Nursing in Today's World 13th edition Buckway Solutions Manual

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Answers to Daily Ethical Dilemma, Chapter 1, Exploring the Growth of Nursing as a Profession

Resolution:

Taking Sue's advice, Judy goes to see her doctor requesting an antibiotic. After examining her arm, the doctor prescribes an antibiotic appropriate for skin infections but not the Keflex Sue recommended. When Judy questions the doctor about this, he states that "a nurses' job is not to diagnose problems or prescribe medication."

Sue is not acting appropriately because the neighbor is not her client and because it is the role of the primary care provider, not the RN, to prescribe medication. Sue should have recommended that Judy see her primary care provider. This is an ethical dilemma and could become a legal one if Judy's infection were to lead to complications.

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Nursing in Today's World: Trends, Issues, and Management, 13th Edition

Answers to NCLEX-Style Questions

Chapter 1: Exploring the Growth of Nursing as a Profession

1. A, B, D
2. B
3. B, C, D
4. A
5. B

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Unfolding Case Studies Answers, Chapter 1, Exploring the Growth of Nursing as a Profession

Part 1

Brian is a new nurse and has been working on the medical unit for the last 2 months. Last month, a patient died because of a nosocomial infection. The hospital administration and educators have been speaking to staff about reducing nosocomial infection rates and the importance of hand hygiene in that endeavor. Brian notices that Dr. Wells enters the patient's room without using hand sanitizer or washing her hands, assesses the patient, and then goes to the next patient. Brian is aware that this is poor hygiene and against hospital policy. Brian is concerned for the patient's safety and the safety of other patients. Brian wonders how best to address the problem.

Brian is worried that because he is new he may not be the best person to address the issue. He feels certain that since this is a big problem, others must be watching who will speak to the doctor, so he chooses to say nothing.

QUESTIONS:

1. What are possible actions that Brian could have taken instead of silence?
2. What are the possible outcomes of each action?
3. If Brian's patient develops an infection as a result of poor handwashing practices, will Brian be held responsible since he was aware of the problem and did nothing?
4. What are Brian's ethical and legal responsibilities as a nurse?

ANSWERS:

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1. Brian could speak to his nurse manager regarding his concerns or even an experienced colleague for advice.
2. His colleague might advise him to speak to the physician directly or may advise him to speak to the nurse manager. The nurse manager may also advise him to speak directly to the physician or may take the lead and speak with the physician or medical director.
3. Brian would be partially responsible for the spread of infection as he had an obligation to advocate for the client.
4. Brian is ethically and legally responsible to advocate and protect clients.

Part 2

Remember Brian, who failed to speak to or report the doctor who was not washing their hands? Brian's patient has now developed a nosocomial infection in the surgical site, and the family states that they intend to sue. Can Brian be liable? What is your role in preventing infections and advocating for patients?

ANSWERS:

Brian could be held partially responsible as he was the nurse on duty and did not act to prevent harm from coming to the client. Inaction is a form of negligence.

Part 3

Brian goes to the charge nurse and discusses what he saw with Dr. Wells having direct client contact without appropriate hand hygiene. The charge nurse asks if Brian feels comfortable speaking directly to Dr. Wells, as that is the most professional approach. Brian is nervous, but he and the charge nurse rehearse the best way to approach the situation.

Brian approaches Dr. Wells and states, "Dr. Wells I'm concerned about my client's well-being. I did not see you wash your hands or perform hand hygiene and I worry about the spread of infection." Dr. Wells gets angry and says to Brian, "Of course I washed my hands! You would do well to mind your own business!" What should Brian do now? Brian reports to the nurse manager who takes the issue to the medical director. The primary provider is required to undergo continuing education

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and reprimanded, as Brian was one of several staff members to report similar infractions.

Brian has an ethical and legal responsibility to advocate for his client. Approaching coworkers and primary providers is part of our job as client advocates but it can be stressful when you feel attacked. Many times, nurses do not speak up and advocate for themselves or their clients and violate their ethical beliefs causing moral distress because of fear of being verbally attacked or making people angry. Brian should talk with trusted colleagues and management to come up with a plan on how to approach Dr. Wells and to deal with Dr. Wells's anger. Many organizations are working to decrease workplace incivility in order to improve client outcomes.

QUESTIONS:

1. What would you do if you encountered a similar situation?

ANSWERS:

Answers will vary based on the student.

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Cartoon Curriculum, Chapter 1, Exploring the Growth of Nursing as a Profession

Figure 1.2. There are two student nurses (both young female) and a matronly looking instructor watching and speaking to the students. All are wearing long dresses with the apron from the late 1800s or early 1900s, hair up. One student is scrubbing windows and one is scrubbing the floors. The instructor says, "*If you want to be good nurses, you must have everything scrubbed and shining!*" Caption: A focus on cleanliness was a turning point in the history of nursing.

Discussion Questions:

Florence Nightingale was innovative for her time demonstrating with basic observations how simple improvements in hygiene and environmental improvements, fresh air for example, caused better patient outcomes.

1. Nightingale demonstrated that a patient's environment had an impact on healing and well-being. What was unique about Florence Nightingale for her time? How do you think she came up with the idea for the changes that she implemented? What if she had not used an evidence-based approach—would it have changed nursing?
2. How has evidence-based practice changed since Florence Nightingales time?
3. How has nursing education changed from the time of Florence Nightingale and why are those changes important?

Answers:

1. Florence Nightingale was unique in her use of research and applying her research to improve care for her patients. She was forward thinking and used her position in society to affect change. Using evidence to support her decisions definitely had an impact that would not have happened otherwise.

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2. Evidence-based practice has evolved since the time of Nightingale to be formalized research that is published. Her research was more informal and not approved, although effective for the times. Research has evolved as has the use of research findings.

3. Nursing education, like research, has evolved and become more formalized with research providing the backbone for how and why it is structured as it is. Nurse educators are now trained in education in order to provide the best and most effective experience for the student. Research is ongoing in practice and in education to continually improve nurses and nursing practice so that clients receive the very best care possible.

Classroom Activity:

Imagine you are Florence Nightingale with the intention of improving the cleanliness of the hospital environment. Describe how you would systematically implement an evidence-based practice approach in affecting this change. How would you document your procedures? What obstacles would you face? How would you overcome them? What would constitute supporting evidence? What would constitute contradictory evidence? How would you encourage replication of your findings? Then, have students break into groups, present their ideas, and critique one another's approaches.

or

Have students divide into small groups. Consider a problem in nursing that you want to solve: what is your issue or problem? What evidence do you have that it is a problem? How do you implement changes to correct the problem and how would you document your changes? How would you know if your changes were helpful or if your solution made things worse? How would you make sure that others could replicate your findings?

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