# *Medical Surgical Nursing 2nd edition Hoffman Test Bank*

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# Davis Advantage for Medical-Surgical Nursing: Making Connections to Practice 2nd edition Hoffman Sullivan Test Bank

## Chapter 1: Foundations for Medical-Surgical Nursing

**Multiple Choice**
*Identify the choice that best completes the statement or answers the question.*

____ 1. The medical-surgical nurse identifies a clinical practice issue and wants to determine if there is sufficient evidence to support a change in practice. Which type of study provides the strongest evidence to support a practice change?
1) Randomized control study
2) Quasi-experimental study
3) Case-control study
4) Cohort study

____ 2. The medical-surgical unit recently implemented a patient-centered care model. Which action implemented by the nurse supports this model?
1) Evaluating care
2) Assessing needs
3) Diagnosing problems
4) Providing compassion

____ 3. Which action should the nurse implement when providing patient care in order to support The Joint Commission's (TJC) National Patient Safety Goals (NPSG)?
1) Silencing a cardiorespiratory monitor
2) Identifying each patient using one source
3) Determining patient safety issues upon admission
4) Decreasing the amount of pain medication administered

____ 4. Which interprofessional role does the nurse often assume when providing patient care in an acute care setting?
1) Social worker
2) Client advocate
3) Care coordinator
4) Massage therapist

____ 5. The medical-surgical nurse wants to determine if a policy change is needed for an identified clinical problem. Which is the first action the nurse should implement?
1) Developing a question
2) Disseminating the findings
3) Conducting a review of the literature
4) Evaluating outcomes of practice change

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____ 6. The nurse is evaluating the level of evidence found during a recent review of the literature. Which evidence carries the lowest level of support for a practice change?
1) Level IV
2) Level V
3) Level VI
4) Level VII

____ 7. The nurse is reviewing evidence from a quasi-experimental research study. Which level of evidence should the nurse identify for this research study?
1) Level I
2) Level II
3) Level III
4) Level IV

____ 8. Which level of evidence should the nurse identify when reviewing evidence from a single descriptive research study?
1) Level IV
2) Level V
3) Level VI
4) Level VII

____ 9. Which statement should the nurse make when communicating the "S" in the SBAR approach for effective communication?
1) "The patient presented to the emergency department at 0200 with lower left abdominal pain."
2) "The patient rated the pain upon admission as a 9 on a 10-point numeric scale."
3) "The patient has no significant issues in the medical history."
4) "The patient was given a prescribed opioid analgesic at 0300."

____ 10. The staff nurse is communicating with the change nurse about the change of status of the patient. The nurse would begin her communication with which statement if correctly using the SBAR format?
1) "The patient's heartrate is 110."
2) "I think this patient needs to be transferred to the critical care unit."
3) "The patient is a 68-year-old male patient admitted last night."
4) "The patient is complaining of chest pain."

____ 11. Which nursing action exemplifies the Quality and Safety Education for Nursing (QSEN) competency of safety?
1) Advocating for a patient who is experiencing pain
2) Considering the patient's culture when planning care
3) Evaluating patient learning style prior to implementing discharge instructions
4) Assessing the right drug prior to administering a prescribed patient medication

____ 12. Which type of nursing is the root of all other nursing practice areas?
1) Pediatric nursing
2) Geriatric nursing
3) Medical-surgical nursing
4) Mental health-psychiatric nursing

____ 13. Which did the Nursing Executive Center of The Advisory Board identify as an academic-practice gap for new graduate nurses?
1) Patient advocacy
2) Patient education

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3) Disease pathophysiology
4) Therapeutic communication

____ 14. Which statement regarding the use of the nursing process in clinical practice is accurate?
1) "The nursing process is closely related to clinical decision-making."
2) "The nursing process is used by all members of the interprofessional team to plan care."
3) "The nursing process has 4 basic steps: assessment, planning, implementation, evaluation."
4) "The nursing process is being replaced by the implementation of evidence-based practice."

____ 15. Which is the basis of nursing care practices and protocols?
1) Assessment
2) Evaluation
3) Diagnosis
4) Research

____ 16. Which is a common theme regarding patient dissatisfaction related to care provided in the hospital setting?
1) Space in hospital rooms
2) Medications received to treat pain
3) Time spent with the health-care team
4) Poor quality food received from dietary

____ 17. The nurse manager is preparing a medical-surgical unit for The Joint Commission (TJC) visit With the nurse manager presenting staff education focusing on TJC benchmarks, which of the following topics would be most appropriate?
1) Implementation of evidence-based practice
2) Implementation of patient-centered care
3) Implementation of medical asepsis practices
4) Implementation of interprofessional care

____ 18. Which aspect of patient-centered care should the nurse manager evaluate prior to The Joint Commission site visit for accreditation?
1) Visitation rights
2) Education level of staff
3) Fall prevention protocol
4) Infection control practices

____ 19. The medical-surgical nurse is providing patient care. Which circumstance would necessitate the nurse verifying the patient's identification using at least two sources?
1) Prior to delivering a meal tray
2) Prior to passive range of motion
3) Prior to medication administration
4) Prior to documenting in the medical record

____ 20. The nurse is providing care to several patients on a medical-surgical unit. Which situation would necessitate the nurse to use SBAR during the hand-off process?
1) Wound care
2) Discharge to home
3) Transfer to radiology
4) Medication education

**Multiple Response**

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*Identify one or more choices that best complete the statement or answer the question.*

____ 21. The staff nurse is teaching a group of student nurses the situations that necessitate hand-off communication. Which student responses indicate the need for further education related to this procedure? *Select all that apply.*
1) "A hand-off is required prior to administering a medication."
2) "A hand-off is required during change of shift."
3) "A hand-off is required for a patient is transferred to the surgical suite."
4) "A hand-off is required whenever the nurse receives a new patient assignment."
5) "A hand-off is required prior to family visitation."

____ 22. Which actions by the nurse enhance patient safety during medication administration? *Select all that apply.*
1) Answering the call bell while transporting medications for a different patient
2) Identifying the patient using two sources prior to administering the medication
3) Holding a medication if the patient's diagnosis does not support its use
4) Administering the medication two hours after the scheduled time
5) Having another nurse verify the prescribed dose of insulin the patient is to receive

____ 23. The medical-surgical nurse assumes care for a patient who is receiving continuous cardiopulmonary monitoring. Which actions by the nurse enhance safety for this patient? *Select all that apply.*
1) Silencing the alarm during family visitation
2) Assessing the alarm parameters at the start of the shift
3) Responding to the alarm in a timely fashion
4) Decreasing the alarm volume to enhance restful sleep
5) Adjusting alarm parameters based on specified practitioner prescription

____ 24. The nurse is planning an interprofessional care conference for a patient who is approaching discharge from the hospital. Which members of the interprofessional team should the nurse invite to attend? *Select all that apply.*
1) Physician
2) Pharmacist
3) Unit secretary
4) Social worker
5) Home care aide

____ 25. The nurse manager wants to designate a member of the nursing team as the care coordinator for a patient who will require significant care during the hospitalization. Which skills should this nurse possess in order to assume this role? *Select all that apply.*
1) Effective clinical reasoning
2) Effective communication skills
3) Effective infection control procedures
4) Effective documentation
5) Effective intravenous skills

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# Chapter 1: Foundations for Medical-Surgical Nursing
# Answer Section

## MULTIPLE CHOICE

1. ANS: 1
Chapter number and title: 1, Foundations for Medical Surgical Practice
Chapter learning objective: Discussing the incorporation of evidence-based practices into medical-surgical nursing
Chapter page reference: 003-004
Heading: Evidence-Based Nursing Care
Integrated Processes: Nursing Process: Planning
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Comprehension [Understanding]
Concept: Evidence-Based Practice
Difficulty: Easy

| | Feedback |
|---|---|
| 1 | Systematic reviews of randomized control studies (Level I) are the highest level of evidence because they include data from selected studies that randomly assigned participants to control and experimental groups. The lower the numerical rating of the level of evidence indicates the highest level of evidence; therefore, this type of study provides the strongest evidence to support a practice change. |
| 2 | Quasi-experimental studies are considered Level III; therefore, this study does not provide the strongest evidence to support a practice change. |
| 3 | Case-control studies are considered Level IV; therefore, this study does not provide the strongest evidence to support a practice change. |
| 4 | Cohort studies are considered Level IV; therefore, this study does not provide the strongest evidence to support a practice change. |

PTS: 1 CON: Evidence-Based Practice

2. ANS: 4
Chapter number and title: 1, Foundations of Medical-Surgical Practice
Chapter learning objective: Explaining the importance of patient-centered care in the management of medical-surgical patients
Chapter page reference: 004-005
Heading: Patient-Centered Care in the Medical-Surgical Setting
Integrated Processes: Caring
Client Need: Psychosocial Integrity
Cognitive level: Application [Applying]
Concept: Nursing Roles
Difficulty: Moderate

| | Feedback |
|---|---|
| 1 | Evaluation is a step in the nursing process; however, this is not an action that supports the patient-centered care model. |
| 2 | Assessment is a step in the nursing process; however, this is not an action that supports the patient-centered care model. |

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| | |
|---|---|
| 3 | Diagnosis is a step in the nursing process; however, this is not an action that supports the patient-centered care model. |
| 4 | Compassion is a competency closely associated with patient-centered care; therefore, this action supports the patient-centered model of care. |

PTS: 1 CON: Nursing Roles

3. ANS: 3
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Discussing implications to medical-surgical nurses of Quality and Safety Education for Nurses (QSEN) competencies
Chapter page reference: 005-006
Heading: Patient Safety Outcomes
Integrated Processes: Nursing Process: Implementation
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Application [Applying]
Concept: Safety
Difficulty: Moderate

| | Feedback |
|---|---|
| 1 | Safely using alarms is a NPSG identified by TJC. Silencing a cardiorespiratory monitor is not nursing action that supports this NPSG. |
| 2 | Patient identification using two separate resources is a NPSG identified by TJC. Identifying a patient using only one source does not support this NPSG. |
| 3 | Identification of patient safety risks is a NPSG identified by the TJC. Determining patient safety issues upon admission supports this NPSG. |
| 4 | Safe use of medication is a NPSG identified by the TJC. Decreasing the amount of pain medication administered does not support this NPSG. |

PTS: 1 CON: Safety

4. ANS: 3
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Describing the role and competencies of medical-surgical nursing
Chapter page reference: 006-007
Heading: Interprofessional Collaboration and Communication
Integrated Processes: Nursing Process: Implementation
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Comprehension [Understanding]
Concept: Nursing Roles
Difficulty: Easy

| | Feedback |
|---|---|
| 1 | The nurse does not often assume the interprofessional role of social worker when providing patient care in an acute care setting. |
| 2 | The nurse does not often assume the interprofessional role of client advocate role when providing patient care in an acute care setting. |
| 3 | The nurse often assumes the interprofessional role of care coordinator when providing patient care in an acute care setting. |
| 4 | The nurse does not often assume the interprofessional role of massage therapist when providing patient care in an acute care setting. |

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PTS: 1 CON: Nursing Roles

5. ANS: 1
Chapter number and title: 1, Foundations of Medical-Surgical Practice
Chapter learning objective: Discussing the incorporation of evidence-based practices into medical-surgical nursing
Chapter page reference: 003
Heading: Box 1.3 Steps of Evidence-Based Practice
Integrated Processes: Nursing Process: Implementation
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Analysis [Analyzing]
Concept: Evidence-Based Practice
Difficulty: Difficult

| | Feedback |
|---|---|
| 1 | The first step of evidence-based practice is to develop a question based on the clinical issue. |
| 2 | The last step of evidence-based practice is to disseminate findings. |
| 3 | The second step of evidence-based practice is to conduct a review of the literature, or current evidence, available. |
| 4 | The fifth step of evidence-based practice is to evaluate the outcomes associated with the practice change. |

PTS: 1 CON: Evidence-Based Practice

6. ANS: 4
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Discussing the incorporation of evidence-based practices into medical-surgical nursing
Chapter page reference: 004
Heading: Box 1.4 Evaluating Levels of Evidence
Integrated Processes: Nursing Process: Planning
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Comprehension [Understanding]
Concept: Evidence-Based Practice
Difficulty: Easy

| | Feedback |
|---|---|
| 1 | The lower the numeric value of the evidence the greater the support for a change in practice. Level IV evidence does not carry the lowest level of support for a practice change. |
| 2 | The lower the numeric value of the evidence the greater the support for a change in practice. Level V evidence does not carry the lowest level of support for a practice change. |
| 3 | The lower the numeric value of the evidence the greater the support for a change in practice. Level VI evidence does not carry the lowest level of support for a practice change. |
| 4 | The lower the numeric value of the evidence the greater the support for a change in practice. Level VII evidence carries the lowest level of support for a practice change. |

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PTS: 1 CON: Evidence-Based Practice

7. ANS: 3
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Discussing the incorporation of evidence-based practices into medical-surgical nursing
Chapter page reference: 004
Heading: Box 1.4 Evaluating Levels of Evidence
Integrated Processes: Nursing Process: Implementation
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Application [Applying]
Concept: Evidence-Based Practice
Difficulty: Moderate

| | Feedback |
|---|---|
| 1 | A systemic review of randomized controlled studies, not a quasi-experimental research study, is identified as Level I. |
| 2 | Evidence from at least one study randomized control study, not a quasi-experimental research study, is identified as Level II. |
| 3 | A quasi-experimental research study is identified as a Level III. |
| 4 | Evidence from case-control or cohort studies, not a quasi-experimental research study, is identified as a Level IV. |

PTS: 1 CON: Evidence-Based Practice

8. ANS: 3
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Discussing the incorporation of evidence-based practices into medical-surgical nursing
Chapter page reference: 004
Heading: Box 1.4 Evaluating Levels of Evidence
Integrated Processes: Nursing Process: Implementation
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Application [Applying]
Concept: Evidence-Based Practice
Difficulty: Moderate

| | Feedback |
|---|---|
| 1 | Evidence from case-control or cohort studies, not a single descriptive research study, is identified as a Level IV. |
| 2 | Evidence from systemic reviews of descriptive or qualitative studies, not a single descriptive research study, is identified as Level V. |
| 3 | Evidence from a single descriptive research study is identified as Level VI. |
| 4 | Evidence from expert individual authorities or committees, not a single descriptive research study, is identified as Level VII. |

PTS: 1 CON: Evidence-Based Practice

9. ANS: 1
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Describing the role of interprofessional collaboration and teamwork in the provision of safe, quality patient care

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Chapter page reference: 005
Heading: Box 1.6 The SBAR Approach for Effective Communication
Integrated Processes: Nursing Process: Implementation
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Application [Applying]
Concept: Communication
Difficulty: Moderate

| | Feedback |
|---|---|
| 1 | The "S" reflects the patient's current situation which is communicated by providing a brief statement of the issue. This statement by the nurse exemplifies the current situation. |
| 2 | The "A" reflects the patient's assessment data. This statement by the nurse exemplifies the patent's assessment data. |
| 3 | The "B" reflects the patient's medical history. This statement by the nurse exemplifies communicating the patient's history related to the current problem. |
| 4 | The "R" reflects specific actions needed to address the situation. This statement by the nurse exemplifies the actions implemented to address current level of pain. |

PTS: 1 CON: Communication

10. ANS: 4
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Describing the role of interprofessional collaboration and teamwork in the provision of safe, quality patient care
Chapter page reference: 005
Heading: Box 1.6 The SBAR Approach for Effective Communication
Integrated Processes: Nursing Process: Planning
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Analysis [Analyzing]
Concept: Communication
Difficulty: Moderate

| | Feedback |
|---|---|
| 1 | This statement is the "A" in the SBAR communication. This is an assessment finding by the staff nurse. |
| 2 | This statement is the "R" in the SBAR communication. This is the recommendation by the staff nurse. |
| 3 | This statement is the "B" in the SBAR communication. This is the background information. |
| 4 | This statement is the "S" in the SBAR communication. This is the situation information. |

PTS: 1 CON: Communication

11. ANS: 4
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Discussing implications to medical-surgical nurses of Quality and Safety Education for Nurses (QSEN) competencies
Chapter page reference: 006
Heading: Box 1.8 Quality and Safety Education for Nursing (QSEN) Competencies

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Integrated Processes: Nursing Process: Implementation
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Application [Applying]
Concept: Safety
Difficulty: Moderate

| | Feedback |
|---|---|
| 1 | Advocating for a patient who is in pain exemplifies the QSEN competency of patient-centered care, not safety. |
| 2 | Considering the patient's cultural background exemplifies the QSEN competency of patient-centered care, not safety. |
| 3 | Evaluating the patient's learning style prior to implementing discharge instructions exemplifies the QSEN competency of patient-centered care, not safety. |
| 4 | Assessing the right drug prior to administering a prescribed medication exemplifies the QSEN competency of safety. |

PTS: 1 CON: Safety

12. ANS: 3
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Describing the role and competencies of medical-surgical nursing
Chapter page reference: 002
Heading: Introduction
Integrated Processes: Nursing Process: Planning
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Knowledge [Remembering]
Concept: Nursing
Difficulty: Easy

| | Feedback |
|---|---|
| 1 | Pediatric nursing is not the root of all nursing practice areas. |
| 2 | Geriatric nursing is not the root of all nursing practice areas. |
| 3 | Medical-surgical nursing is the root of all nursing practice as care provided here can be implemented in all other areas of nursing practice. |
| 4 | Mental health-psychiatric nursing is not the root of all nursing practice areas. |

PTS: 1 CON: Nursing

13. ANS: 3
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Describing the role and competencies of medical-surgical nursing
Chapter page reference: 002-003
Heading: Competencies in Medical-Surgical Nursing
Integrated Processes: Teaching and Learning
Client Need: Physiological Integrity/Physiological Adaptation
Cognitive level: Knowledge [Remembering]
Concept: Critical Thinking
Difficulty: Easy

| | Feedback |
|---|---|
| 1 | Patient advocacy is not identified as an academic-practice gap for new graduate nurses. |

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| | |
|---|---|
| 2 | Patient education is not identified as an academic-practice gap for new graduate nurses. |
| 3 | Knowledge of pathophysiology of patient conditions is identified as an academic-practice gap for new graduate nurses. |
| 4 | Therapeutic communication is not identified as an academic-practice gap for new graduate nurses. |

PTS: 1 CON: Critical Thinking

14. ANS: 1
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice"
Chapter learning objective: Describing the role and competencies of medical-surgical nursing
Chapter page reference: 003
Heading: Competencies Related to the Nursing Process
Integrated Processes: Teaching and Learning
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Comprehension [Understanding]
Concept: Critical Thinking
Difficulty: Easy

| | Feedback |
|---|---|
| 1 | The nursing process is closely related to the nurse's decision-making in the clinical environment. This statement is accurate. |
| 2 | The nursing process is not used by all members of the interprofessional team to plan care. |
| 3 | The nursing process has 5, not 4, basic steps: assessment, diagnosis, planning, implementation, and evaluation. |
| 4 | The nursing process is not being replaced by the implementation of evidence-based practice. |

PTS: 1 CON: Critical Thinking

15. ANS: 4
Chapter number and title: 1, Foundations for Medical-Surgical Nursing Practice
Chapter learning objective: Discussing the incorporation of evidence-based practices into medical-surgical nursing
Chapter page reference: 003-004
Heading: Evidence-Based Nursing Care
Integrated Processes: Teaching and Learning
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Knowledge [Remembering]
Concept: Evidence-Based Practice
Difficulty: Easy

| | Feedback |
|---|---|
| 1 | Assessment is a step in the nursing process; however, this is not the basis for nursing care practices and protocols. |
| 2 | Evaluation is a step in the nursing process; however, this is not the basis for nursing care practices and protocols. |
| 3 | Diagnosis is a step in the nursing process; however, this is not the basis for nursing care practices and protocols. |

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| | |
|---|---|
| 4 | Evidence that is obtained through research is the basis for nursing care practices and protocols. |

PTS: 1 CON: Evidence-Based Practice

16. ANS: 3
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Explaining the importance of patient-centered care in the management of medical-surgical patients
Chapter page reference: 004-005
Heading: Patient-Centered Care in the Medical-Surgical Setting
Integrated Processes: Teaching and Learning
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Knowledge [Remembering]
Concept: Communication
Difficulty: Easy

| | Feedback |
|---|---|
| 1 | Space in each hospital room is not a common theme of patient dissatisfaction. |
| 2 | Medications received for pain management is not a common theme of patient dissatisfaction. |
| 3 | A lack of time with members of the health care team is a common theme of patient dissatisfaction. |
| 4 | Poor food quality is not a common theme of patient dissatisfaction. |

PTS: 1 CON: Communication

17. ANS: 2
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Explaining the importance of patient-centered care in the management of medical-surgical patients
Chapter page reference: 004-005
Heading: Patient-Centered Care in the Medical-Surgical Setting
Integrated Processes: Teaching and Learning
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Application [Applying]
Concept: Quality Improvement
Difficulty: Moderate

| | Feedback |
|---|---|
| 1 | Implementation of evidence-based practice is not the benchmark in which acute care facilities are evaluated against. |
| 2 | Implementation of patient-centered care is the benchmark in which acute care facilities are evaluated against. |
| 3 | Implementation of medical asepsis practices is not the benchmark in which acute care facilities are evaluated against. |
| 4 | Implementation of interprofessional care is not the benchmark in which acute care facilities are evaluated against. |

PTS: 1 CON: Quality Improvement

18. ANS: 1

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Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Explaining the importance of patient-centered care in the management of medical-surgical patients
Chapter page reference: 004-005
Heading: Patient-Centered Care in the Medical-Surgical Setting
Integrated Processes: Nursing Process: Planning
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Application [Applying]
Concept: Quality Improvement
Difficulty: Moderate

| | Feedback |
|---|---|
| 1 | Visitation rights should be evaluated prior to a TJC accreditation site visit as this aspect of patient-centered care is incorporated into the site evaluation. |
| 2 | The education level of staff is not evaluated prior to a TJC accreditation visit. This information should be evaluated for a hospital that is attempting to earn Magnet status. |
| 3 | While the fall prevention program will be reviewed during a TJC accreditation site visit this is not an aspect of patient-centered care. |
| 4 | While infection control practices will be reviewed during a TJC accreditation site visit this is not an aspect of patient-centered care. |

PTS: 1 CON: Quality Improvement

19. ANS: 3
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Discussing implications to medical-surgical nurses of Quality and Safety Education for Nurses (QSEN) competencies
Chapter page reference: 005-006
Heading: Patient Safety Outcomes
Integrated Processes: Nursing Process: Planning
Client Need: Safe and Effective Care Environment/Safety and Infection Control
Cognitive level: Application [Applying]
Concept: Safety
Difficulty: Moderate

| | Feedback |
|---|---|
| 1 | While the nurse should take care to deliver the meal tray to the correct patient this circumstance does not require verification of patient identity through two sources. |
| 2 | While the nurse should take care to implement passive range of motion on the correct patient this circumstance does not require verification of patient identity through two sources. |
| 3 | The nurse should identify a patient using two sources prior to medication administration. |
| 4 | While the nurse should take care to document patient care in the correct medical record this circumstance does not require verification of patient identity through two sources. |

PTS: 1 CON: Safety

20. ANS: 3
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice

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Chapter learning objective: Describing the role of interprofessional collaboration and teamwork in the provision of safe, quality patient care
Chapter page reference: 005-006
Heading: Patient Safety Outcomes
Integrated Processes: Nursing Process: Implementation
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Application [Applying]
Concept: Communication, Safety
Difficulty: Moderate

| | Feedback |
|---|---|
| **1** | Effective staff communication is essential to safe patient care, especially during hand-offs. Implementation of wound care is not an example of a hand-off situation. |
| **2** | Effective staff communication is essential to safe patient care, especially during hand-offs. Discharge to home is not an example of a hand-off situation. |
| **3** | Effective staff communication is essential to safe patient care, especially during hand-offs. Patient transfer to another unit of the hospital necessitate a change in who is responsible for direct patient care; therefore, this situation would necessitate the need for SBAR during the hand-off process. |
| **4** | Effective staff communication is essential to safe patient care, especially during hand-offs. Medication education is not an example of a hand-off situation. |

PTS: 1 CON: Communication | Safety

**MULTIPLE RESPONSE**

21. ANS: 2, 3, 4
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Describing the role of interprofessional collaboration and teamwork in the provision of safe, quality patient care
Chapter page reference: 005-006
Heading: Patient Safety Outcomes
Integrated Processes: Teaching and Learning
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Analysis [Analyzing]
Concept: Communication
Difficulty: Difficult

| | Feedback |
|---|---|
| 1. | This is incorrect. Hand-off communication is not required prior to the administration of medication. The nurse would, however, verify the patient's identity using two sources. |
| 2. | This is correct. Hand-off communication is required when patient care is transferred from one provider to another, such as during the change of shift. |
| 3. | This is correct. Hand-off communication is required when patient care is transferred from one provider to another, such as when a patient is transferred to the surgical suite. |
| 4. | This is correct. Hand-off communication is required when patient care is transferred from one provider to another, such as anytime the nurse receives a new patient assignment. |
| 5. | This is incorrect. Hand-off communication is not required prior to family visitation. |

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PTS: 1 CON: Communication

22. ANS: 2, 3, 5
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Discussing implications to medical-surgical nurses of Quality and Safety Education for Nurses (QSEN) competencies
Chapter page reference: 005-006
Heading: Patient Safety Outcomes
Integrated Processes: Nursing Process: Implementation
Client Need: Safe and Effective Care Environment/Safety and Infection Control
Cognitive level: Application [Applying]
Concept: Safety
Difficulty: Moderate

| | Feedback |
|---|---|
| 1. | This is incorrect. Interruptions should be minimized during the medication administration process; therefore, the nurse should not answer the call bell for another patient while transporting medications for administration. |
| 2. | This is correct. Verification of the right patient is one of the rights of medication administration; therefore, the nurse would identify the patient using two sources prior to the administration of medication. |
| 3. | This is correct. The nurse should ensure that the rationale for all medications are associated with the patient condition; therefore, this action enhances patient safety during medication administration. |
| 4. | This is incorrect. One of the rights of medication administration is the right time, which correlates to 30 minutes before or 30 minutes after the scheduled time. This nursing action would not enhance patient safety during medication administration. |
| 5. | This is correct. Verifying the dose of a high-risk medication, such as insulin, enhances patient safety during medication administration. |

PTS: 1 CON: Safety

23. ANS: 2, 3, 5
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Discussing implications to medical-surgical nurses of Quality and Safety Education for Nurses (QSEN) competencies
Chapter page reference: 005-006
Heading: Patient Safety Outcomes
Integrated Processes: Nursing Process: Implementation
Client Need: Safe and Effective Care Environment/Safety and Infection Control
Cognitive level: Analysis [Analyzing]
Concept: Safety
Difficulty: Difficult

| | Feedback |
|---|---|
| 1. | This is incorrect. Monitor alarms should be audible even during family visitation. Inaudible alarms may impede patient safety. |
| 2. | This is correct. The nurse should assess the alarm parameters, comparing to the prescribed settings, at the start of each shift. This action enhanced patient safety. |

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| | |
|---|---|
| 3. | This is correct. The nurse should respond to all alarms in a timely fashion, which enhances patient safety. |
| 4. | This is incorrect. Monitor alarms should be audible at all times, even when the patient is asleep to enhance patient safety. |
| 5. | This is correct. The nurse should adjust alarm parameters based on specific practitioner prescriptions. This action enhances safety. |

PTS: 1 CON: Safety

24. ANS: 1, 2, 4
Chapter number and title: 1, Foundations of Medical-Surgical Nursing Practice
Chapter learning objective: Describing the role of interprofessional collaboration and teamwork in the provision of safe, quality patient care
Chapter page reference: 006-007
Heading: Interprofessional Collaboration and Communication
Integrated Processes: Nursing Process: Planning
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Application [Applying]
Concept: Collaboration
Difficulty: Moderate

| | Feedback |
|---|---|
| 1. | This is correct. The physician is a member of the interprofessional team and should be invited to participate in the care conference. |
| 2. | This is correct. The pharmacist is a member of the interprofessional team and should be invited to participate in the care conference. |
| 3. | This is incorrect. The unit secretary is not a member of the interprofssional team; therefore, would not require an invitation to attend the care conference. |
| 4. | This is correct. The social worker is a member of the interprofessional team; therefore, should be invited to participate in the care conference. |
| 5. | This is incorrect. The home care aide, while a member of the interprofessional team, would not benefit from attending a care conference while the patient is hospitalized. |

PTS: 1 CON: Collaboration

25. ANS: 1, 2, 4
Chapter number and title: 1, Foundation of Medical-Surgical Nursing Practice
Chapter learning objective: Describing the role of interprofessional collaboration and teamwork in the provision of safe, quality patient care
Chapter page reference: 006-007
Heading: Interprofessional Collaboration and Communication
Integrated Processes: Nursing Process: Planning
Client Need: Safe and Effective Care Environment/Management of Care
Cognitive level: Analysis [Analyzing]
Concept: Collaboration
Difficulty: Difficult

| | Feedback |
|---|---|
| 1. | This is correct. Effective clinical reasoning is a skill required for the nurse to assume the role of care coordinator. |

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