Name: _	Class:	Date:	<b>ID:</b> С
Health A	Alteration 1 Test #1 Chapters 5-8		
Multiple Identify th	e Choice the choice that best completes the statement or answers th	e question.	
1.	<ol> <li>A patient is extremely anxious about having a biop. Which relaxation technique would be best for the</li> <li>a. Relaxation breathing</li> <li>b. Guided imagery</li> <li>c. Meditation</li> <li>d. Yoga stretching</li> </ol>		
2.	<ul> <li>2. An adult patient arrived in the emergency departm motor vehicle accident and has an initial blood pre most appropriate?</li> <li>a. Treat the abrasions and discuss the risks assocted. Recheck the blood pressure after the patient is treatment.</li> <li>c. Discuss the need for hospital admission to cond. Start an IV line to administer antihypertensive</li> </ul>	essure (BP) of 182/94. We stated with hypertension. Is stabilized and has received trol blood pressure.	hich action by the nurse is
3.	3. The nurse cares for a critically ill patient in the interest the nurse include in the plan of care to improve thit a. Avoid the use of opioids for pain relief during b. Lower the level of lights from 8:00 PM until 7: c. Ask all visitors to leave the ICU for the night. d. Schedule assessments to allow at least 4 hours	is patient's sleep quality? the evening hours.	
4.	<ul> <li>A patient who develops frequent upper respiratory herbal therapies might help. Which herbal supplem</li> <li>a. Ginkgo biloba</li> <li>b. Ginger</li> <li>c. St. John's wort</li> <li>d. Echinacea</li> </ul>	• • • • • • • • • • • • • • • • • • • •	•

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	5.	<ul> <li>A middle-aged male patient with usually well-controlled hypertension and diabetes visits the clinic. Today he has a blood pressure of 174/94 and a blood glucose level of 190 mg/dL. What additional patient information may indicate that an intervention by the nurse is needed?</li> <li>a. The patient states that the results are related to his family history because both of his parents have high blood pressure and diabetes.</li> <li>b. The patient indicates that he usually does blood glucose monitoring several times each day.</li> <li>c. The patient states that he usually takes his prescribed antihypertensive medications on a daily basis.</li> <li>d. The patient reports that he and his wife are getting divorced and are in a custody battle over their 12-year-old son.</li> </ul>
	6.	A female patient who initially came to the clinic with incontinence was recently diagnosed with endometrial cancer. She is usually well organized and calm but the nurse who is giving her preoperative instructions observes that she is irritable, has difficulty concentrating, and yells at her husband. Which action should the nurse take?  a. Try to calm patient and reinforce and repeat teaching about the surgery.  b. Focus teaching on preventing postoperative complications.  c. Ask the health care provider for a psychiatric referral.  d. Encourage the patient to have bladder repair at the same time as the hysterectomy.
	7.	Which action by a new staff nurse indicates that further teaching about complementary and alternative therapy may be needed?  a. The nurse shows a family how to use hand massage to calm an agitated patient.  b. The nurse suggests the use of acupressure to a patient with tension headaches.  c. The nurse massages the legs of a patient who has a left foot stasis ulcer.  d. The nurse checks a blood glucose on a patient with diabetes who takes aloe.
Andread Andread	8.	A patient complains of difficulty falling asleep and daytime fatigue for the past 6 weeks. What is the <b>best initial</b> action for the nurse to take in determining whether this patient has chronic insomnia?  a. Schedule a polysomnography (PSG) study.  b. Arrange for the patient to have a sleep study.  c. Ask the patient to keep a 2-week sleep diary.  d. Teach the patient about the use of an actigraph.

- 9. The nurse assesses a patient with fibromyalgia and osteoarthritis. Which finding would indicate a need for patient teaching?
  - The patient takes glucosamine daily for knee and hip pain.
  - The patient attends a weekly yoga class to improve flexibility and balance.
  - The patient obtains information about herbs from a salesperson at a health food store.
  - The patient states that prayer helps improve the pain and her ability to function.

Name:		ID: C
	10.	The home health nurse cares for an older adult patient who lives alone and takes several different prescribed medications for chronic health problems. Which intervention, if implemented by the nurse, would <b>best</b> encourage medication compliance?  a. Use a marked pillbox to set up the patient's medications.  b. Remind the patient about the importance of taking medications.  c. Discuss the option of moving to an assisted living facility.  d. Visit the patient daily to administer the prescribed medications.
	11.	The nurse manages the care of older adults in an adult health day care center. Which action can the nurse delegate to unlicensed assistive personnel (UAP)?  a. Take blood pressures daily and document in individual patient records.  b. Obtain information about food and medication allergies from patients.  c. Choose social activities based on the individual patient needs and desires.  d. Teach family members how to cope with patients who are cognitively impaired.
	12.	<ul> <li>When caring for patients with sleep disorders, which activity can the nurse appropriately delegate to unlicensed assistive personnel (UAP)?</li> <li>a. Help a patient choose an appropriate continuous positive airway pressure (CPAP) mask.</li> <li>b. Assist a patient to place the CPAP device correctly over the nose and mouth at bedtime.</li> <li>c. Interview a new patient about risk factors for obstructive sleep disorders.</li> <li>d. Discuss the benefits of oral appliances in decreasing obstructive sleep apnea.</li> </ul>
	13.	The nurse assesses an older patient who takes diuretics and has a possible urinary tract infection (UTI). Which action should the nurse take <b>first</b> ?  a. Inspect for abdominal distention.  b. Invite the patient to use the bathroom.  c. Question the patient about hematuria.  d. Palpate over the suprapubic area.
	14.	<ul> <li>The home health nurse visits an older patient with mild forgetfulness. The nurse is most concerned if which information is obtained?</li> <li>a. The patient has lost 10 pounds (4.5 kg) during the last month.</li> <li>b. The patient tells the nurse that a close friend recently died.</li> <li>c. The patient's son uses a marked pillbox to set up the patient's medications weekly.</li> <li>d. The patient is cared for by a daughter during the day and stays with a son at night.</li> </ul>
	15.	Which nursing action will be <b>most</b> helpful in decreasing the risk for drug-drug interactions in an older adult?  a. Teach the patient to have all prescriptions filled at the same pharmacy.  b. Instruct the patient to avoid taking over-the-counter (OTC) medications.  c. Make a schedule for the patient as a reminder of when to take each medication.  d. Have the patient bring all medications, supplements, and herbs to each

appointment.

Name:	
16.	<ul> <li>What teaching should be included in the plan of care for a patient with narcolepsy?</li> <li>a. Driving an automobile may be possible with appropriate treatment of narcolepsy.</li> <li>b. Antidepressant drugs are prescribed to treat the depression caused by the disorder.</li> <li>c. Changes in sleep hygiene are ineffective in improving sleep quality in narcolepsy.</li> <li>d. Stimulant drugs should be used for only a short time because of the risk for abuse.</li> </ul>
17.	An overweight female patient who had enjoyed active outdoor activities is stressed because she is limited in what she can do because she has osteoarthritis in her hips. Which action by the nurse will best assist the patient to cope with this situation?  a. Encourage the patient to think about how weight loss might improve symptoms.  b. Ask the patient what activities she misses the most.  c. Have the patient practice frequent relaxation breathing.  d. Teach the patient to use imagery to decrease pain and decrease stress.
18.	<ul> <li>Which patient is most likely to need long-term nursing care management?</li> <li>a. 76-year-old who had a cholecystectomy and bile duct drainage</li> <li>b. 63-year-old with bilateral knee osteoarthritis who weighs 350 lb (159 kg)</li> <li>c. 72-year-old who had a hip replacement after a fall at home</li> <li>d. 64-year-old who developed sepsis after a ruptured peptic ulcer</li> </ul>
19.	A patient who suffers from frequent migraines tells the nurse, "My life feels chaotic and out of my control. I will not be able to manage if anything else happens." Which response should the nurse make <b>initially</b> ?  a. "Tell me more about how your life has been recently."  b. "Your previous coping strategies can be very helpful to you now."  c. "Guided imagery can be helpful in regaining control."  d. "Regular exercise may get your mind off the pain."
20.	When completing an admission assessment on an older adult, the nurse gives the patient a high fall risk score. Which action should the nurse take <b>first</b> ?  a. Place the patient in a "geri-chair" near the nurse's station.  b. Ask the health care provider to order a vest restraint.  c. Use a bed alarm system on the patient's bed.  d. Administer the prescribed PRN sedative medication.
21.	The family of an older patient with chronic health problems and increasing weakness is considering placement in a long-term care (LTC) facility. Which action by the nurse will be <b>most</b> helpful in assisting the patient to make this transition?  a. Obtain the patient's input about the choice of a LTC facility.  b. Explain the reasons for the need to live in LTC to the patient.  c. Ask that the patient be placed in a private room at the facility.  d. Have the family select a LTC facility that is relatively new.

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	22.	A patient undergoing chemotherapy complains of nausea and asks the nurse whether there are any complementary and alternative therapies that may help. Which therapy should the nurse recommend to the patient?  a. Green tea  b. Black cohosh  c. Acupuncture  d. Chiropractic therapy
	23.	The nurse performs a comprehensive geriatric assessment of a patient who is being assessed for admission to an assisted living facility. Which question is the <b>most</b> important for the nurse to ask?  a. "Have you had any recent infections?"  b. "Are you able to prepare your own meals?"  c. "Do you have a history of heart disease?"  d. "How frequently do you see a doctor?"
<del></del>	24.	The nurse performs a preoperative assessment on a patient before surgery. Which finding would require immediate follow-up by the nurse?  a. The patient recently visited a chiropractor for back pain.  b. The patient expresses a wish to use acupuncture for postoperative pain control.  c. The patient uses several herbal remedies routinely.  d. The patient has used acupressure to relieve postoperative nausea in the past.
	25.	Which complementary and alternative therapy should the nurse suggest to a patient who has elevated triglyceride levels?  a. Fish oil  b. Ginkgo biloba  c. Saw palmetto  d. Milk thistle
	26.	A nurse prepares an adult patient with a severe burn injury for a dressing change. The nurse knows that this is a painful procedure and wants to provide music to help the patient relax. Which action is <b>best</b> for the nurse to take?  a. Ask the patient about music preferences.  b. Use music composed by Mozart.  c. Select music that has 60 to 80 beats/minute.  d. Encourage the patient to use music without words.
	27.	Which statement, if made by an older adult patient, would be of <b>most</b> concern to the nurse?  a. "I take three different medications for my heart and joint problems."  b. "I set up my medications in a marked pillbox so I don't forget to take them."  c. "I prefer to manage my life without much help from other people."  d. "I don't go on daily walks anymore since I had pneumonia 3 months ago."

- a. Schedule regular range-of-motion exercise.
- b. Ask the patient about daily dietary intake.
- c. Describe normal changes associated with aging to the patient.
- d. Discuss long-term care placement with the patient.

Name: _	
33	<ul> <li>A hospitalized patient with diabetes tells the nurse, "I don't understand why I can keep my blood sugar under control at home with diet alone, but when I get sick, my blood sugar goes up. This is so frustrating." Which response by the nurse is most appropriate?</li> <li>a. "It is probably just coincidental that your blood glucose is higher when you are ill."</li> <li>b. "Stressors such as illness cause the release of hormones that increase blood glucose."</li> <li>c. "Increased blood glucose occurs because the liver is not able to metabolize glucose as well during stressful times."</li> <li>d. "Your diet is different here in the hospital than at home and that is the most likely cause of the increased glucose level."</li> </ul>
34	<ul> <li>The nurse cares for an older adult patient who lives in a rural area. Which intervention should the nurse plan to implement to best meet this patient's needs?</li> <li>a. Suggest that the patient move to an urban area.</li> <li>b. Assess the patient for chronic diseases that are unique to rural areas.</li> <li>c. Ensure transportation to appointments with the health care provider.</li> <li>d. Obtain adequate medications for the patient to last for 4 to 6 months.</li> </ul>
35	<ul> <li>The nurse teaches a patient who is experiencing stress at work how to use imagery as a relaxation technique. Which statement by the nurse would be most appropriate?</li> <li>a. "Think of a place where you feel peaceful and comfortable."</li> <li>b. "Bring what you hear and sense in your present work environment into your image."</li> <li>c. "If your work environment is stressful, continue visualizing to overcome the distress."</li> <li>d. "Place the stress in your life in an image that you can destroy."</li> </ul>
36	<ul> <li>A patient who has just moved to a long-term care facility has a nursing diagnosis of relocation stress syndrome. Which action should the nurse include in the plan of care?</li> <li>a. Remind the patient that making changes is usually stressful.</li> <li>b. Restrict family visits until the patient is accustomed to the facility.</li> <li>c. Discuss the reason for the move to the facility with the patient.</li> <li>d. Have staff members write notes welcoming the patient to the facility.</li> </ul>
37	<ul> <li>An adult patient who is hospitalized following a motorcycle accident when a car ran a red light tells the nurse, "I didn't sleep last night because I worried about missing work at my new job and losing my insurance coverage." Which nursing diagnosis is appropriate to include in the plan of care?</li> <li>a. Anxiety</li> <li>b. Defensive coping</li> <li>c. Ineffective denial</li> <li>d. Risk prone health behavior</li> </ul>

Name:	ID: C
38.	Which is the <b>most</b> appropriate therapy for the nurse to suggest for a patient with chronic low back pain from osteoarthritis?  a. Aromatherapy  b. St. John's wort  c. Magnetic therapy  d. Acupuncture
39.	Which patient statement indicates a need for further teaching about extended-release zolpidem (Ambien CR)?  a. "I should not take this medication unless I can sleep for at least 6 hours."  b. "I should take the medication on an empty stomach."  c. "I will schedule activities that require mental alertness for later in the day."  d. "I will take the medication an hour before bedtime."
40.	The nurse teaches a patient about Healing Touch. Which statement by the nurse is the most appropriate?  a. "The treatment consists of passively moving joints through full range of motion."  b. "Pressure will be applied to body points where energy is obstructed."  c. "This therapy will realign your energy flow."  d. "I will start by manipulating your muscles and soft tissues."
41.	<ul> <li>Which information regarding a patient's sleep is most important for the nurse to communicate to the health care provider?</li> <li>a. 32-year-old accountant who is experiencing a stressful week uses diphenhydramine (Benadryl) for several nights</li> <li>b. 64-year-old nurse who works the night shift reports drinking hot chocolate before going to bed in the morning</li> <li>c. 21-year-old student who takes melatonin to assist in sleeping when traveling from the United States to Europe</li> <li>d. 41-year-old librarian who has a body mass index (BMI) of 42 kg/m² says that the spouse complains about snoring</li> </ul>
42.	A patient with sleep apnea who uses a continuous positive airway pressure (CPAP) device is

preparing to have inpatient surgery. Which instructions should the nurse provide to the patient?

b. Call the hospital to ensure that mechanical ventilation will be available for the

c. Discourage the patient from requesting pain medication while hospitalized. d. Plan to schedule a nighttime polysomnography (PSG) study before surgery.

Remind the patient to take the CPAP device to the hospital.

patient.

- 46. The nurse cares for an alert, homeless older adult patient who was admitted to the hospital with a chronic foot infection. Which intervention is the **most** appropriate for the nurse to include in the discharge plan for this patient?
  - a. Refer the patient to social services for further assessment.
  - b. Teach the patient how to assess and care for the foot infection.
  - c. Give the patient written information about shelters and meal sites.
  - d. Schedule the patient to return to outpatient services for foot care.
  - 47. A patient complains of insomnia and daytime fatigue. What is the **first** action the nurse should take in addressing the patient's concerns?
    - Question the patient about the use of over-the-counter (OTC) sleep aids.
    - b. Advise the patient to get out of bed if unable to fall asleep in 10 to 20 minutes.
    - c. Suggest that the patient decrease intake of caffeine-containing beverages.
    - d. Recommend that the patient use any prescribed sleep aids for only 2 to 3 weeks.

Name:	ID: C
48.	An older patient who takes multiple medications for chronic cardiac and pulmonary diseases is alert and lives with a daughter who works during the day. During a clinic visit, the patient verbalizes to the nurse that she has a strained relationship with her daughter and does not enjoy being alone all day. Which nursing diagnosis should the nurse assign as the <b>priority</b> for this patient?  a. Caregiver role strain related to need to adjust family employment schedule  b. Risk for injury related to drug interactions  c. Social isolation related to weakness and fatigue  d. Compromised family coping related to the patient's many care needs
49.	<ul> <li>An older adult patient presents with a broken arm and visible scattered bruises healing at different stages. Which action should the nurse take first?</li> <li>a. Make a referral for a home assessment visit by the home health nurse.</li> <li>b. Have the family member stay in the waiting area while the patient is assessed.</li> <li>c. Ask the patient how the injury occurred and observe the family member's reaction.</li> <li>d. Notify an elder protective services agency about the possible abuse.</li> </ul>
Multiple l	Response

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

- 50. Which nursing actions can the registered nurse (RN) delegate to a licensed practical/vocational nurse (LPN/LVN)? (select all that apply)?
  - a. Administer prescribed naproxen (Naprosyn) to a patient with osteoarthritis.
  - b. Provide a gentle back rub to a patient who is having difficulty falling asleep.
  - c. Ask a newly admitted patient about home use of herbal medications.
  - d. Evaluate whether home use of aloe has affected a patient's electrolyte levels.
  - e. Teach a patient with heart disease about the benefits of fish oil supplements.