Lewis's Medical-Surgical Nursing 12th edition Harding Test Bank

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Chapter 02: Social Determinants of Health
Harding: Lewis's Medical-Surgical Nursing, 12th Edition

MULTIPLE CHOICE

1. Which data from the patient's health history would be the nurse's focus for patient teaching?
   a. Family history
   b. Age and gender
   c. Dietary fat intake
   d. Race and ethnicity

   ANS: C
   Behaviors are strongly linked to many health care problems. The patient's 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 for behavior change.

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

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

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   ANS: C
   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) TOP: Nursing Process: Planning
   MSC: NCLEX: Health Promotion and Maintenance

3. Which information would the nurse collect as a measure of community health?
   a. Air pollution levels
   b. Number of healthy 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)
   TOP: Nursing Process: Assessment MSC: NCLEX: Health Promotion and Maintenance

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4. The nurse is caring for a patient who has traditional Native American beliefs about health and illness. Which action by the nurse would demonstrate cultural competence?
   a. Explain the hospital schedule for meal times, care, and family visits.
   b. Ask the patient whether it is important that a cultural healer is contacted.
   c. Avoid asking health questions unless the patient initiates the conversation.
   d. Obtain 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 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 first 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)
   TOP: Nursing Process: Implementation MSC: NCLEX: Psychosocial Integrity

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

   ANS: C
   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)
   TOP: Nursing Process: Implementation MSC: NCLEX: Psychosocial Integrity

6. The nurse is caring for a patient who speaks a different language. If an interpreter or interpretation phone service is not available, which action would the nurse take?
   a. Talk slowly so that each word is clearly heard.
   b. Use gestures or pictures to demonstrate meaning.
   c. Speak loudly in close proximity to the patient's ears.
   d. Repeat important words so that the patient will recognize them.

   ANS: B
   The use of gestures or pictures 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)
   TOP: Nursing Process: Implementation MSC: NCLEX: Psychosocial Integrity

7. Which action would the nurse include in the plan of care for a hospitalized patient who uses culturally based treatments?
   a. Encourage the use of additional diagnostic procedures.
   b. Teach the patient that folk remedies will interfere with prescribed orders.

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c. Ask the patient to discontinue the cultural treatments during hospitalization.
d. Coordinate the use of requested treatments with prescribed medical therapies.

ANS: D
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 when 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) TOP: Nursing Process: Planning
MSC: NCLEX: Psychosocial Integrity

8. The nurse is caring for a newly admitted patient. Which intervention is considered appropriate across most cultures?
a. Maintain a personal space of at least 2 ft when assessing the patient.
b. Insist that family members provide most of the patient's personal care.
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 most cultural groups or for most individual patients. Ethnicity may not be the most important factor in planning care, especially if the patient has urgent physiologic problems.

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DIF: Cognitive Level: Understand (Comprehension)
TOP: Nursing Process: Implementation MSC: NCLEX: Psychosocial Integrity

9. A staff nurse expresses frustration that a patient who is Native American always has several family members at the bedside. Which action would the charge nurse take?
a. Request that family members leave until a different nurse can be assigned.
b. Ask about the nurse's beliefs regarding family support during hospitalization.
c. Have the nurse explain to the family that too many visitors will tire the patient.
d. Suggest that the nurse ask family members to leave the room during patient care.

ANS: B
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. Asking family members to leave the room or explaining that too many visitors will tire the patient are not culturally appropriate for this patient.

DIF: Cognitive Level: Apply (Application)
TOP: Nursing Process: Implementation MSC: NCLEX: Psychosocial Integrity

10. An older patient who is Asian American 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 **initial** action would the nurse take?
a. Include a shaman when planning the patient's care.
b. Avoid direct eye contact with the patient during care.

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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) TOP: Nursing Process: Planning
MSC: NCLEX: Psychosocial Integrity

11. The nurse plans health care for a community with a large number of recent immigrants from Vietnam. Which intervention would the nurse plan 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: Analyze (Analysis) TOP: Nursing Process: Planning
MSC: NCLEX: Physiological Integrity

12. During an admission assessment, the nurse notices that the patient pauses before answering each question about the health history. Which action would the nurse take?
a. Wait for the patient to answer the questions.
b. Give the patient an assessment form and a pen.
c. Interview a family member instead of the patient.
d. Remind the patient that other patients also need care.

ANS: A
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. Interviewing family members, shaming the patient by referring to the needs of other patients or handing the patient a form indicate that the nurse does not have time for the patient.

DIF: Cognitive Level: Apply (Application)
TOP: Nursing Process: Assessment MSC: NCLEX: Psychosocial Integrity

13. Which strategy would the nurse **prioritize** when planning care for a patient with diabetes who is uninsured?
a. Obtain the least 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

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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: Analyze (Analysis) TOP: Nursing Process: Planning
MSC: NCLEX: Health Promotion and Maintenance

14. The nurse performs a cultural assessment with a patient from a different culture. Which action would the nurse take **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
    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 or speak another language.

    DIF: Cognitive Level: Apply (Application)
    TOP: Nursing Process: Assessment MSC: NCLEX: Psychosocial Integrity

15. The nurse working in a clinic in a primarily black community notes a higher incidence of uncontrolled hypertension in the patients. To address this health disparity and promote health equity, which action would 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)
    TOP: Nursing Process: Assessment MSC: NCLEX: Health Promotion and Maintenance

MULTIPLE RESPONSE

1. The nurse is performing an admission assessment for a patient from China who does not speak English. Which actions by the nurse would enhance communication? (*Select all that apply.*)
    a. Ask the patient's young child to interpret.
    b. Use a telephone-based medical interpreter.
    c. Wait until an agency interpreter is available.
    d. Use exaggerated gestures to convey information.
    e. Use an electronic translation software application.

    ANS: B, C, E

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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 for some information, but exaggeration of the gestures is not needed.

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