Advanced Assessment 6th edition Goolsby Test Bank

SKU: 9781719652643-TEST-BANK

Chapter 1. Clinical Decision Making: Assessment and Differential Diagnosis

MULTIPLE CHOICE

1. Which type of clinical decision making is most reliable?
   A. Analytical I
   B. Augenblink
   C. Experiential
   D. Intuitive

ANS: A
Croskerry (2013) describes two major types of clinical diagnostic decision making: intuitive and analytical. Intuitive decision making (similar to Augenblink decision making) is based on the experience and intuition of the clinician and is less reliable and paired with fairly common errors. In contrast, analytical decision making is based on careful consideration and has greater reliability with rare errors.

PTS: 1

2. You are using the PQRST approach while completing the history of present illness for a patient complaining of pain. Which of the following questions is relevant to the "P" portion of this approach?
   A. How would you describe your pain?
   B. Can you point to the area of most severe pain?
   C. How has your pain changed since you first noticed it?
   D. What makes the pain worse or better?

ANS: D
In the PQRST model, "P" refers to exploring precipitating and palliative factors. Identify factors that make the symptom worse or better, any previous self-treatment or prescribed treatment, and response.

PTS: 1

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3. Essential parts of a health history include all of the following *except:*
   A. Chief complaint
   B. Current vital signs
   C. History of the present illness
   D. Review of systems

ANS: B
Vital signs are part of the physical exam portion of patient assessment, not part of the health history.

PTS: 1

4. While reading an article on hypothyroidism, you find a helpful graphic depiction of the decision-making process recommended by the authors to find a definitive diagnosis. This graphic is an example of:
   A. A clinical prediction tool
   B. Clinical guidelines
   C. A decision tree
   D. A diagnostic-finding guide

ANS: C
Clinical decision trees provide a graphic depiction of the decision-making process, showing the pathway based on findings at various steps in the process.

PTS: 1

5. Which of the following is the *least* reliable source of information for diagnostic statistics?
   A. Evidence-based investigations
   B. Primary reports of research
   C. Estimation based on a provider's experience
   D. Published meta-analyses

ANS: C
Sources for diagnostic statistics include textbooks, primary reports of research, and published meta-analyses. Another source of statistics, the one that has been most widely used and available for application to the reasoning process, is the estimation based on a provider's experience, although these are rarely accurate. Over the past decade, the availability of evidence on which to base clinical reasoning is improving, and there is an increasing expectation that clinical reasoning be based on scientific evidence. Evidence-based statistics are also increasingly being used to develop resources to facilitate clinical decision making.

PTS: 1

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6. Which of the following can be used to assist in sound clinical decision making?
   A. An algorithm published in a peer-reviewed journal article
   B. Clinical practice guidelines
   C. Evidence-based research
   D. All of the above

ANS: D
To assist in clinical decision making, several evidence-based resources have been developed to assist the clinician. Resources, such as algorithms and clinical practice guidelines, assist in clinical reasoning when properly applied.

PTS: 1

7. Which of the following clinical reasoning tools is defined as an evidence-based resource based on mathematical modeling to express the likelihood of a condition in select situations, settings, and patients?
   A. Clinical practice guideline
   B. Clinical decision rule
   C. Clinical algorithm
   D. Clinical recommendation

ANS: B
Clinical decision (or prediction) rules provide another support for clinical reasoning. Clinical decision rules are evidence-based resources that provide probabilistic statements regarding the likelihood that a condition exists if certain variables are met regarding the prognosis of patients with specific findings. Decision rules use mathematical models and are specific to certain situations, settings, and patient characteristics.

PTS: 1

8. Clinical decision making begins:
   A. Once the patient voices the reason they have sought care
   B. Once the history and physical are completed
   C. Once all diagnostic tests are completed
   D. Once you have consulted necessary diagnostic resources such as books and articles

ANS: A
Clinical decision making begins when the patient first voices the reason for seeking care. Expert clinicians immediately compare their patients' complaints with the "catalog" of knowledge that they have stored about a range of clinical conditions and then determine the direction of their initial history and symptom analysis.

PTS: 1

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9. When pursuing a differential diagnosis, it is important to:
   A. Include conditions with high probability based on their commonality
   B. Consider conditions that place the patient at highest or urgent risk
   C. Consider emerging conditions
   D. All of the above are true

ANS: D
Thus, even though it is appropriate that conditions with high probabilities be considered in the differential diagnosis, it is also vital in the diagnostic process to consider conditions that put the patient at highest risk. With the emergence of conditions, "zebras" may well be responsible for findings; providers must always maintain some level of suspicion for these less common explanations.

PTS: 1

10. Which of the following conditions are referred to as "red flags"?
    A. Conditions extremely common so as to warrant consideration
    B. Conditions that could be life-threatening, thus warranting consideration
    C. Conditions that are newly emerging and warrant consideration
    D. Conditions that are likely due to genetic patterns and warrant consideration

ANS: B
Indications of these life-threatening situations are often referred to as *red flags,* which are clues signaling the high likelihood of an urgent situation requiring immediate identification and management.

PTS: 1

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