Ackley and Ladwig's Nursing Diagnosis Handbook 13th edition Makic Test Bank

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Chronic Pain

Q1: A nurse is interviewing a client with chronic pain who does not take any analgesics but rather "pushes through it." What question or statement by the nurse would be most helpful?

A. "Tell me about any concerns you have regarding treatment for pain." (Correct)

B. "Why won't you take anything for your pain? Are you afraid of addiction?"

C. "Pushing through the pain will eventually just make the pain worse."

D. "Aren't you afraid you are damaging something by not treating your pain?"

Rationale: The nurse should conduct a full pain assessment, including any past experiences with pain management and concerns about treatment. The nurse can address these as they come up. "Why" questions are not therapeutic as they tend to put people on the defensive and are probing. Not treating pain may or may not make the problem worse. Asking if the client is afraid of further damage is a yes/no question and is also not therapeutic. DIF: Cognitive Level: Applying/Application TOP: Nursing Process: Assessment MSC: Psychosocial Integrity

Q2: A client is given a new prescription for opioid pain medication to treat chronic pain and is also given prescriptions for a stool softener and stimulant laxative. The client only wants to fill the pain medication prescription. What response by the nurse is best?

A. "Well wait and see if you have constipation, then fill them if you do."

B. "People on opioid medications have to take medications for their bowels."

C. "You don't have to fill any of these prescriptions if you don't want to."

D. "Constipation is a side effect of opioids that does not seem to improve over time." (Correct)

Rationale: Opioids have many side effects, including constipation. Most opioid-related side effects wane over time, but people do not develop tolerance for constipation, so it needs a proactive treatment. Telling the client to wait and see is not being proactive; the client will only fill the prescriptions after the problem has started. Stating that none of the prescriptions need to be filled is being passive-aggressive. Clients do not have to take any medications, but the nurse should educate the client on why they are beneficial. DIF: Cognitive Level: Application/Applying TOP: Integrated Process: Teaching-Learning MSC: Physiological Integrity: Pharmacological and Parenteral Therapies

Q3: A client with a history of chronic pain is experiencing and exacerbation. The patient needs preoperative teaching prior to surgery. What action should the nurse take first?

A. Treat the client's pain. (Correct)

B. Plan the teaching session.

C. Assess the client's learning style.

D. Ask about pain management strategies.

Rationale: Pain can cause cognitive deficits and is a barrier to learning, so the nurse should treat the client's pain prior to attempting to provide preoperative teaching. The other actions are appropriate, but not as the first action. DIF: Cognitive Level: Application/Applying TOP: Integrated

Process: Teaching-Learning MSC: Health Promotion and Maintenance

Q4: An older client with a history of chronic pain is complaining of severe pain after a fall that caused a femur fracture. What medication would the nurse choose for this client?

A. Meperidine
B. Acetaminophen
C. Lorazepam
D. Morphine (Correct)

Rationale: Morphine is an opioid analgesic for moderate to severe pain and in small doses would be appropriate for this client. Meperidine is not recommended for use in older clients. Acetaminophen is for mild to moderate pain only. Lorazepam can be used as an adjunct to analgesia. DIF: Cognitive Level: Analysis/Analyzing TOP: Nursing Process: Implementation MSC: Physiological Integrity: Pharmacological and Parenteral Therapies

Q5: A nurse is caring for a client who has a new prescription for an opioid analgesic for cancer pain. The nurse has taught the mechanism of action, side effects and how to manage them, what to report to the provider, and how to take the medication. What other teaching topic does the nurse include as the priority?

A. Other medications that might be prescribed
B. Fears related to addiction to the medication (Correct)
C. Contact information for the prescribing provider
D. How to titrate the medication based on pain

Rationale: Fears related to opioid addiction are common and usually unfounded. The client who takes opioids for pain does not become addicted, but this fear may cause the client to undertreat the pain. The other topics may be important, but are not the priority. DIF: Cognitive Level: Application/Applying TOP: Integrated Process: Teaching-Learning MSC: Physiological Integrity: Pharmacological and Parenteral Therapies