Timby's Fundamental Nursing Skills and Concepts 12th edition Moreno Test Bank

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1. A client reports to the emergency department with ankle pain due to a minor road accident. By asking the client to describe the accident, which type of nursing skill is the nurse using?
A. assessment skills
B. comforting skills
C. counseling skills
D. caring skills

Answer: A

Rationale: By asking the client to describe the accident, the nurse is using assessment skills to collect more information about the client's condition. The nurse is interviewing the client to collect related data. The nurse is not using comforting skills, as the nurse is not providing any emotional support. The counseling skills of the nurse are also not used, as no health education is provided. Caring skills include assistance provided with the activities of daily living, which is not applicable in this scenario.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Understand
Client Needs: Safe, Effective Care Environment: Management of Care
Integrated Process: Nursing Process
Reference: p. 15

2. One of the nursing achievements in the Crimean War was that the death rate of soldiers dropped from 60% to 1%. What is the **most** appropriate reason for the fall in the death rate?
A. increased motivation among the soldiers
B. decreased rate of infection and gangrene
C. increased funds courtesy of donations from families
D. college-based education and training of nurses

Answer: B

Rationale: During the Crimean War, the death rate of British soldiers was 60%, which dropped to 1% due to the nursing care provided. The nurses improved the ventilation, nutritional, and sanitary conditions of the soldiers, leading to decreased rates of infection and gangrene. As a result, the death rate dropped. The families and the soldiers donated funds after the war, not during the war, through which an organized education and training facility for nurses was started.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Remember
Client Needs: Safe, Effective Care Environment: Safety and Infection Control
Integrated Process: Nursing Process
Reference: p. 3

3. A nurse at a health care facility provides information, assistance, and encouragement to clients during the various phases of nursing care. In which activity does the nurse use counseling skills?
A. educating a group of young girls about AIDS
B. telling a client to localize the pain in his abdomen
C. encouraging a client to walk without support

D. assisting a lactating mother in feeding her child

Answer: A

Rationale: The activity of educating a group of young girls about AIDS is based on the nurse using counseling skills. Telling a client to localize his pain is an assessment skill. Encouraging a client to walk without support can be both a comforting skill and a caring skill. Assisting a lactating mother in feeding her baby is an example of a caring skill.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Understand
Client Needs Pn: Safe, Effective Care Environment: Coordinated Care
Client Needs: Safe, Effective Care Environment: Management of Care
Client Needs: Health Promotion and Maintenance
Client Needs Pn: Health Promotion and Maintenance
Integrated Process: Teaching/Learning
Reference: p. 15

4. A nurse is conducting an interview of a 40-year-old client who is admitted with chest pain. Which action by the nurse indicates active listening?
A. listening to the client silently
B. interrupting after each sentence
C. asking for clarifications and repetitions
D. talking about the nurse's own experience

Answer: C

Rationale: Active listening is an important component of counseling skills. It encourages the client to open up and express their concerns. The nurse may ask the client to repeat and clarify statements. Interrupting after every sentence may annoy the client. When the nurse listens to the client silently, the client may feel that the nurse is not interested. On the other hand, if the nurse talks about the nurse's own experience, the focus of the session shifts to the nurse rather than to the client.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Apply
Client Needs: Psychosocial Integrity
Integrated Process: Caring
Reference: p. 15

5. A student wants to attend a nursing program that prepares its graduates for both staff and managerial positions. Which type of nursing program should the nurse suggest for this student?
A. hospital-based diploma
B. baccalaureate nursing program
C. associate degree program
D. continuing nursing program

Answer: B

Rationale: Baccalaureate-prepared nurses have the greatest potential for qualifying for nursing positions at both staff and managerial levels. Hospital-based diploma programs are 3-year courses and provide maximum exposure to clinical nursing. Students becoming nurses through the associate degree program would not be expected to work in a management position. Continuing nursing programs are on-the-job educational programs.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Remember
Client Needs Pn: Safe, Effective Care Environment: Coordinated Care
Client Needs: Safe, Effective Care Environment: Management of Care
Integrated Process: Teaching/Learning
Reference: p. 11

6. A client is brought to the emergency department with a head injury following an all-terrain vehicle (ATV) accident. The nurse asks the family members to describe how the accident occurred. The nurse is implementing which type of skill?
A. assessment skills
B. caring skills
C. counseling skills
D. comforting skills

Answer: A

Rationale: The immediate requirement when a client is brought to the emergency department with a head injury is to assess the injury and the system affected, as well as a description of how the accident occurred. This requires implementation of assessment skills. Subsequently, the nurse can implement caring skills, counseling skills, and comforting skills; however, assessment should be the priority.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Understand
Client Needs: Safe, Effective Care Environment: Management of Care
Integrated Process: Nursing Process
Reference: p. 15

7. Training schools for nurses were established in the United States after the Civil War. The standards of U.S. schools deviated from those of the Nightingale paradigm. Which statement is true about U.S. training schools?
A. Training schools were affiliated with a few select hospitals.
B. Training of nurses provided no financial advantages to the hospital.
C. Training was formal, based on nursing care.
D. Training schools eliminated the need to pay employees.

Answer: D

Rationale: Training schools in the United States profited by eliminating the need to pay employees because students worked without pay in return for training, which usually consisted of chores. U.S. training schools were established by any hospital; there was no formal training. Training was an outcome of work, which eliminated the need to pay employees. Nightingale training schools were affiliated with a few select hospitals, training

of nurses provided no financial advantages to the hospital, and the training was formal, based on nursing care.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Remember
Client Needs Pn: Safe, Effective Care Environment: Coordinated Care
Client Needs: Safe, Effective Care Environment: Management of Care
Integrated Process: Teaching/Learning
Reference: p. 5

8. In a nursing unit, the RN delegates nursing tasks to the LPN. Keeping in mind the delegation guidelines, which statement denotes the right task for the LPN?
A. Make beds with the help of unlicensed assistive personnel.
B. Assist clients with nasogastric tube feeds.
C. Take orders from an in-house physician.
D. Assess the client's needs and start an intravenous line.

Answer: B

Rationale: Assisting clients with nasogastric tube feeding is an appropriate task for an LPN, as it does not require independent decisions and sophisticated techniques. According to the delegation guidelines, "right task" means that the task should be assigned according to the competency of the caregiver. LPNs may not be authorized to make independent decisions, like starting an IV line, for the client. Bed making is a very basic task and may not be appropriate for an LPN if the UAP is already present. When the RN and LPN are present, the RN takes the physician's orders.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Apply
Client Needs: Physiological Integrity: Basic Care and Comfort
Integrated Process: Nursing Process
Reference: p. 8

9. A 50-year-old client reports to a primary care unit with an open wound due to a fall in the bathroom. Which nursing actions represent caring skills?
A. The nurse cleans the wound and applies a dressing to it.
B. The nurse inspects and examines the wound for swelling.
C. The nurse tells the client to take care while on slippery surfaces.
D. The nurse informs the client that the wound is small and will heal easily.

Answer: A

Rationale: The nursing action of cleaning the wound and applying a dressing indicates caring skills. Caring skills involve nursing interventions that restore or maintain a person's health. The nurse implements assessment skills while inspecting and examining the wound. The nurse counsels the client to take care when walking on slippery surfaces. By informing the client about the wound's condition, the nurse uses comforting skills.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Understand

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Client Needs: Physiological Integrity: Basic Care and Comfort
Integrated Process: Caring
Reference: p. 15

10. The scope and character of nursing practice underwent significant changes in the years following the Civil War. Which activity exemplifies nursing practice in the early years of the 20th century?
A. providing basic health care to recent immigrants to the United States
B. contributing to the scientific knowledge base of nursing by conducting research
C. participating in collaborative practice with physicians
D. establishing school nursing as a recognized specialty in urban settings

Answer: A

Rationale: In the early 20th century, some nurses moved into communities and established "settlement houses" where they lived and worked among poor immigrants. This period of history was not characterized by collaboration between physicians and nurses due to the subservient view of nursing that prevailed. Research and school nursing were not major focuses at this time.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Understand
Client Needs: Safe, Effective Care Environment: Management of Care
Integrated Process: Teaching/Learning
Reference: p. 4

11. A nursing student has begun a clinical placement at a large hospital that serves a diverse population. The student has consequently acquired a new appreciation for the fact that nursing combines art with science. What is the clearest manifestation of the scientific basis for nursing?
A. mentoring students and junior nurses
B. providing evidence-based nursing care
C. maintaining an attitude of curiosity
D. participating in continuing educational activities

Answer: B

Rationale: By developing an accumulating body of unique scientific knowledge, it is now possible to predict which nursing interventions are most likely to produce desired outcomes, a process referred to as evidence-based practice (EBP). EBP is possible because of the scientific basis that underlies nursing. Mentoring, maintaining curiosity, and participating in continuing education are beneficial, but these are not direct manifestations of the scientific basis for nursing.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Understand
Client Needs: Safe, Effective Care Environment: Management of Care
Integrated Process: Teaching/Learning
Reference: p. 6

12. Beginning with Florence Nightingale, many definitions of nursing have been put forth by individual nurses and by nursing organizations. Which statement **best** describes an aspect of the changes in these definitions over time?
A. drawing a clear distinction between the art of nursing and science of nursing
B. definitions of nursing that have become narrower in scope over time
C. characterization of nursing as a discipline that is a distinct alternative to medical treatment
D. definition of an independent health care practice that is not solely dependent on physicians

Answer: D

Rationale: The most recent definitions of nursing specify that nursing has an independent area of practice in addition to traditional dependent and interdependent functions involving physicians. This does not mean, however, that nursing is an alternative to medical treatment. Definitions have become broader over time and address the fact that nursing combines art with science.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Remember
Client Needs: Safe, Effective Care Environment: Management of Care
Integrated Process: Teaching/Learning
Reference: p. 6

13. A team of nurses who provide care in a community hospital have been encouraged to participate in continuing educational activities. Why is continuing education needed in nursing?
A. Continuing education helps to delineate the distinctions between nurses and physicians.
B. Continuing education increases the public visibility of individual nurses and the nursing profession.
C. Continuing education has the potential to partially alleviate the nursing shortage.
D. Continuing education allows for safer division of labor on hospital units and more effective delegation of tasks.

Answer: C

Rationale: Health care officials hope that enrollment in all nursing programs and continuing education will reduce the current and projected critical shortage of nurses. Continuing education is not driven by a desire to increase the visibility of nursing, to draw distinctions between nursing and medicine, or to facilitate the division of labor.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Remember
Client Needs: Safe, Effective Care Environment: Management of Care
Integrated Process: Teaching/Learning
Reference: p. 11

14. A nurse has completed a hospital-based educational program that has allowed the nurse to become cross-trained. A nurse who is cross-trained is able to:
A. perform certain nonnursing duties in addition to traditional nursing duties.
B. adopt a work schedule that deviates from the normal shift rotation at the hospital.
C. orientate new graduates and nursing students to the hospital.

D. retire with full benefits at an earlier date than a nurse who is not cross-trained.

Answer: A

Rationale: A nurse who is cross-trained is able to assume nonnursing jobs, depending on the census or levels of client acuity on any given day. This does not necessarily guarantee changes to work scheduling or earlier retirement. Cross-training does not address the orientation of new employees or students.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Understand
Client Needs: Safe, Effective Care Environment: Management of Care
Integrated Process: Teaching/Learning
Reference: p. 12

15. A medical-surgical unit manager intends to have licensed practical nurses (LPNs) in the unit administer intravenous push (IVP) medications. What source would the manager contact to include this procedure in the LPNs' practice?
A. American Nurses Association (ANA)
B. state nurse practice act (NPA)
C. facility policies and procedures committee
D. National League of Nursing (NLN)

Answer: B

Rationale: Each state has its own NPA, which determines what the nurse is allowed to do in each particular state, providing constraints within which nurses practice. The NPA delineates scope of practice. Therefore, the manager would contact the NPA in this scenario. The other sources are not appropriate given the context of the scenario.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Analyze
Client Needs: Safe, Effective Care Environment: Management of Care
Reference: p. 8

16. The nurse is caring for a client who cannot meet health needs independently. Which action made by the nurse depicts concern and attachment?
A. telling the client, "I will be back in 15 minutes to change your dressing."
B. asking the client, "How are you today? I am really worried about you."
C. talking about diabetes and teaching the client how to do foot care
D. organizing the work for the day and evaluating how the day went

Answer: B

Rationale: Concern and attachment are the result of a close relationship of one human being with another. Thus, asking the client how the client is feeling and expressing concern exemplifies caring. Stability and security, communication and teaching, and organization and evaluation are physical care themes that are part of nursing care.
Question format: Multiple Choice
Chapter 1: Nursing Foundations

Cognitive Level: Apply
Client Needs: Safe, Effective Care Environment: Management of Care
Integrated Process: Caring
Reference: p. 15

17. A registered nurse (RN) is caring for four clients on a medical-surgical unit. Which task is **most** appropriate for the nurse to delegate to the licensed practical nurse (LPN)?
A. administering bedside blood glucose testing
B. administering blood products
C. administering intravenous push medication
D. administering chemotherapy

Answer: A

Rationale: The LPN, under the nurse practice act (NPA), is permitted to administer testing for bedside blood glucose. The nurse must recognize the scope of practice of the delegate, and remember that client needs and activities delegated must be matched to skill level. The RN would not delegate administration of blood products, intravenous push medication, or chemotherapy to the LPN, as these tasks are not covered under the LPN's NPA.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Apply
Client Needs: Safe, Effective Care Environment: Management of Care
Integrated Process: Nursing Process
Reference: p. 8

18. A middle-aged nurse is concerned about a potential shortage of nurses when the baby boomer generation retires. What proactive intervention can the nurse take to address this anticipated deficit of nurses?
A. develop a community program related to healthy nutrition and exercise
B. recruit more nurses to the acute care facility
C. encourage parents to immunize their children
D. lobby to increase the retirement age

Answer: A

Rationale: The promotion of wellness is important not only in community, but also in nationwide health. Promotion of healthy habits and nutrition/exercise will be able to decrease some of the risk factors leading to acute and chronic illnesses and will lead to a decrease in hospital admissions. If effective, it would contribute to the management of issues that require an increase in the number of nurses required. Nurses fill roles other than in acute care facilities and the recruitment of more nurses to those facilities does not address the issue of the shortage in other areas of nursing. Immunization of children does not affect the nursing shortage directly because there is not a relationship between the lack of immunization increasing the risk of illness to the present nurses employed in the field . Increasing the retirement age can have a detrimental affect on those nurses being required to work with age-related changes affecting health.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Apply

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Client Needs: Health Promotion and Maintenance
Integrated Process: Teaching/Learning
Reference: p. 8

19. The nurse is caring for a client at the end stage of life. The client is crying and states to the nurse, "I just cannot believe I am going to be leaving my children without a parent. I am not ready to go." What response by the nurse demonstrates the expression of empathy to the client?
A. "This is so sad and I feel so bad that you are in this situation."
B. "It sounds as though you are most concerned about how your children will feel."
C. "I am so sorry that I am crying with you when you need my support the most."
D. "This just is not fair at all and I do not understand why this is happening to you."

Answer: B

Rationale: The nurse is demonstrating empathy when reiterating what the client is saying. This helps the nurse become effective at providing for the client's emotional needs while maintaining detachment. The other responses indicate that the nurse is feeling sympathy for the client, which includes feeling as emotionally distraught as the client. While this may be an unavoidable response, it may not help the client move through the grieving process as effectively.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Apply
Client Needs: Psychosocial Integrity
Integrated Process: Caring
Reference: p. 15

20. The nurse is delegating tasks to the unlicensed assistive personnel (UAP) prior to beginning the shift on the acute care unit. Which task would be appropriate to delegate to the UAP?
A. starting an IV for a client with dehydration
B. inserting a nasogastric tube for a client with a small bowel obstruction
C. assisting an older adult client with using the bedside commode
D. performing an assessment on a newly-admitted client

Answer: C

Rationale: When delegating tasks to UAPs, the nurse should perform the rights of delegation prior to delegating. Assisting the client with activities of daily living such as transfers, assisting with toileting, and feeding are some of the tasks that are able to be performed by the UAP. Inserting a nasogastric tube, starting an IV, and performing an assessment for a newly-admitted client are tasks that the nurse must perform and are outside of the scope of practice for the UAP.
Question format: Multiple Choice
Chapter 1: Nursing Foundations
Cognitive Level: Apply
Client Needs: Safe, Effective Care Environment: Management of Care
Integrated Process: Communication and Documentation
Reference: p. 15

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