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MULTIPLE CHOICE

1. When a nurse becomes involved in a legal action, the first step to occur is that a document is filed in an appropriate court. What is this document called?
   a. Deposition
   b. Appeal
   c. Complaint
   d. Summons

   ANS: C
   A document called a complaint is filed in an appropriate court as the first step in litigation. A deposition is when witnesses are required to undergo questioning by the attorneys. An appeal is a request for a review of a decision by a higher court. A summons is a court order that notifies the defendant of the legal action.

   DIF: Cognitive Level: Knowledge REF: 24 OBJ: 1
   TOP: Legal KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

2. The nurse caring for a patient in the acute care setting assumes responsibility for a patient's care. What is this legally binding situation?
   a. Nurse-patient relationship
   b. Accountability
   c. Advocacy
   d. Standard of care

   ANS: A
   When the nurse assumes responsibility for a patient's care, the nurse-patient relationship is formed. This is a legally binding "contract" for which the nurse must take responsibility. Accountability is being responsible for one's own actions. An advocate is one who defends or pleads a cause or issue on behalf of another. Standards of care define acts whose performance is required, permitted, or prohibited.

   DIF: Cognitive Level: Comprehension REF: 24 OBJ: 3
   TOP: Legal KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

3. What are the universal guidelines that define appropriate measures for all nursing interventions?
   a. Scope of practice
   b. Advocacy
   c. Standard of care
   d. Prudent practice

   ANS: C

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Standards of care define actions that are permitted or prohibited in most nursing interventions. These standards are accepted as legal guidelines for appropriateness of performance. The laws that formally define and limit the scope of nursing practice are called nurse practice acts. An advocate is one who defends or pleads a cause or issue on behalf of another. Prudent is a term that refers to careful and/or wise practice.

DIF: Cognitive Level: Knowledge REF: 22 OBJ: 4
TOP: Legal KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

4. An LPN/LVN is asked by the RN to administer an IV chemotherapeutic agent to a patient in the acute care setting. What law should this nurse refer to before initiating this intervention?
   a. Standards of care
   b. Regulation of practice
   c. American Nurses' Association Code
   d. Nurse practice act

   ANS: D
   It is the nurse's responsibility to know the nurse practice act in his or her state. Standards of care, regulation of practice, and the American Nurses' code are not laws that the nurse should refer to before initiating this treatment.

   DIF: Cognitive Level: Application REF: 26 OBJ: 5
   TOP: Legal KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

5. A nurse fails to irrigate a feeding tube as ordered, resulting in harm to the patient. This nurse could be found guilty of:
   a. malpractice.
   b. harm to the patient.
   c. negligence.
   d. failure to follow the nurse practice act.

   ANS: A
   The nurse can be held liable for malpractice for acts of omission. Failure to meet a legal duty, thus causing harm to another, is malpractice. The nurse practice act has general guidelines that can support the charge of malpractice.

   DIF: Cognitive Level: Application REF: 24 OBJ: 2
   TOP: Legal KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

6. Patients have expectations regarding the health care services they receive. To protect these expectations, which of the following has become law?
   a. American Hospital Association's Patient's Bill of Rights
   b. Self-Determination Act
   c. American Hospital Association's Standards of Care
   d. The Joint Commission's rights and responsibilities of patients

   ANS: A

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Patients have expectations regarding the health care services they receive. In 1972, the American Hospital Association (AHA) developed the Patient's Bill of Rights. The Self-Determination Act, American Hospital Association's Standards of Care, and The Joint Commission's rights and responsibilities do not address patients' expectations regarding health care.

DIF: Cognitive Level: Comprehension REF: 27 OBJ: 3 | 4
TOP: Legal KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

7. The nurse is preparing the patient for a thoracentesis. What must be completed before the procedure may be performed?
   a. Physical assessment
   b. Interview
   c. Informed consent
   d. Surgical checklist

   ANS: C
   The doctrine of informed consent refers to full disclosure of the facts the patient needs to make an intelligent (informed) decision before any invasive treatment or procedure is performed. A physical assessment, interview, and surgical checklist are not required before this procedure.

   DIF: Cognitive Level: Application REF: 27 OBJ: 8
   TOP: Legal KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

8. When a nurse protects the information in a patient's record, what ethical responsibility is the nurse fulfilling?
   a. Privacy
   b. Disclosure
   c. Confidentiality
   d. Absolute secrecy

   ANS: C
   The nurse has an ethical and legal duty to protect information about a patient and preserve confidentiality. Some disclosures are legal and anticipated, and may not be subject to the rules of confidentiality. None of the information in a chart is considered secret.

   DIF: Cognitive Level: Comprehension REF: 29-30 OBJ: 9
   TOP: Confidentiality KEY: Nursing Process Step: N/A
   MSC: NCLEX: N/A

9. An older adult is admitted to the hospital with numerous bodily bruises, and the nurse suspects elder abuse. What is the best nursing action?
   a. Cover the bruises with bandages.
   b. Take photographs of the bruises.
   c. Ask the patient if anyone has hit her.
   d. Report the bruises to the charge nurse.

   ANS: D

The law stipulates that the health care professional is required to report certain information to the appropriate authorities. The report should be given to a supervisor or directly to the police, according to agency policy. When acting in good faith to report mandated information (e.g., certain communicable diseases or gunshot wounds), the health care professional is protected from liability.

DIF: Cognitive Level: Application REF: 31 OBJ: 9
TOP: Elder abuse KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

10. What is the best way for a nurse to avoid a lawsuit?
    a. Carry malpractice insurance.
    b. Spend time with the patient.
    c. Provide compassionate, competent care.
    d. Answer all call lights quickly.

    ANS: C
    The best defense against a lawsuit is to provide compassionate and competent nursing care. Carrying malpractice insurance is prudent, but it will not avoid a lawsuit. Spending time with patients and answering call lights quickly will not necessarily help avoid a lawsuit.

    DIF: Cognitive Level: Comprehension REF: 29 OBJ: 8
    TOP: Avoiding a lawsuit KEY: Nursing Process Step: N/A
    MSC: NCLEX: N/A

11. The nurse is caring for a patient with a do-not-resuscitate (DNR) order. Although the nurse may disagree with this order, what is his or her legal obligation?
    a. To question the health care provider
    b. To seek advice from the family
    c. To discuss it with the patient
    d. To follow the order

    ANS: D
    When a DNR order is written in the chart, the nurse has a duty to follow the order. Questioning the health care provider, seeking advice from the family, and discussing it with the patient are not legal obligations of the nurse.

    DIF: Cognitive Level: Application REF: 37 OBJ: 10 | 14
    TOP: Legal KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

12. The nurse has strong moral convictions that abortions are wrong. When assigned to assist with an abortion, what is the most appropriate action for the nurse to take?
    a. Ask for another assignment.
    b. Leave work.
    c. Transfer to another floor.
    d. Protest to the supervisor.

    ANS: A
    The nurse should not abandon the patient, but ask for another assignment.

    DIF: Cognitive Level: Application REF: 37 OBJ: 9 | 16

TOP: Ethics KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

13. The new LPN/LVN is concerned regarding what should or should not be done for patients. What resource will best provide this information?
    a. Nurse practice act
    b. Standards of care
    c. Scope of nursing practice
    d. Professional organizations

    ANS: B
    Standards of care define what should or should not be done for patients. The nurse practice act, scope of nursing practice, and professional organizations do not provide the best information as to what should or should not be done for patients.

    DIF: Cognitive Level: Comprehension REF: 24 OBJ: 5
    TOP: Standards of care KEY: Nursing Process Step: N/A
    MSC: NCLEX: N/A

14. What role is the nurse who diligently works for the protection of patients' interests playing?
    a. Caregiver
    b. Health care administrator
    c. Advocate
    d. Health care evaluator

    ANS: C
    A nurse accepts the role of advocate when, in addition to general care, the nurse protects the patient's interests. Caregiver, health care administrator, and health care evaluator are not terms for the nurse who diligently works for the protection of patients.

    DIF: Cognitive Level: Comprehension REF: 25 OBJ: 9 | 12
    TOP: Advocate KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

15. When asked to perform a procedure that the nurse has never done before, what should the nurse do to legally protect himself or herself?
    a. Go ahead and do it.
    b. Refuse to perform it, citing lack of knowledge.
    c. Discuss it with the charge nurse, asking for direction.
    d. Ask another nurse who has performed the procedure.

    ANS: C
    The nurse cannot use ignorance as an excuse for nonperformance. The nurse should ask for direction from the charge nurse, explaining she has never performed the procedure independently.

    DIF: Cognitive Level: Application REF: 26 OBJ: 8
    TOP: Legal KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

16. The nurse is assisting a patient to clarify values by encouraging the expression of feelings and thoughts related to the situation. What is the most appropriate action for the nurse?
    a. Compare values with those of the patient.

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b. Make a judgment.
c. Withhold an opinion.
d. Give advice.

ANS: C
The nurse can assist the patient in values clarification without giving an opinion.

DIF: Cognitive Level: Application REF: 35 OBJ: 3 | 8
TOP: Values clarification KEY: Nursing Process Step: N/A
MSC: NCLEX: N/A

17. What fundamental principle must the nurse first observe when confronted with an ethical decision?
a. Autonomy
b. Beneficence
c. Respect for people
d. Nonmaleficence

ANS: C
The first fundamental principle is respect for people. Autonomy, beneficence, and nonmaleficence are not the first fundamental principles to observe when confronted with an ethical decision.

DIF: Cognitive Level: Comprehension REF: 36 OBJ: 13 | 15
TOP: Ethics KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

18. A nurse working on an acute care medical surgical unit is aware that his or her first duty is to the patient's health, safety, and well-being. Given this knowledge, which of the following is most necessary for the nurse to report?
a. Unethical behavior of other staff members
b. A worker who arrives late
c. Favoritism shown by nursing administration
d. Arguments among the staff

ANS: A
A member of the nursing profession must report behavior that does not meet established standards. Unethical behavior involves failing to perform the duties of a competent caring nurse.

DIF: Cognitive Level: Application REF: 36 OBJ: 13
TOP: Unethical behavior KEY: Nursing Process Step: N/A
MSC: NCLEX: N/A

19. A nurse is considering purchasing malpractice insurance. What should the nurse be aware of regarding malpractice insurance provided by the hospital?
a. Only offers protection while on duty.
b. Is limited in the amount of coverage.
c. Is difficult to renew.
d. Can be terminated at any time.

ANS: A

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Most institutional insurance only provides liability coverage if the nurse is on duty at that facility.

DIF: Cognitive Level: Comprehension REF: 32 OBJ: 2
TOP: Malpractice insurance KEY: Nursing Process Step: N/A
MSC: NCLEX: N/A

20. Which is a nursing care error that violates the Health Insurance Portability and Accountability Act (HIPAA)?
    a. Administering a stronger dose of drug than was ordered
    b. Refusing to give a patient's daughter information over the phone
    c. Informing the patient's medical power of attorney of a medication change
    d. Leaving a copy of the patient's history and physical in the photocopier

    ANS: D
    Leaving the document in the photocopier could expose it to the public. Inappropriate drug administration is possible malpractice. Sharing information with the power of attorney is legal. Refusing to give a patient's daughter information over the phone is appropriate practice.

    DIF: Cognitive Level: Comprehension REF: 27 OBJ: 7
    TOP: Health Insurance Portability and Accountability Act (HIPAA)
    KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

21. Which of the following could cause a nurse to be cited for malpractice?
    a. Refusing to give 60 mg of morphine as ordered
    b. Giving prochlorperazine (Compazine) to a patient allergic to phenothiazines
    c. Dragging an injured motorist off the highway and causing further injury
    d. Informing a visitor about a patient's condition

    ANS: B
    Standards of care dictate that a nurse must be aware of all the properties of drugs administered. Prochlorperazine (Compazine) is a phenothiazine. Providing confidential information or refusing to give an excessively large narcotic dose is not considered malpractice. Good Samaritan laws generally protect a person giving aid to an injured motorist.

    DIF: Cognitive Level: Application REF: 26 OBJ: 2
    TOP: Malpractice KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

22. A lumbar puncture was performed on a patient without a signed informed consent form. This patient might sue for:
    a. punitive damages.
    b. civil battery.
    c. assault.
    d. nothing; no violation has occurred.

    ANS: B

Civil battery charges can be brought against someone performing an invasive procedure without the patient's informed consent legally documented. This patient could not sue for punitive damages or an assault.

DIF: Cognitive Level: Comprehension REF: 27 OBJ: 6 | 8
TOP: Informed consent KEY: Nursing Process Step: N/A
MSC: NCLEX: N/A

23. A health care provider instructs the nurse to bladder train a patient. The nurse clamps the patient's indwelling urinary catheter but forgets to unclamp it. The patient develops a urinary tract infection. What do the nurse's actions exemplify?
    a. Malpractice
    b. Battery
    c. Assault
    d. Neglect of duty

    ANS: A
    A nurse is liable for acts of commission (doing an act) and omission (not doing an act) performed in the course of their professional duty. A charge of malpractice is likely when a duty exists, there is a breach of that duty, and harm has occurred to the patient.

    DIF: Cognitive Level: Application REF: 25 OBJ: 2
    TOP: Malpractice KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

24. What is true about nurse practice acts?
    a. They informally define the scope of nursing practice.
    b. They provide for unlimited scope of nursing practice.
    c. Only some states have adopted a nurse practice act.
    d. The nurse must know the nurse practice act within his or her state.

    ANS: D
    The laws formally defining and limiting the scope of nursing practice are called nurse practice acts. All state, provincial, and territorial legislatures in the United States and Canada have adopted nurse practice acts, although the specifics they contain often vary. It is the nurse's responsibility to know the nurse practice act that is in effect for her geographic region.

    DIF: Cognitive Level: Comprehension REF: 26
    TOP: Nurse practice acts KEY: Nursing Process Step: N/A
    MSC: NCLEX: N/A

MULTIPLE RESPONSE

1. How can the medical record be used in litigation? (*Select all that apply.*)
    a. Public record
    b. Proof of adherence to standards
    c. Evidence of omission of care
    d. Documentation of time lapses
    e. Evidence by only the plaintiff

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ANS: A, B, C, D
The information when used in court becomes a public record. The information can be used as proof of adherence to standards, omission of care, and documentation of time lapses. Both plaintiff and defendant can use the document.

DIF: Cognitive Level: Comprehension REF: 24 OBJ: 1 | 4
TOP: Legal properties of medical record KEY: Nursing Process Step: N/A
MSC: NCLEX: N/A

2. During a lunch break, an emergency department (ED) nurse truthfully tells another nurse about the condition of a patient who came to the ED last night. What is the ED nurse guilty of? (*Select all that apply.*)
   a. HIPAA violation
   b. Slander
   c. Libel
   d. Invasion of privacy
   e. Defamation

   ANS: A, D
   The disclosure is an invasion of privacy and a violation of HIPAA. Because the information is true and verbal, it cannot be considered slander or libel.

   DIF: Cognitive Level: Application REF: 30 OBJ: 7
   TOP: Disclosure of information KEY: Nursing Process Step: N/A
   MSC: NCLEX: N/A

3. A nurse failed to monitor a patient's respiratory status after medicating the patient with a narcotic analgesic. The patient's respiratory status worsened, requiring intubation. The patient's family claimed the nurse committed malpractice. What must be present for the nurse to be held liable? (*Select all that apply.*)
   a. A nurse-patient relationship exists.
   b. The nurse failed to perform in a reasonable manner.
   c. There was harm to the patient.
   d. The nurse was prudent in her performance.
   e. The nurse did not cause the patient harm.
   f. Duty does not exist.

   ANS: A, B, C
   For the court to uphold the charge of malpractice, and to find the nurse liable, the following elements must be present: duty exists, there is a breach of duty, and harm must have occurred.

   DIF: Cognitive Level: Application REF: 24 OBJ: 2
   TOP: Malpractice KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

COMPLETION

1. Personal beliefs about the worth of an object, idea, custom, or attitude that influence a person's behavior in a given situation are referred to as _____.

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ANS:
values

Values are personal beliefs about the worth of an object, an idea, a custom, or an attitude. Values vary among people and cultures; they develop over time and undergo change in response to changing circumstances and necessity. Each of us adopts a value system that will govern what we feel is right or wrong (or good and bad) and will influence our behavior in a given situation.

DIF: Cognitive Level: Knowledge REF: 34 OBJ: 11 | 12
TOP: Values KEY: Nursing Process Step: N/A MSC: NCLEX: N/A

2. Acts whose performance is required, permitted, or prohibited are defined by _____ of care.

ANS:
standards
Standards of care define acts whose performance is required, permitted, or prohibited.

DIF: Cognitive Level: Knowledge REF: 26 OBJ: 4
TOP: Standards of care KEY: Nursing Process Step: N/A
MSC: NCLEX: N/A