Medical Surgical Nursing 10th edition Lewis Test Bank

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MULTIPLE CHOICE

1. The nurse is obtaining a health history from a new patient. Which data will be the focus of patient teaching?
   a. Age and gender
   b. Saturated fat intake
   c. Hispanic/Latino ethnicity
   d. Family history of diabetes

   ANS: B
   Behaviors are strongly linked to many health care problems. The patient's saturated fat intake is a behavior that the patient can change. The other information will be useful as the nurse develops an individualized plan for improving the patient's health, but will not be the focus of patient teaching.

   DIF: Cognitive Level: Apply (application) REF: 18
   TOP: Nursing Process: Planning MSC: NCLEX: Health Promotion and Maintenance

2. The nurse works in a clinic located in a community with many Hispanics. Which strategy, if implemented by the nurse, would decrease health care disparities for the Hispanic patients?
   a. Improve public transportation to the clinic.
   b. Update equipment and supplies at the clinic.
   c. Obtain low-cost medications for clinic patients.
   d. Teach clinic staff about Hispanic health beliefs.

   ANS: D
   Health care disparities are caused by stereotyping, biases, and prejudice of health care providers. The nurse can decrease these through staff education. The other strategies may also be addressed by the nurse but will not directly impact health disparities.

   DIF: Cognitive Level: Apply (application) REF: 19
   TOP: Nursing Process: Planning MSC: NCLEX: Health Promotion and Maintenance

3. What information should the nurse collect when assessing the health status of a community?
   a. Air pollution levels
   b. Number of health food stores
   c. Most common causes of death
   d. Education level of the individuals

   ANS: C
   Health status measures of a community include birth and death rates, life expectancy, access to care, and morbidity and mortality rates related to disease and injury. Although air pollution, access to health food stores, and education level are factors that affect a community's health status, they are not health measures.

   DIF: Cognitive Level: Understand (comprehension) REF: 18
   TOP: Nursing Process: Assessment MSC: NCLEX: Health Promotion and Maintenance

4. The nurse is caring for a Native American patient who has traditional beliefs about health and illness. Which action by nurse is **most** appropriate?
   a. Avoid asking questions unless the patient initiates the conversation.
   b. Ask the patient whether it is important that cultural healers are contacted.

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c. Explain the usual hospital routines for meal times, care, and family visits.
d. Obtain further information about the patient's cultural beliefs from a family member.

ANS: B
Because the patient has traditional health care beliefs, it is appropriate for the nurse to ask whether the patient would like a visit by a *shaman* or other cultural healer. There is no cultural reason for the nurse to avoid asking the patient questions because these questions are necessary to obtain health information. The patient (rather than the family) should be consulted about personal cultural beliefs. The hospital routines for meals, care, and visits should be adapted to the patient's preferences rather than expecting the patient to adapt to the hospital schedule.

DIF: Cognitive Level: Apply (application) REF: 24
TOP: Nursing Process: Implementation MSC: NCLEX: Psychosocial Integrity

5. The nurse is caring for an Asian patient who is being admitted to the hospital. Which action would be **most** appropriate for the nurse to take when interviewing this patient?
a. Avoid eye contact with the patient.
b. Observe the patient's use of eye contact.
c. Look directly at the patient when interacting.
d. Ask a family member about the patient's cultural beliefs.

ANS: B
Observation of the patient's use of eye contact will be most useful in determining the best way to communicate effectively with the patient. Looking directly at the patient or avoiding eye contact may be appropriate, depending on the patient's individual cultural beliefs. The nurse should assess the patient, rather than asking family members about the patient's beliefs.

DIF: Cognitive Level: Apply (application) REF: 25
TOP: Nursing Process: Implementation MSC: NCLEX: Psychosocial Integrity

6. A female staff nurse is assessing a male patient of Arab descent who is admitted with complaints of severe headaches. It is **most** important for the charge nurse to intervene if the nurse takes which action?
a. The nurse explains the 0 to 10 intensity pain scale.
b. The nurse asks the patient when the headaches started.
c. The nurse sits down at the bedside and closes the privacy curtain.
d. The nurse calls for a male nurse to bring a hospital gown to the room.

ANS: C
Many men of Arab ethnicity do not believe it is appropriate to be alone with any female except for their spouse. The other actions are appropriate.

DIF: Cognitive Level: Apply (application) REF: 25
TOP: Nursing Process: Implementation MSC: NCLEX: Psychosocial Integrity

7. The nurse is caring for a patient who speaks a different language. If an interpreter is not available, which action by the nurse is **most** appropriate?
a. Talk slowly so that each word is clearly heard.
b. Speak loudly in close proximity to the patient's ears.
c. Repeat important words so that the patient recognizes their significance.

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d. Use simple gestures to demonstrate meaning while talking to the patient.

ANS: D
The use of gestures will enable some information to be communicated to the patient. The other actions will not improve communication with the patient.

DIF: Cognitive Level: Understand (comprehension) REF: 31
TOP: Nursing Process: Implementation MSC: NCLEX: Psychosocial Integrity

8. The nurse plans care for a hospitalized patient who uses culturally based treatments. Which action by the nurse is **best**?
   a. Encourage the use of diagnostic procedures.
   b. Coordinate the use of folk treatments with ordered medical therapies.
   c. Ask the patient to discontinue the cultural treatments during hospitalization.
   d. Teach the patient that folk remedies will interfere with orders by the health care provider.

   ANS: B
   Many culturally based therapies can be accommodated along with the use of Western treatments and medications. The nurse should attempt to use both traditional folk treatments and the ordered Western therapies as much as possible. Some culturally based treatments can be effective in treating "Western" diseases. Not all folk remedies interfere with Western therapies. It may be appropriate for the patient to continue some culturally based treatments while he or she is hospitalized.

   DIF: Cognitive Level: Apply (application) REF: 22
   TOP: Nursing Process: Planning MSC: NCLEX: Psychosocial Integrity

9. The nurse is caring for a newly admitted patient. Which intervention is the **best** example of a culturally appropriate nursing intervention?
   a. Insist family members provide most of the patient's personal care.
   b. Maintain a personal space of at least 2 feet when assessing the patient.
   c. Ask permission before touching a patient during the physical assessment.
   d. Consider the patient's ethnicity as the most important factor in planning care.

   ANS: C
   Many cultures consider it disrespectful to touch a patient without asking permission, so asking a patient for permission is always culturally appropriate. The other actions may be appropriate for some patients but are not appropriate across all cultural groups or for all individual patients. Ethnicity may not be the most important factor in planning care, especially if the patient has urgent physiologic problems.

   DIF: Cognitive Level: Understand (comprehension) REF: 28
   TOP: Nursing Process: Implementation MSC: NCLEX: Psychosocial Integrity

10. A staff nurse expresses frustration that a Native American patient always has several family members at the bedside. Which action by the charge nurse is **most** appropriate?
    a. Remind the nurse that family support is important to this family and patient.
    b. Have the nurse explain to the family that too many visitors will tire the patient.
    c. Suggest that the nurse ask family members to leave the room during patient care.
    d. Ask about the nurse's personal beliefs about family support during hospitalization.

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ANS: D

The first step in providing culturally competent care is to understand one's own beliefs and values related to health and health care. Asking the nurse about personal beliefs will help achieve this step. Reminding the nurse that this cultural practice is important to the family and patient will not decrease the nurse's frustration. The remaining responses (suggest that the nurse ask family members to leave the room and have the nurse explain to family that too many visitors will tire the patient) are not culturally appropriate for this patient.

DIF: Cognitive Level: Apply (application) REF: 23
TOP: Nursing Process: Implementation MSC: NCLEX: Psychosocial Integrity

11. An older Asian American patient tells the nurse that she has lived in the United States for 50 years. The patient speaks English and lives in a predominantly Asian neighborhood. Which action by the nurse is **most** appropriate?
    a. Include a shaman when planning the patient's care.
    b. Avoid direct eye contact with the patient during care.
    c. Ask the patient about any special cultural beliefs or practices.
    d. Involve the patient's oldest son to assist with health care decisions.

    ANS: C

    Further assessment of the patient's health care preferences is needed before making further plans for culturally appropriate care. The other responses indicate stereotyping of the patient based on ethnicity and would not be appropriate initial actions.

    DIF: Cognitive Level: Apply (application) REF: 23
    TOP: Nursing Process: Planning MSC: NCLEX: Psychosocial Integrity

12. The nurse plans health care for a community with a large number of recent immigrants from Vietnam. Which intervention is the **most** important for the nurse to implement?
    a. Hepatitis testing
    b. Tuberculosis screening
    c. Contraceptive teaching
    d. Colonoscopy information

    ANS: B

    Tuberculosis (TB) is endemic in many parts of Asia, and the incidence of TB is much higher in immigrants from Vietnam than in the general U.S. population. Teaching about contraceptive use, colonoscopy, and testing for hepatitis may also be appropriate for some patients but is not generally indicated for all members of this community.

    DIF: Cognitive Level: Apply (application) REF: 28
    TOP: Nursing Process: Planning MSC: NCLEX: Physiological Integrity

13. When doing an admission assessment for a patient, the nurse notices that the patient pauses before answering questions about the health history. Which action by the nurse is **most** appropriate?
    a. Interview a family member instead.
    b. Wait for the patient to answer the questions.
    c. Remind the patient that you have other patients who need care.
    d. Give the patient an assessment form listing the questions and a pen.

    ANS: B

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Patients from some cultures take time to consider a question carefully before answering. The nurse will show respect for the patient and help develop a trusting relationship by allowing the patient time to give a thoughtful answer. Asking the patient why the answers are taking so much time, stopping the assessment, and handing the patient a form indicate that the nurse does not have time for the patient.

DIF: Cognitive Level: Apply (application) REF: 30
TOP: Nursing Process: Assessment MSC: NCLEX: Psychosocial Integrity

14. Which strategy should be a **priority** when the nurse is planning care for a diabetic patient who is uninsured?
    a. Obtain less expensive medications.
    b. Follow evidence-based practice guidelines.
    c. Assist with dietary changes as the first action.
    d. Teach about the impact of exercise on diabetes.

    ANS: B
    The use of standardized evidence-based guidelines will reduce the incidence of health care disparities among various socioeconomic groups. The other strategies may also be appropriate, but the priority concern should be that the patient receives care that meets the accepted standard.

    DIF: Cognitive Level: Apply (application) REF: 28
    OBJ: Special Questions: Prioritization TOP: Nursing Process: Planning
    MSC: NCLEX: Health Promotion and Maintenance

15. A Hispanic patient complains of abdominal cramping caused by *empacho.* Which action should the nurse take **first**?
    a. Ask the patient what treatments are likely to help.
    b. Massage the patient's abdomen until the pain is gone.
    c. Administer prescribed medications to decrease the cramping.
    d. Offer to contact a curandero(a) to make a visit to the patient.

    ANS: A
    Further assessment of the patient's cultural beliefs is appropriate before implementing any interventions for a culture-bound syndrome such as *empacho.* Although medication, a visit by a *curandero(a),* or massage may be helpful, more information about the patient's beliefs is needed to determine which intervention(s) will be most helpful.

    DIF: Cognitive Level: Apply (application) REF: 29
    OBJ: Special Questions: Prioritization TOP: Nursing Process: Assessment
    MSC: NCLEX: Psychosocial Integrity

16. The nurse performs a cultural assessment with a patient from a different culture. Which action by the nurse should be taken **first**?
    a. Request an interpreter before interviewing the patient.
    b. Wait until a family member is available to help with the assessment.
    c. Ask the patient about any affiliation with a particular cultural group.
    d. Tell the patient what the nurse already knows about the patient's culture.

    ANS: C

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An early step in performing a cultural assessment is to determine whether the patient feels an affiliation with any cultural group. The other actions may be appropriate if the patient does identify with a particular culture.

DIF: Cognitive Level: Apply (application) REF: 30
OBJ: Special Questions: Prioritization TOP: Nursing Process: Assessment
MSC: NCLEX: Psychosocial Integrity

17. The nurse working in a clinic in a primarily African American community notes a higher incidence of uncontrolled hypertension in the patients. To correct this health disparity, which action should the nurse take **first**?
    a. Initiate a regular home-visit program by nurses working at the clinic.
    b. Schedule teaching sessions about low-salt diets at community events.
    c. Assess the perceptions of community members about the care at the clinic.
    d. Obtain low-cost antihypertensive drugs using funding from government grants.

    ANS: C
    Before other actions are taken, additional assessment data are needed to determine the reason for the disparity. The other actions also may be appropriate, but additional assessment is needed before the next action is selected.

    DIF: Cognitive Level: Apply (application) REF: 29
    OBJ: Special Questions: Prioritization TOP: Nursing Process: Assessment
    MSC: NCLEX: Health Promotion and Maintenance

MULTIPLE RESPONSE

1. The nurse is performing an admission assessment for a non–English-speaking patient who is from China. Which actions could the nurse take to enhance communication (*select all that apply*)?
    a. Use an electronic translation application.
    b. Use a telephone-based medical interpreter.
    c. Wait until an agency interpreter is available.
    d. Ask the patient's teenage daughter to interpret.
    e. Use exaggerated gestures to convey information.

    ANS: A, B, C
    Electronic translation applications, telephone-based interpreters, and agency interpreters are all appropriate to use to communicate with non–English-speaking patients. When no interpreter is available, family members may be considered, but some information that will be needed in an admission assessment may be misunderstood or not shared if a child is used as the interpreter. Gestures are appropriate to use, but exaggeration of the gestures is not needed.

    DIF: Cognitive Level: Apply (application) REF: 31
    TOP: Nursing Process: Assessment MSC: NCLEX: Psychosocial Integrity

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