Page Ref: 40
Cognitive Level: Analyzing
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
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21) A middle-aged patient voices concerns about gaining 12 pounds over the past 2 years without changing any dietary habits. Which response by the nurse is most appropriate?
1. "Age-related weight gain can occur because of consistent dietary intake and less physical activity."
2. "Are you exercising?"
3. "You might be eating more than you think."
4. "You are getting older."
Answer: 1
Explanation: 1. Weight gain is common in middle adulthood, usually the result of continuing to consume the same number of calories while decreasing physical activity.
2. Asking the patient about exercise fails to provide the needed information and assumes the patient is sedentary.
3. Implying the patient is overeating is judgmental and will do little to establish therapeutic rapport.
4. The patient is aware of aging, and pointing this out does little to meet the patient's obvious interest in more information.
Page Ref: 28
Cognitive Level: Applying
Client Need & Sub: Health Promotion and Maintenance: Aging Process
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: 2.1 Define health and the health-illness continuum, and discuss factors affecting the health of individuals, families, communities, and special populations.
MNL Learning Outcome: 1. Consider the impact of health, wellness, illness, and injury to patients and their families.

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22) The nurse is assisting an adolescent female patient to strategize ways to avoid the onset of disease with aging. What should the nurse include in this plan? Select all that apply.
1. Maintain a healthy weight.
2. Avoid smoking.
3. Avoid substance abuse.
4. Schedule an annual mammogram.
5. Plan for a colonoscopy every 2 years.
Answer: 1, 2, 3
Explanation: 1. Healthy behaviors that are known to promote health and wellness include eating a balanced diet, maintaining a calorie balance over time to achieve and sustain a healthy weight; and focus on consuming nutrient-dense foods and beverages.
2. Healthy behaviors that are known to promote health and wellness include eliminating smoking and use of other tobacco products such as smokeless tobacco.
3. Substance abuse is a major cause for concern in the young adult population.
4. Annual mammograms would not apply until the patient reaches the age of 40.
5. Colonoscopies would not apply until the patient reaches the age of 50.
Page Ref: 28, 36
Cognitive Level: Applying
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention | Nursing/Integrated Concepts: Nursing Process: Planning
Learning Outcome: 2.2 Compare and contrast health risks, assessment, and health promotion for the young adult, middle adult, and older adult.
MNL Learning Outcome: 2. Recognize the health risks of individuals across the lifespan, families, and communities and the role of nursing in health promotion and maintenance.

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23) A middle-aged female patient is having a routine examination and has no significant personal or family medical history. What information concerning health-promotion behaviors should the nurse provide to this patient?
1. Have bone density evaluated.
2. Plan to have a mammogram every other year.
3. Measure blood pressure every 3 years.
4. Exercise for at least 15 minutes a day 3 days each week.
Answer: 1
Explanation: 1. During the middle adult years, postmenopausal female patients may develop low bone density or osteoporosis. Bone density should be evaluated.
2. Female patients should begin having annual mammograms by age 40.
3. Blood pressure should be measured annually and more frequently if elevated.
4. Exercise recommendations are for 30 minutes 5 or more days each week.
Page Ref: 28
Cognitive Level: Applying
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: 2.1 Define health and the health-illness continuum, and discuss factors affecting the health of individuals, families, communities, and special populations.
MNL Learning Outcome: 1. Consider the impact of health, wellness, illness, and injury to patients and their families.

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24) An older patient experiences extreme drowsiness after taking an over-the-counter cold medication at the prescribed dose. What should this information suggest to the nurse?
1. Older age is influencing the patient's response to the medication.
2. More medication was taken than was reported.
3. A reaction between the cold medication and other routine medications has occurred.
4. An allergic reaction to the cold medication occurred.
Answer: 1
Explanation: 1. Older patients often experience altered responses to medications because of age-related changes in the kidneys and liver.
2. There is no evidence the patient has taken too much medication.
3. There is no information provided to indicate the patient is taking other medications.
4. Allergic reactions usually cause integumentary- or respiratory-related symptoms.
Page Ref: 32
Cognitive Level: Analyzing
Client Need & Sub: Physiological Integrity: Pharmacological and Parenteral Therapies
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention; | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: 2.1 Define health and the health-illness continuum, and discuss factors affecting the health of individuals, families, communities, and special populations.
MNL Learning Outcome: 1. Consider the impact of health, wellness, illness, and injury to patients and their families.

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25) The nurse is preparing discharge instructions for an African American patient recovering from a same-day surgical procedure. What genetic, racial, ethnic, and cultural factors affecting health and well-being should the nurse consider prior to giving discharge instructions? Select all that apply.
1. Hypertension
2. Sickle cell anemia
3. Lactose intolerance
4. Diabetes
5. Osteoporosis
Answer: 1, 2, 3, 4
Explanation: 1. Certain diseases occur at a higher rate of incidence in some races and ethnic and cultural groups. Examples of illnesses that are associated with genetic makeup include hypertension among African Americans.
2. Certain diseases occur at a higher rate of incidence in some races and ethnic and cultural groups. Examples of illnesses that are associated with genetic makeup include sickle cell anemia among African Americans.
3. Certain diseases occur at a higher rate of incidence in some races and ethnic and cultural groups. Examples of illnesses that are associated with genetic makeup include lactose intolerance among African Americans.
4. Certain diseases occur at a higher rate of incidence in some races and ethnic and cultural groups. Examples of illnesses that are associated with genetic makeup include diabetes among African Americans.
5. Caucasian women of small stature and of Scandinavian heritage have a higher risk of developing osteoporosis.
Page Ref: 26
Cognitive Level: Applying
Client Need & Sub: Psychosocial Integrity: Cultural Awareness/Cultural Influences on Health
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention | Nursing/Integrated Concepts: Nursing Process: Planning/Teaching/Learning
Learning Outcome: 2.1 Define health and the health-illness continuum, and discuss factors affecting the health of individuals, families, communities, and special populations.
MNL Learning Outcome: 1. Consider the impact of health, wellness, illness, and injury to patients and their families.

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26) The nurse is reviewing the health history with a young adult patient. For which vaccination should the nurse assess this patient? Select all that apply.
1. Measles, mumps, rubella (MMR)
2. Hepatitis B
3. HPV
4. Influenza
5. Tetanus, diphtheria, pertussis every 10 years
Answer: 2, 3, 4, 5
Explanation: 1. MMR is not recommended for a young adult.
2. Hepatitis B is recommended for a young adult.
3. HPV is recommended for a young adult.
4. Influenza vaccination is recommended annually for all adults.
5. Tetanus-diphtheria boosters are recommended every 10 years. .
Page Ref: 37
Cognitive Level: Applying
Client Need & Sub: Physiological Integrity: Reduction of Risk Potential
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention; chronic disease management | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: 2.2 Compare and contrast health risks, assessment, and health promotion for the young adult, middle adult, and older adult.
MNL Learning Outcome: 2. Recognize the health risks of individuals across the lifespan, families, and communities and the role of nursing in health promotion and maintenance.

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27) A patient is diagnosed with an acute onset of pulmonary embolism. Rank the illness behaviors that this patient may demonstrate in the commonly recognized sequence. Place the five behaviors in the correct order.
Choice 1. Experiencing symptoms
Choice 2. Assuming a dependent role
Choice 3. Seeking medical care
Choice 4. Assuming the sick role
Choice 5. Recovery and rehabilitation
Answer: 1, 4, 3, 2, 5
Explanation: **Choice 1.** Illness behaviors are the way people cope with the alterations in health and function caused by a disease. In the commonly recognized sequence of illness behaviors, the first is experiencing symptoms.
Choice 2. In the commonly recognized sequence of illness behaviors, assuming a dependent role is the fourth.
Choice 3. In the commonly recognized sequence of illness behaviors, seeking medical care is the third.
Choice 4. In the commonly recognized sequence of illness behaviors, assuming the sick role is the second.
Choice 5. In the commonly recognized sequence of illness behaviors, recovery and rehabilitation are the fifth.
Page Ref: 38
Cognitive Level: Applying
Client Need & Sub: Physiological Integrity: Physiological Adaptation
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: IX.3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: 2.3 Differentiate between disease, illness, and injury, and describe illness behaviors and needs of the patient with acute, critical, and chronic illness.
MNL Learning Outcome: 3. Consider the differences between disease, illness, and injury and the behaviors and needs of the patient with various levels of illness.

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28) The overall mission of *Healthy People 2020* is to improve the nation's health. What topic is addressed to achieve this goal? Select all that apply.
1. Access to health services
2. Nutrition and weight status
3. Reproductive health
4. Injury and violence
5. Outpatient surgery
Answer: 1, 2, 3, 4
Explanation: 1. Access to health services is a health indicator used in *Healthy People 2020*.
2. Nutrition and weight status are health indicators used in *Healthy People 2020*.
3. Reproductive health is a health indicator used in *Healthy People 2020.*
4. Injury and violence are health indicators used in *Healthy People 2020*.
5. Outpatient surgery is not a health indicator in *Healthy People 2020*.
Page Ref: 35
Cognitive Level: Applying
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: 2.2 Compare and contrast health risks, assessment, and health promotion for the young adult, middle adult, and older adult.
MNL Learning Outcome: 2. Recognize the health risks of individuals across the lifespan, families, and communities and the role of nursing in health promotion and maintenance.

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29) A patient with seizures is being monitored to determine if the seizure activity was present at birth or has been slowly developing. For which classifications of diseases is this patient's seizure activity being evaluated?
1. Congenital versus chronic
2. Acute versus chronic
3. Communicable versus functional
4. Idiopathic versus iatrogenic
Answer: 1
Explanation: 1. A congenital disease or disorder exists at or before birth; a chronic disease is one that requires continuing management over a long period.
2. An acute disease has a rapid onset; a chronic disease requires continuing management over a long period.
3. A communicable disease can be spread from one person to another; a functional disease affects function but does not have organic causes.
4. An idiopathic disease has an unknown cause; an iatrogenic disease is caused by medical therapy.
Page Ref: 37
Cognitive Level: Applying
Client Need & Sub: Physiological Integrity: Physiological Adaptation
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: IX.1. Conduct comprehensive and focused physical, behavioral, psychological, spiritual, socioeconomic, and environmental assessments of health and illness parameters in patients, using developmentally and culturally appropriate approaches | NLN Competencies: Context and Environment; Knowledge; chronic disease management | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: 2.3 Differentiate between disease, illness, and injury, and describe illness behaviors and needs of the patient with acute, critical, and chronic illness.
MNL Learning Outcome: 3. Consider the differences between disease, illness, and injury and the behaviors and needs of the patient with various levels of illness.

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30) A patient with a family history of breast cancer is participating in activities to prevent illness. Which primary prevention action is the patient performing?
1. Genetic testing to determine genetic predisposition
2. Obtaining a mammogram and performing monthly breast self-examinations
3. Taking lipid-reducing agent to reduce cholesterol levels
4. Supporting breast cancer research by running in a half marathon
Answer: 1
Explanation: 1. Genetic testing is primary prevention in that it determines genetically linked diseases before they develop.
2. Mammograms and self-examinations of the breasts are examples of secondary prevention.
3. Taking lipid reducing agents to treat a specific disease is secondary prevention.
4. Supporting research is tertiary level prevention that helps in stopping the disease through research efforts.
Page Ref: 40
Cognitive Level: Analyzing
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: 2.3 Differentiate between disease, illness, and injury, and describe illness behaviors and needs of the patient with acute, critical, and chronic illness.
MNL Learning Outcome: 3. Consider the differences between disease, illness, and injury and the behaviors and needs of the patient with various levels of illness.

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31) A middle-aged female is having a routine wellness evaluation. Which statement reflects the changes that occur in middle adulthood? Select all that apply.
1. "I am embarrassed by the amount of weight I have gained each year."
2. "I have recently been put on a lipid-lowering agent for an increase in my cholesterol levels."
3. "I worry about getting breast cancer like my friend who is the same age."
4. "I have been lonely since my children all married and moved far away."
5. "I am concerned about coping with an unplanned pregnancy."
Answer: 1, 2, 3, 4
Explanation: 1. This statement reflects the changes and concerns that arise in the middle adult years.
2. This statement reflects the changes and concerns that arise in the middle adult years.
3. This statement reflects the changes and concerns that arise in the middle adult years.
4. This statement reflects the changes and concerns that arise in the middle adult years.
5. While unplanned pregnancy can be a concern for perimenopausal women, this statement is more likely to come from a young adult.
Page Ref: 28-29
Cognitive Level: Analyzing
Client Need & Sub: Psychosocial Integrity: Coping Mechanisms
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: 2.1 Define health and the health-illness continuum, and discuss factors affecting the health of individuals, families, communities, and special populations.
MNL Learning Outcome: 1. Consider the impact of health, wellness, illness, and injury to patients and their families.

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32) An older patient is experiencing confusion and lethargy after taking routine doses of medication. Which age-related change should the nurse identify that could predispose this patient to toxic drug effects? Select all that apply.
1. Changes in tissue and organ structure
2. Decrease in liver function
3. Taking several drugs at once
4. Decrease in renal function
5. Decrease in taste sensation
Answer: 1, 2, 3, 4
Explanation: 1. Changes in tissue and organ structure contribute to a predisposition to toxic drug effects.
2. Reduced liver function contributes to a predisposition to toxic drug effects.
3. Taking several drugs at once contributes to a predisposition to toxic drug effects.
4. Reduced renal function contributes to a predisposition to toxic drug effects.
5. A decrease in taste sensation is an age-related change but it does not contribute to toxic drug effects.
Page Ref: 32
Cognitive Level: Analyzing
Client Need & Sub: Physiological Integrity: Pharmacological and Parenteral Therapies
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: IX.8. Implement evidence-based nursing interventions as appropriate for managing the acute and chronic care of patients and promoting health across the lifespan | NLN Competencies: Context and Environment; Knowledge; chronic disease management | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: 2.1 Define health and the health-illness continuum, and discuss factors affecting the health of individuals, families, communities, and special populations.
MNL Learning Outcome: 1. Consider the impact of health, wellness, illness, and injury to patients and their families.

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33) In a healthcare provider's office, the nurse case manager approaches a patient with type 2 diabetes mellitus to review the patient-centered medical home (PCMH) approach to care. What benefits of this approach should the case manager include in this discussion? Select all that apply.
1. Prevents acute disease crises
2. Encourages preventive services
3. Eliminates health insurance billing
4. Comprehensive and coordinated care
5. Focus on all levels of illness prevention
Answer: 1, 2, 4, 5
Explanation: 1. For people with chronic illnesses, the goal of the PCMH is to provide comprehensive care with a focus on preventing acute disease crises.
2. One facet of the PCMH is increased preventive services.
3. Health insurance billing is not a facet of this care delivery model.
4. PCMH is designed to provide comprehensive and coordinated patient and family care.
5. The PCMH is a primary care model that focuses on all levels of illness prevention.
Page Ref: 42
Cognitive Level: Applying
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: 2.4 Describe essential elements and goals of coordinated primary care models; the services, settings, and essential components of community-based care and home healthcare; and nursing interventions to deliver safe, effective, and competent care to patients in their homes.
MNL Learning Outcome: 4. Recognize the various care approaches and settings for nursing care.

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34) The nurse is preparing to provide disease management care to a patient with heart failure. On what should the nurse focus when caring for this patient? Select all that apply.
1. Disease process
2. Daily monitoring
3. Medication management
4. Transfer to long-term care
5. Frequency of hospitalization
Answer: 1, 2, 3
Explanation: 1. In the disease management model, the focus is on education about the disease.
2. In the disease management model, the focus is on self-monitoring.
3. In the disease management model, the focus is on management.
4. Transferring to long-term care is not a focus in the disease management model.
5. The goal is to avoid hospitalization in the disease management model.
Page Ref: 42
Cognitive Level: Applying
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: 2.4 Describe essential elements and goals of coordinated primary care models; the services, settings, and essential components of community-based care and home healthcare; and nursing interventions to deliver safe, effective, and competent care to patients in their homes.
MNL Learning Outcome: 4. Recognize the various care approaches and settings for nursing care.

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35) The nurse is preparing to transition a patient with chronic obstructive pulmonary disease from a rehabilitation facility back to home. What preparations has the nurse made to support this patient's transition? Select all that apply.
1. Instructing on symptoms to report
2. Scheduling healthcare provider visits
3. Submitting facility charges to Medicare
4. Creating an evidence-based plan of care
5. Reviewing health insurance coverage plans
Answer: 1, 2, 4
Explanation: 1. Interventions include an emphasis on early identification of and response to risks and symptoms to avoid adverse events.
2. Interventions include ongoing support and an emphasis on early identification of and response to risks and symptoms to avoid adverse events.
3. It is not the nurse's responsibility to bill Medicare for the patient's charges.
4. Interventions include development of an evidence-based plan of care.
5. It is not the nurse's responsibility to review health insurance coverage plans.
Page Ref: 42
Cognitive Level: Analyzing
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention | Nursing/Integrated Concepts: Nursing Process: Evaluation
Learning Outcome: 2.4 Describe essential elements and goals of coordinated primary care models; the services, settings, and essential components of community-based care and home healthcare; and nursing interventions to deliver safe, effective, and competent care to patients in their homes.
MNL Learning Outcome: 4. Recognize the various care approaches and settings for nursing care.

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36) The nurse notes that a patient with osteoarthritis receiving transition care has achieved the goals for this care delivery approach. What did the nurse observe to come to this conclusion? Select all that apply.
1. Safety bars installed in the bathroom
2. Oldest daughter moved out of the patient's home
3. Monthly pension from previous employer reduced
4. Adhering to exercise, pain medication, and dietary plans
5. Last hospitalization for treatment from a fall 9 months ago
Answer: 1, 4, 5
Explanation: 1. The goal of transitional care is to improve the care and outcomes of chronically ill patients by streamlining plans of care, improving the ability of patients and caregivers to manage care needs, and interrupting patterns of frequent acute health crises. Installing safety bars in the bathroom is evidence that this goal has been achieved.
2. The goal of transitional care is to improve the care and outcomes of chronically ill patients by streamlining plans of care, improving the ability of patients and caregivers to manage care needs, and interrupting patterns of frequent acute health crises. The oldest daughter moving out of the home could create a care crisis if the daughter provided care to the patient.
3. The goal of transitional care is to improve the care and outcomes of chronically ill patients by streamlining plans of care, improving the ability of patients and caregivers to manage care needs, and interrupting patterns of frequent acute health crises. A reduced income could cause a crisis because it could impact resources for healthcare, medication, food, or shelter.
4. The goal of transitional care is to improve the care and outcomes of chronically ill patients by streamlining plans of care, improving the ability of patients and caregivers to manage care needs, and interrupting patterns of frequent acute health crises. Adhering to exercise, pain medication, and dietary plans indicates the ability to manage care needs.
5. The goal of transitional care is to improve the care and outcomes of chronically ill patients by streamlining plans of care, improving the ability of patients and caregivers to manage care needs, and interrupting patterns of frequent acute health crises. Being hospitalized 9 months ago indicates an interruption in the pattern of frequent acute health crises.
Page Ref: 42
Cognitive Level: Analyzing
Client Need & Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: VII.5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up throughout the lifespan | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention | Nursing/Integrated Concepts: Nursing Process: Evaluation
Learning Outcome: 2.4 Describe essential elements and goals of coordinated primary care models; the services, settings, and essential components of community-based care and home healthcare; and nursing interventions to deliver safe, effective, and competent care to patients in their homes.
MNL Learning Outcome: 4. Recognize the various care approaches and settings for nursing care.

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37) The nurse working in an acute care hospital is considering a position working with patients in the community. What care settings should the nurse consider before making a final decision? Select all that apply.
1. Parish nursing
2. Homeless shelters
3. Adoption agencies
4. County health department
5. Ambulatory surgical center
Answer: 1, 2, 4, 5
Explanation: 1. Community-based nursing care settings include parish nursing.
2. Community-based nursing care settings include homeless shelters.
3. Community-based nursing care settings do not include adoption agencies.
4. Community-based nursing care settings include county health departments.
5. Community-based nursing care settings include ambulatory surgical centers.
Page Ref: 42
Cognitive Level: Applying
Client Need & Sub: Safe and Effective Care Environment: Management of Care
Standards: QSEN Competencies: I.C.4. Seek learning opportunities with patients who represent all aspects of human diversity | AACN Essentials Competencies: II.1. Apply leadership concepts, skills and decision making in the provision of high quality nursing care, healthcare team coordination and the oversight and accountability for care delivery in a variety of settings | NLN Competencies: Context and Environment; Knowledge; health promotion/disease prevention | Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: 2.4 Describe essential elements and goals of coordinated primary care models; the services, settings, and essential components of community-based care and home healthcare; and nursing interventions to deliver safe, effective, and competent care to patients in their homes.
MNL Learning Outcome: 4. Recognize the various care approaches and settings for nursing care.

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38) A patient recovering from total hip replacement surgery is being transferred to a rehabilitation facility. When discussing this facility with the patient, what should the nurse include? Select all that apply.
1. An assessment of functional abilities will be completed.
2. The patient should expect to provide all self-care.
3. A team of therapists and nurses will be working with the patient.
4. The focus will include interpersonal relationships and family support.
5. Plans will be made to transition the patient to a long-term care facility.
Answer: 1, 3, 4
Explanation: 1. Assessment in a rehabilitation facility includes functional health level and self-care abilities.
2. There is no expectation that the patient will provide all self-care.
3. Rehabilitation promotes reintegration into the patient's family and community through a team approach.
4. Many different aspects of the patient's life are addressed in the plan of care, including interpersonal relationships and family support.
5. Patients who receive care in a rehabilitation facility are not transferred to a long-term care facility.
Page Ref: 43
Cognitive Level: Applying
Client Need & Sub: Safe and Effective Care Environment: Management of Care
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: IX.3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Knowledge and Science; Knowledge; Integration of knowledge from nursing and other disciplines | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: 2.4 Describe essential elements and goals of coordinated primary care models; the services, settings, and essential components of community-based care and home healthcare; and nursing interventions to deliver safe, effective, and competent care to patients in their homes.
MNL Learning Outcome: 4. Recognize the various care approaches and settings for nursing care.

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39) The nurse is determining if a patient recovering from abdominal surgery is a candidate for home care. Which information should the nurse use to help make this decision? Select all that apply.
1. The patient needs intermittent skilled nursing care.
2. The patient prefers to use an agency that is Medicare certified.
3. The patient plans to attend the upcoming senior citizen bingo night.
4. The patient can walk to a shopping mall to do banking and purchase groceries.
5. The patient is unable to change the abdominal wound dressing because of limited upper-extremity mobility.
Answer: 1, 2, 5
Explanation: 1. To receive healthcare coverage for home care, the patient must need intermittent skilled nursing care.
2. To receive healthcare coverage for home care, the patient must use an agency that is Medicare certified.
3. To receive healthcare coverage for home care, the patient must be homebound and limited to leaving the home for healthcare visits or religious services. Being able to attend bingo night indicates the patient is not homebound.
4. To receive healthcare coverage for home care, the patient must be homebound and limited to leaving the home for healthcare visits or religious services. Being able to shop and bank independently means the patient is not homebound.
5. To receive healthcare coverage for home care, the patient must need intermittent skilled nursing care. Needing someone to change the wound dressing means requiring intermittent skilled nursing care.
Page Ref: 44
Cognitive Level: Applying
Client Need & Sub: Safe and Effective Care Environment: Management of Care
Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essentials Competencies: IX.3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings | NLN Competencies: Context and Environment; Knowledge; healthcare systems | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: 2.4 Describe essential elements and goals of coordinated primary care models; the services, settings, and essential components of community-based care and home healthcare; and nursing interventions to deliver safe, effective, and competent care to patients in their homes.
MNL Learning Outcome: 4. Recognize the various care approaches and settings for nursing care.

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40) The primary caregiver for a patient with Alzheimer disease receiving care in the home wants to attend a granddaughter's high school graduation in a city 50 miles from the patient's home. What should the home care nurse suggest so that the caregiver can attend this event?
1. Admit the patient to hospice.
2. Schedule respite care for the caregiver.
3. Admit the patient to an inpatient facility.
4. Transport the patient with the caregiver to the graduation.
Answer: 2
Explanation: 1. Hospice care is a special component of home care, designed to provide medical, nursing, social, psychologic, and spiritual care for terminally ill patients and their families. The patient has not been diagnosed with a terminal illness.
2. Respite care provides short-term or intermittent home care, often using volunteers. These services exist primarily to give the family member or friend who is the primary caregiver some time away from care.
3. There is no medical reason for the patient to be admitted to an inpatient facility.
4. The caregiver will not be able to drive and safely care for the patient at the same time.
Page Ref: 47
Cognitive Level: Applying
Client Need & Sub: Psychosocial Integrity: Support Systems
Standards: QSEN Competencies: I.A.6. Describe strategies to empower patients or families in all aspects of the healthcare process | AACN Essentials Competencies: IX.5. Deliver compassionate, patient-centered, evidence-based care that respects patient and family preferences | NLN Competencies: Context and Environment; Knowledge; family dynamics | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: 2.4 Describe essential elements and goals of coordinated primary care models; the services, settings, and essential components of community-based care and home healthcare; and nursing interventions to deliver safe, effective, and competent care to patients in their homes.
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41) The nurse is visiting the home of a patient recovering from an acute gastrointestinal bleed. Which action should the nurse take to limit distractions during this home visit? Select all that apply.
1. Establishing short- and long-term goals
2. Explaining the primary goal of home care
3. Exploring the patient's and family's expectations of home care
4. Asking the patient if the television could be turned off during the visit
5. Asking the patient if the visit could be conducted in the bedroom away from small children and pets
Answer: 4, 5
Explanation: 1. Establishing short- and long-term goals is setting priorities with the patient.
2. Explaining the primary goal of home care is setting goals and priorities.
3. Exploring the patient's and family's expectation of home care is setting goals and priorities.
4. Asking to turn off the television is limiting a distraction.
5. Asking to conduct the visit in a room away from children and pets is limiting a distraction.
Page Ref: 45
Cognitive Level: Applying
Client Need & Sub: Safe and Effective Care Environment: Management of Care
Standards: QSEN Competencies: I.A.6. Describe strategies to empower patients or families in all aspects of the healthcare process | AACN Essentials Competencies: IX.5. Deliver compassionate, patient-centered, evidence-based care that respects patient and family preferences | NLN Competencies: Context and Environment; Knowledge; family dynamics | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: 2.4 Describe essential elements and goals of coordinated primary care models; the services, settings, and essential components of community-based care and home healthcare; and nursing interventions to deliver safe, effective, and competent care to patients in their homes.
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42) After completing a home assessment, the nurse determines that safety hazards exist in a patient's bathroom. What did the nurse assess to come to this conclusion? Select all that apply.
1. Water temperature of 150°F
2. Grab bars around the toilet only
3. Scatter rug outside the shower stall
4. Smoke detector battery with a low reading
5. Electrical outlet on the wall near the shower door
Answer: 1, 2, 3, 5
Explanation: 1. A water temperature of 150°F is too high. This could burn the patient.
2. Grab bars need to be within the bathtub or shower area in addition to near the commode.
3. Nonstick rugs should be used. Scatter rugs should be avoided or removed.
4. Smoke detectors are not routinely mounted near bathrooms.
5. Electrical outlets should not be near areas of water.
Page Ref: 46
Cognitive Level: Analyzing
Client Need & Sub: Safe and Effective Care Environment: Safety and Infection Control
Standards: QSEN Competencies: V.B.4. Communicate observations or concerns related to hazards and errors to patients, families and the healthcare team | AACN Essentials Competencies: II.7. Promote factors that create a culture of safety and caring | NLN Competencies: Quality and Safety; Practice-Know-How; Communicate potential risk factors and actual errors | Nursing/Integrated Concepts: Nursing Process: Evaluation
Learning Outcome: 2.4 Describe essential elements and goals of coordinated primary care models; the services, settings, and essential components of community-based care and home healthcare; and nursing interventions to deliver safe, effective, and competent care to patients in their homes.
MNL Learning Outcome: 4. Recognize the various care approaches and settings for nursing care.

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43) While making a home visit, the nurse learns that a patient self-administering insulin injections is placing the used needles and syringes in the family's trash can. What action should the nurse take?
1. Instruct the patient to place the needles and syringes in a separate plastic bag.
2. Nothing, because these needles and syringes are harmless to the general population.
3. Ask the patient to save all used syringes and needles after use for the nurse to dispose of.
4. Teach the patient to place all used syringes and needles into the red biohazard sharps box.
Answer: 4
Explanation: 1. Used needles and syringes should not be placed in a plastic bag. They could puncture the bag and cause someone harm.
2. Doing nothing would be considered negligence on the part of the nurse.
3. The nurse is not responsible for disposing of a patient's used needles and syringes.
4. The disposal of sharp objects such as needles used for injections is a safety issue in the home. The nurse must address this with the patient, demonstrate safe disposal, and provide the necessary equipment for safe disposal.
Page Ref: 46
Cognitive Level: Applying
Client Need & Sub: Safe and Effective Care Environment: Safety and Infection Control
Standards: QSEN Competencies: V.B.4. Communicate observations or concerns related to hazards and errors to patients, families and the healthcare team | AACN Essentials Competencies: II.7. Promote factors that create a culture of safety and caring | NLN Competencies: Quality and Safety; Practice-Know-How; Communicate potential risk factors and actual errors | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: 2.4 Describe essential elements and goals of coordinated primary care models; the services, settings, and essential components of community-based care and home healthcare; and nursing interventions to deliver safe, effective, and competent care to patients in their homes.
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44) During a home visit, the nurse notes that the caregiver does not apply clean gloves before removing the patient's leg wound dressings. What should the nurse do to encourage infection control practices in this home?
1. Place the box of gloves next to the sink in the bathroom.
2. Remind the caregiver to wash hands after completing wound care.
3. Place the box of gloves next to the bag used to discard soiled dressings.
4. Encourage the caregiver to touch only the edges of the soiled dressings.
Answer: 3
Explanation: 1. Placing the box of gloves next to the sink in the bathroom might not be convenient enough to encourage consistent use.
2. Hand washing should occur before and after wound care.
3. If the box of gloves is next to the bag used to discard soiled dressings, the caregiver will be reminded to put on a pair of gloves before removing the dressing.
4. Touching the edges of the soiled dressing will not prevent the spread of infection.
Page Ref: 46
Cognitive Level: Applying
Client Need & Sub: Safe and Effective Care Environment: Safety and Infection Control
Standards: QSEN Competencies: V.B.4. Communicate observations or concerns related to hazards and errors to patients, families and the healthcare team | AACN Essentials Competencies: II.7. Promote factors that create a culture of safety and caring | NLN Competencies: Quality and Safety; Practice-Know-How; Communicate potential risk factors and actual errors | Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: 2.4 Describe essential elements and goals of coordinated primary care models; the services, settings, and essential components of community-based care and home healthcare; and nursing interventions to deliver safe, effective, and competent care to patients in their homes.
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Chapter 2

Health and Illness Care of Adults

Learning Outcomes

1. Define health and the health–illness continuum, and discuss factors affecting the health of individuals, families, communities, and special populations.
2. Compare and contrast health risks, assessment, and health promotion for the young adult, middle adult, and older adult.
3. Differentiate between disease, illness, and injury, and describe illness behaviors and needs of the patient with acute, critical, and chronic illness.
4. Describe essential elements and goals of coordinated primary care models; the services, settings, and essential components of community-based care and home healthcare; and nursing interventions to deliver safe, effective, and competent care to patients in their homes.

Key Concepts

I. Health and Wellness

A. Health:

1. WHO definition:

a) A state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity.

b) Health is not just a state of being, but the resources used by each person in dealing with the challenges of living.

2. Health–illness continuum:

a) High-level wellness at one extreme of the continuum and death at the opposite extreme

B. Factors affecting health

1. Social determinants of health

a) Conditions in which people are born, grow, work, live, and age.

2. Holistic healthcare:

a) All aspects of an individual—physical, psychosocial, cultural, spiritual, and intellectual—as essential components of individualized care

3. Genetic makeup

a) Affects personality, temperament, body structure, intellectual potential, and susceptibility to alterations in health

4. Cognitive abilities and education

a) May affect health practices

b) Educational level affects ability to follow guidelines.

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5. Ethnicity and culture
    a) Different groups have higher rates in certain diseases
    b) Ethnic/cultural background may influence health values and behaviors, lifestyles, and illness behaviors
    c) Different treatment practices
6. Lifestyle and environment
    a) Patterns of eating, chemical substances, exercise and rest patterns, and coping methods
    b) Occupational exposure to toxic substances, air, water, and food pollution
    c) Environmental temperature variations
7. Socioeconomic background
    a) Both lifestyle and environmental influences impacted by income.
    b) Poverty and homelessness negatively influence health status.
8. Geographic area
    a) Influences health status, health risks, and access to healthcare
9. Family
    a) Social unit of two or more emotionally involved people dependent on one another
    b) Responsibilities:
        (1) Developing self-care and dependent-care competencies
        (2) Fostering resilience of family members
        (3) Providing social and physical resources
        (4) Promoting healthy individuals
10. Age, gender, and development
    a) Some diseases occur in only one gender or the other (prostate and cervical cancer)
    b) Age increases risk of some diseases (cardiovascular disorders, chronic illnesses)
    c) Three stages of adult years: Young adult (18–40), middle adult (40–65), and older adult (over 65)
11. The young adult
    a) Injuries
        (1) Unintentional injuries: Leading cause of death ages 15–44
    b) Sexually transmitted infections
        (1) Genital herpes, chlamydia, gonorrhea, syphilis, and HIV/AIDS
    c) Substance abuse
        (1) Binge drinking more common among young adults
        (2) Other substances: Nicotine, marijuana, stimulants (amphetamine, methamphetamine, and cocaine), opioid pain relievers
    d) Physical and psychosocial stressors
        (1) Malignancies: Top five leading causes of death in young adults

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(2) Behavioral patterns may lead to problems later
(3) Work-related risks, exposure to sun, high-risk activities, ingestion of chemical substances, pregnancy

12. The middle adult
    a) Obesity
        (1) Increases risk of: Atherosclerosis, hypertension, elevated cholesterol and triglyceride levels, diabetes, cancer, osteoarthritis, fatty liver disease, and gallbladder disease
    b) Cardiovascular disease (CVD)
        (1) Second leading cause of death in middle-age adults
        (2) Risk factors: Diabetes, hypertension, obesity, prevalent chronic diseases, male gender, family history, physical inactivity, cigarette smoking, and elevated blood cholesterol levels
        (3) Potential consequences: Stroke, kidney disease, hypertension, and peripheral vascular disease
    c) Cancer
        (1) Leading cause of death in adults between ages 45–64 in the U.S.
        (2) Risk factors: Environmental carcinogens, alcohol, nicotine
    d) Substance abuse
        (1) Most common substances: Alcohol, nicotine, and prescription drugs
    e) Physical and psychosocial stressors
        (1) Changes in appearance, kids, aging parents, career changes, and divorce

13. The older adult
    a) Most frequent conditions: Arthritis, heart disease, cancer, diabetes, and hypertension
    b) Injuries
        (1) Risk increases due to: Normal physiologic changes from aging, pathophysiologic alterations, environmental hazards, and lack of support systems
        (2) Major causes: Fire, falls, and motor vehicle crashes
    c) Pharmacologic effects
        (1) Risk factors
            (a) Age-related changes alter absorption of medications; poor nutrition and liver function alter drug metabolism; kidney may not excrete drugs at normal rate
            (b) Self-administration of drugs impacted by aging mind
            (c) Adverse drug reactions due to multiple medications needed
            (d) Unable to afford both medications and food

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d) Physical and psychosocial stressors
(1) Accumulation of exposure, living conditions, economic constraints, and elder abuse
(2) Psychosocial stressors: Illness/death of spouse, limited income, retirement, isolation, relocation, role loss/reversal, and depression

14. Considerations for special populations
a) Military service members and veterans
(1) Demographics
(a) 1.4 million persons in active-duty military positions in the United States
(2) Military Culture
(a) Covert displays of service-related values, customs, traditions, philosophical principles, and/or behavioral standards
(b) Common attributes: Self-discipline, teamwork, loyalty, selfless duty to one's country, order, and procedure, rank and obedience to authority
(3) Service-related healthcare issues
(a) World War II Veterans
(b) Korean Conflict Veterans
(c) Vietnam Veterans
(d) Recent Veterans
(4) Nursing implications:
(a) Complete a military-specific, service-related health history
(b) Assess for historical hazardous exposures

b) Gender and sexual minorities
(1) Individuals who are LGBTQI continue to experience health disparities due to historical and ongoing stigmatization
(2) Nursing implications:
(a) Build trust
(b) Avoid making assumptions
(c) Conduct a critical self-assessment of their personal knowledge, attitudes, assumptions, and unconscious biases

15. Adults with sequelae from congenital/childhood conditions
a) Adults surviving childhood cancers:
(1) Assess for late effects of treatment
b) Adults with congenital heart defects:
(1) CHF requires life-long cardiac care
(2) Monitor for arrhythmias and pulmonary hypertension
c) Nursing implications:

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(1) Facilitate access to routine and comprehensive health screening
(2) Identify worsening comorbid chronic conditions or new complications

II. Health Promotion and Maintenance

A. Activities that maintain wellness:

1. Screening
2. Immunization
3. Health teaching

B. Overarching goals

1. Attain high-quality, longer lives free of preventable disease, disability, injury, and premature death.
2. Achieve health equity, eliminate disparities, and improve health.
3. Create social, physical environments that promote good health.
4. Promote quality of life, healthy development, and healthy behaviors.

C. Health indicators

1. Access to health services
2. Clinical preventative services
3. Environmental quality
4. Injury and violence
5. Maternal, infant, and child health
6. Mental health
7. Nutrition, physical activity, and obesity
8. Oral health
9. Reproductive and sexual health
10. Social determinants
11. Substance abuse
12. Tobacco use

D. Healthy behaviors to promote health and wellness:

1. Balanced diet to maintain a healthy weight with nutrient-dense foods
2. Exercise moderately and regularly
3. Sleep 7 to 8 hours each day
4. Eliminate smoking and all tobacco products
5. Limit sun exposure and use sunscreen
6. Practice safe sex
7. Regular dental exams and cleanings
8. Maintain recommended immunizations
9. Follow guidelines for recommended health screenings

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III. Disease, Illness, and Injury

A. Disease: Alteration in a body system or organ structure or function

1. Congenital, present at birth, or acquired
2. Causes of disease
    a) Genetic variations
    b) Environmental factors
    c) Infectious agents
    d) Tissue injury due to lack of oxygen, temperature extremes, radiation, or toxins
    e) Poor nutrition (obesity, malnutrition)
    f) Inadequate or disordered immune responses
    g) Neoplasia
3. Classifications of disease: Acute or chronic, communicable, congenital, degenerative, functional, malignant, idiopathic, or iatrogenic
4. Manifestations: Signs or symptoms of disease

B. Illness: Response a person has to a disease

1. Acute illness: Occurs rapidly, lasts short amount of time, and is self-limiting.
    a) Critical illness: Requires life-saving interventions
    b) Sequence of illness behaviors
        (1) Experiencing symptoms
        (2) Assuming the sick role
        (3) Seeking medical care
        (4) Assuming a dependent role
        (5) Achieving recovery and rehabilitation
2. Chronic illness: Long-term pathologic and psychologic alterations in health
    a) Behavioral risk factors: Lack of physical activity, poor nutrition, tobacco use, and excessive alcohol consumption
    b) Link between adverse childhood experience (ACE) and chronic illness
    c) Remission: No symptoms although disease is present
    d) Exacerbation: Symptoms reappear
    e) Common challenges
        (1) Recognizing and appropriately responding to symptoms.
        (2) Using medications effectively
        (3) Learning to manage an ongoing treatment plan
        (4) Modifying lifestyle to adapt to and minimize impact of disease
        (5) Developing effective strategies for coping with the psychosocial effects
        (6) Maintaining a feeling of being in control
        (7) Interacting effectively with the healthcare system on an ongoing basis

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C. Illness prevention

1. Primary prevention: Prevent disease by eliminating risk factors
    a) Eating nutritious foods, balancing calorie intake with energy expenditure
    b) Reducing exposure to industrial hazards
    c) Practicing safer sex
    d) Obtaining immunizations
    e) Eliminating the use of alcohol and cigarettes
    f) Avoiding cell phone use and texting while driving
2. Secondary prevention: Emphasizes early diagnosis and treatment
    a) Screening for common diseases
    b) Obtaining regular physical examinations
    c) Performing self-examination for breast and/or testicular cancer
    d) Obtaining specific treatment for illness
3. Tertiary prevention: Preventing further health decline and reducing complications
    a) Rehabilitation programs for cardiovascular problems, head injuries, and strokes
    b) Work training programs following illness or injury
    c) Educating the public to employ rehabilitated people to the fullest possible extent

D. Injury and violence

1. In the first half of life, more Americans die from violence and injury than any other cause
2. Has a significant economic impact on individuals, families, communities, and country
3. CDC focus:
    a) Motor vehicle crashes
    b) Opioid overdoses
    c) Fall injuries
    d) Victims of intimate partner violence
    e) Rape
4. Nurses and other healthcare professionals are at increased risk for occupational injury and workplace violence.
5. OSHA identified settings to implement workplace violence protocols:
    a) Residential treatment settings such as nursing homes
    b) Nonresidential treatment/service settings
    c) Community care settings
    d) Fieldwork settings

E. Injury prevention

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1. Patient teaching regarding safe practices in many areas
    a) Motor vehicle safety
    b) Use of safety gear
    c) Actions to prevent on-the-job injuries
    d) Safe medication handling
    e) Safe handling of sharps
    f) Safe handling of patients

IV. Types of Nursing Care

A. Roles of Nursing Care:

1. Health promotion/disease prevention
2. Acute care
3. Chronic care
4. End-of-life care

B. Primary care

1. Patient-centered medical home (PCMH)
    a) Focuses on all levels of illness prevention
    b) Includes: Primary care provider, care coordinators or case managers, social workers, rehabilitation therapists
    c) Functions
        (1) Ongoing patient–primary care provider relationship
        (2) Responsibility for total patient care
        (3) Improving access to care and reducing health disparities
        (4) Increasing preventive services
        (5) Improving chronic disease management

C. Care and disease management

1. Nurses' role
    a) Assess problems
    b) Communicate with healthcare providers
    c) Navigate healthcare system
    d) Provide education and instruction about disease

D. Transitional care

1. Focused on interventions for transitions between healthcare settings or to home
2. Interventions: Development of an evidence-based plan of care, ongoing support, emphasis on early identification of, and response to, risks and symptoms
3. Goals: Improve care and outcomes of chronically ill patients by
    a) Streamlining plans of care
    b) Improving ability of patients and caregivers to manage care needs

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c) Interrupting patterns of frequent acute health crises

E. Community-based care
1. Nurses' role
a) Leading support groups in a hospital
b) Managing freestanding clinic to provide care in patient's home
c) Other settings: Medical centers, disease management groups, county health departments, long-term care, parish nursing, homeless shelters, mental health centers, ambulatory surgery centers, alcohol/drug rehabilitation, industry, jails, and prisons

F. Skilled Care and Extended care
1. Helps with transition from acute care to home
2. Nurses role
a) Assess residents
b) Train caregivers to recognize and respond to changes
c) Treat residents within the extended care setting
d) Communicate with families

G. Rehabilitation
1. Primarily focuses on patients with chronic illnesses or impairments
2. Settings: Home, skilled care facilities, specialty programs within medical centers or community
3. Assessment includes: Functional health level and self-care abilities, educational needs, psychosocial needs, and the home environment

H. Home healthcare
1. Services include: Skilled nursing, physical and occupational therapy, pharmacy services, and durable medical equipment
2. Medicare reimbursement criteria
a) Physician decides patient needs care at home, makes plan for home care.
b) Patient needs at least one of the following:
(1) Intermittent skilled nursing care
(2) Physical therapy
(3) Speech language pathology services
(4) Occupational therapy
c) Patient is homebound.
d) Home care agency is Medicare approved.
e) Skilled provider performs at least one of the following tasks:
(1) Teaching about a new or acute situation
(2) Assessing an acute process or a change in patient's condition

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(3) Performing skilled procedure or hands-on service requiring professional skill of a licensed nurse

3. Patients benefiting from home care
    a) Cannot live independently from home
    b) Chronic debilitating illnesses
    c) Terminally ill and want to die at home
    d) Do not need in-patient hospital or nursing home care
    e) Need short-term help at home for postoperative care
4. Safety
    a) Promoting safety in home care
    b) Be alert to:
        1) How patients ambulate and handle stairs
        2) How patients manage care when alone
        3) A supply of expired medications
        4) Inappropriate clothing or shoes
        5) Cooking habits that may precipitate a fire
        6) Inadequate food supply
        7) Poorly functioning utilities
        8) Signs of abusive behavior
        9) Disposal of toxic medications and sharp objects
        10) Personal safety and survival for nurse
5. Infection control
    a) Health teaching is most important nursing intervention
        1) Effective hand hygiene
        2) Use of gloves
        3) Disposal of wastes and soiled dressings
        4) Handling of linens
        5) Practice of standard precautions

I. Palliative and Hospice Care
1. Palliative care:
    a) Focuses on symptom management with intent of improving quality of life for patients with chronic illness
2. Hospice care:
    a) Model of care delivered in many settings
    b) Designed to provide medical, nursing, social, psychologic, and spiritual care for terminally ill patients and their families
    c) Allows the patient to die with dignity
3. Respite care:
    a) Short-term or intermittent home care, often using volunteers
    b) Give the family member or primary caregiver some time away from care

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Chapter Highlights

A. Health is a dynamic state influenced by multiple internal, external, physical, social, and mental factors.
B. The health–illness continuum represents health as a dynamic process, with high-level wellness at one extreme of the continuum and death at the opposite extreme.
C. The adult years are commonly divided into three stages: The young adult (age 18 to 40), the middle adult (age 40 to 65), and the older adult (over age 65).
D. Young adults are at risk for alterations in health from injuries, sexually transmitted infections, substance abuse, and physical and psychologic stressors. Cancers are a leading cause of death, and behaviors established in young adulthood affect risk for developing common chronic diseases in the future.
E. Middle adults are at risk for alterations in health from obesity, cardiovascular disease, cancer, substance abuse, and the stresses of change and transition.
F. Older adults are at risk for alterations in health from chronic illnesses, injuries, drug toxicities, and changes in income and marital status.
G. Community factors known as social determinants of health include social support systems, access to healthcare services, the environment, and economic resources.
H. Populations that may require extra care include veterans, members of the LGBTQI community, and adult survivors of congenital/childhood conditions.
I. Healthy People 2020 provides a foundation for disease prevention and wellness activities across public and private sectors, as well as a model for measuring achievement of identified goals and objectives.
J. Nurses play a major role in promoting the health of individuals, families, and communities. Health promotion focuses screening, immunizations, and health teaching.
K. Disease, defined as any alteration in a body system or organ structure or function, are characterized by identifiable signs and symptoms and by specific recognized pathophysiologic processes and etiologies.
L. Illness is the response an individual has to a disease; this response is highly individualized because the individual responds not only to his or her own perceptions of the disease but also to the perceptions of others. Illnesses can be acute or chronic.
M. Injury and violence affect everyone and the medical-surgical nurse will provide care for patients and families experiencing health-related problems created by these unexpected and unintended events.
N. The primary health risks for the individual and family vary, depending on age and developmental stage, among other factors. Behaviors to promote individual health, however, remain very consistent throughout the lifespan.
O. Most health and illness care occurs outside the acute hospital environment, in community-based and primary care settings. Home healthcare is increasingly important as hospital stays become shorter or are avoided altogether.

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P. Primary care is comprehensive first-contact health and illness care across the lifespan. Preventive care services as well as care for acute and chronic diseases are encompassed within the primary care model.
Q. Transitional care focuses on interventions to facilitate transitions from one healthcare setting to another or to home. The steps of transitional care include health promotion, acute care, chronic care, and end-of-life care.
R. Community-based care focuses on individual and family healthcare delivered in the local community.
S. Skilled care, which is reimbursed by Medicare, is typically provided in extended care or long-term care facilities such as nursing homes. Rehabilitation nursing is based on a philosophy that each person has a unique set of strengths and abilities that can enable that person to live with dignity, self-worth, and independence.
T. Ensuring safety and patient and family education are major responsibilities of the home healthcare nurse. In this setting, the patient and family are primary members of the team and are instrumental in establishing priorities of care.

SUGGESTION FOR CLASSROOM ACTIVITY- LEARNING OUTCOME ONE

Discuss wellness opportunities for yourself and your family. What facilities are available?

SUGGESTION FOR CLASSROOM ACTIVITY- LEARNING OUTCOME TWO

Develop an educational poster or brochure that promotes wellness for children

SUGGESTIONS FOR CLASSROOM ACTIVITY- LEARNING OUTCOME THREE

Discuss the reactions of clients to disease. How does the patient's culture and socioeconomic status affect this reaction?

Discuss the differences in caring for acute patients versus long-term care patients.

SUGGESTION FOR CLASSROOM ACTIVITY- LEARNING OUTCOME FOUR

Prepare to make a home visit to a patient with a chronic illness. Discuss in class the areas to assess, the areas to focus when teaching, and any tools that should be taken during the visit to provide care.

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SUGGESTION FOR CLINICAL ACTIVITY- LEARNING OUTCOME FOUR

Assign the students to different care sites to observe the processes and actions taken to provide care. Have the students discuss their observations during post clinical conference.

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