

Test Bank for Nutrition Assessment 1st Munoz

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NAS ISBN13: 99781284127706, add to Ahead, Title tags

Chapter: Chapter 01 - Quiz

Multiple Choice

1. Child obesity is linked with a high chance of which of the following?

- A) Adult obesity, premature death, and adult disability
- B) Adult obesity, premature death, and smoking
- C) Adult obesity, smoking, and adult disability
- D) Adult obesity and adult disability

Ans: A

Complexity: Easy

Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation

Subject: Chapter 1

Title: Nutritional Assessment

2. The category of heart disease includes:

- A) coronary artery disease, heart attack, and angina.
- B) heart attack, angina, and coronary venous disease.
- C) coronary artery disease and heart attack.
- D) angina and coronary venous disease.

Ans: A

Complexity: Moderate

Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation

Subject: Chapter 1

Title: Nutritional Assessment

3. Coronary artery disease (CAD) affects blood flow to the:

- A) brain.
- B) heart.
- C) extremities.
- D) abdomen.

Ans: B

Complexity: Moderate

Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation
Subject: Chapter 1
Title: Nutritional Assessment

4. Coronary artery disease (CAD) can cause which of the following?

- A) A stroke
- B) A seizure
- C) A heart attack
- D) Gastroparesis

Ans: C

Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation
Complexity: Moderate
Subject: Chapter 1
Title: Nutritional Assessment

5. When smoking cessation is added to actions taken to prevent cardiovascular disease, what percentage of vascular events is prevented as a result?

- A) 25%
- B) 50%
- C) 75%
- D) 85%

Ans: C

Complexity: Moderate
Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation
Subject: Chapter 1
Title: Nutritional Assessment

6. Smoking increases the risk of cancer in which of the following body organs and/or regions?

- A) Bladder, kidney, pancreas, cervix, blood, and nasal cavity
- B) Gastrointestinal tract, bladder, kidney, pancreas, cervix, and nasal cavity
- C) Gastrointestinal tract, bladder, pancreas, cervix, blood, and nasal cavity
- D) Gastrointestinal tract, bladder, kidney, pancreas, cervix, and blood

Ans: D

Complexity: Moderate
Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation
Subject: Chapter 1
Title: Nutritional Assessment

7. Epidemiology depends heavily on which of the following sources?

- A) Medical records
- B) Surveys
- C) Observational data
- D) Observational data and medical records

Ans: C

Complexity: Moderate
Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation
Subject: Chapter 1
Title: Nutritional Assessment

True/False

1. True or False? A diet history is used to determine the usual intake of a specific individual.

Ans: True

Complexity: Easy

Ahead: Standard Methods of Evaluation of Nutritional Status

Subject: Chapter 1

Title: Nutritional Assessment

2. True or False? The Nutrition Care Process (NCP) is a screening tool that multiple team members can use for patient screening.

Ans: False

Complexity: Moderate

Ahead: The Nutrition Care Process

Subject: Chapter 1

Title: Nutritional Assessment

3. True or False? The data collected and analyzed during the nutrition assessment are used to generate the Problem, Etiology, Signs/Symptoms (PES) statement.

Ans: True

Complexity: Easy

Ahead: The Nutrition Care Process

Subject: Chapter 1

Title: Nutritional Assessment

4. True or False? The monitoring/evaluation step of the Nutrition Care Process (NCP) ensures that the individual understands and complies with the plan.

Ans: True

Complexity: Easy

Ahead: The Nutrition Care Process

Subject: Chapter 1

Title: Nutritional Assessment

5. True or False? When performing a food diary or 24-hour recall, foods eaten anywhere (home, worksites, schools, or restaurants) are included.

Ans: True

Complexity: Easy

Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation

Subject: Chapter 1

Title: Nutritional Assessment

6. True or False? Heart disease is the leading cause of death worldwide.

Ans: True

Complexity: Easy

Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation

Subject: Chapter 1

Title: Nutritional Assessment

7. True or False? A study states that the National Health and Nutrition Examination Survey (NHANES) data reported by the majority of NHANES participants are not physiologically reasonable.

Ans: True

Complexity: Moderate

Ahead: Standard Methods of Evaluation of Nutritional Status

Subject: Chapter 1

Title: Nutritional Assessment

Short Answer

1. A Problem, Etiology, Signs/Symptoms (PES) statement is also known as a ____ statement.

Ans: diagnosis

Complexity: Moderate

Ahead: The Nutrition Care Process

Subject: Chapter 1

Title: Nutritional Assessment

2. The fourth step of the Nutrition Care Process (NCP) is nutrition monitoring and ____.

Ans: evaluation

Complexity: Moderate

Ahead: The Nutrition Care Process

Subject: Chapter 1

Title: Nutritional Assessment

3. ____ concerns itself with the causes of diseases in populations and how they develop and spread.

Ans: Epidemiology

Complexity: Moderate

Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation

Subject: Chapter 1

Title: Nutritional Assessment

Essay

1. A number of healthcare organizations use their own proprietary malnutrition guidelines instead of using standardized malnutrition guidelines. Discuss the potential consequences from a facility's standpoint.

Ans: Although requiring institutions to perform nutrition screening offered a framework for early identification of malnutrition, there has been considerable variance in the nutrition screening tools used and the procedures required to follow and implement the rest of the nutrition care plan. For example, some institutions continue to use albumin, which has been documented to be a poor diagnostic indicator for malnutrition.

Complexity: Difficult

Ahead: Nutrition and Health

Subject: Chapter 1

Title: Nutritional Assessment

2. Why is albumin a poor diagnostic indicator for malnutrition?

Ans: It fluctuates in the presence of inflammation that could be induced by external factors such as trauma, surgery, or inflammatory diseases.

Complexity: Difficult

Ahead: Nutrition and Health

Subject: Chapter 1

Title: Nutritional Assessment

3. A healthcare worker gives a nutrition-screening tool to an attendee of a corporate wellness fair. The tool indicates that this attendee is at risk for a chronic disease. What potential next steps should the healthcare worker enact?

Ans: Refer the attendee to their primary care physician for extensive evaluation to determine whether a chronic disease is present. Refer to a RDN who will offer recommendations for making dietary and lifestyle changes to the individual that may help to ward off the onset of the disease or will help the individual manage the newly diagnosed disease.

Complexity: Moderate

Ahead: Nutritional-Screening and Nutritional-Assessment Tools

Subject: Chapter 1

Title: Nutritional Assessment

4. What is the primary goal of nutrition-screening tools used in the clinical or long-term care setting?

Ans: To identify malnutrition risk so that a full nutritional assessment can be performed and appropriate interventions put in place if needed.

Complexity: Moderate

Ahead: Nutritional-Screening and Nutritional-Assessment Tools

Subject: Chapter 1

Title: Nutritional Assessment

5. What type of data can researchers from a wide range of health disciplines utilize for their specific health-related disciplines?

Ans: They all use anthropometric data to examine health status and healthcare utilization trends in American adults.

Complexity: Moderate

Ahead: Standard Methods of Evaluation of Nutritional Status

Subject: Chapter 1

Title: Nutritional Assessment

6. Discuss why biochemical markers are not reliable as a standalone assessment for identifying malnutrition.

Ans: They can be influenced by non-nutritional factors such as medications, hydration status, disease state, and processes such as stress.

Complexity: Difficult

Ahead: Standard Methods of Evaluation of Nutritional Status

Subject: Chapter 1

Title: Nutritional Assessment

7. Discuss the difference between the statistical databases containing food-supply information and the information gathered by such tools as food diaries and 24-hour recalls.

Ans: The databases show what is purchased but not necessarily eaten, while the others show exactly what was eaten.

Complexity: Difficult

Ahead: Standard Methods of Evaluation of Nutritional Status

Subject: Chapter 1

Title: Nutritional Assessment

8. What did the National Health and Nutrition Examination Survey (NHANES) validation study infer?

Ans: It suggests that data reported by the majority of participants were not physiologically reasonable. So, the ability to estimate population trends in caloric intake to support the development of public policy relevant to diet and health relationships from the US nutrition surveillance system can be limited.

Complexity: Difficult

Ahead: Standard Methods of Evaluation of Nutritional Status

Subject: Chapter 1

Title: Nutritional Assessment

9. Explain which common deficiencies can be identified via biochemical or laboratory methods.

Ans: Blood-forming nutrients such as iron, folacin, and vitamins B₆ and B₁₂; water soluble vitamins such as thiamine, riboflavin, niacin, and vitamin C; all of the fat-soluble vitamins (A, D, E, and K); minerals such as iron, iodine, and trace elements; levels of blood lipids, including cholesterol and triglycerides; glucose; and enzymes linked to heart disease

Complexity: Difficult

Ahead: Standard Methods of Evaluation of Nutritional Status

Subject: Chapter 1

Title: Nutritional Assessment

10. Name the four steps in the Nutrition Care Process (NCP), in order.

Ans: Nutrition assessment, diagnosis, intervention, monitoring, and evaluation

Complexity: Moderate

Ahead: The Nutrition Care Process

Subject: Chapter 1

Title: Nutritional Assessment

11. Describe the external factors that influence the Nutrition Care Process (NCP).

Ans: The RDN's skill, ability, and knowledge; application of evidence-based practice; application of the code of ethics
Complexity: Moderate
Ahead: The Nutrition Care Process
Subject: Chapter 1
Title: Nutritional Assessment

12. Describe the benefit of having the Nutrition Care Process Terminology (NCPT).

Ans: The unique language developed to identify nutrition interventions helps outline specific planned actions intended to change a nutrition-related behavior, environmental condition, or aspect of health status for an individual or a group.

Complexity: Moderate
Ahead: The Nutrition Care Process
Subject: Chapter 1
Title: Nutritional Assessment

13. Describe the planning step of the Nutrition Care Process (NCP) intervention phase.

Ans: Selecting and prioritizing the nutrition diagnosis, collaborating with other caregivers, involving the patient and his or her representative, and reviewing evidence-based practice guidelines. With the patient at the center of the care, the nutrition and dietetics professional should work toward the expected outcome for the nutrition diagnosis, outline nutrition interventions, identify the frequency of the treatment, and identify the resources needed.

Complexity: Difficult
Ahead: The Nutrition Care Process
Subject: Chapter 1
Title: Nutritional Assessment

14. Describe the implementation step of the Nutrition Care Process (NCP) intervention stage.

Ans: Communicating and carrying out the care plan developed for the individual. Plan implementation involves monitoring the plan for acceptance (by the individual) and effectiveness. If the expected outcome for the individual is not being obtained, the interventions must be changed.

Complexity: Moderate
Ahead: The Nutrition Care Process
Subject: Chapter 1
Title: Nutritional Assessment

15. Describe the monitoring and evaluation step of the Nutrition Care Process (NCP).

Ans: The individual's outcomes that are relevant to the nutrition diagnosis and interventions are monitored and measured. Evaluating outcomes requires that the nutrition care provider evaluate the change between the outcomes obtained to the individual's status at the beginning of the care process.

Complexity: Moderate
Ahead: The Nutrition Care Process
Subject: Chapter 1
Title: Nutritional Assessment

16. What is the purpose of the fourth step of the Nutrition Care Process (NCP)?

Ans: To measure the progress made by the individual to obtain the predetermined outcome
Complexity: Moderate
Ahead: The Nutrition Care Process
Subject: Chapter 1
Title: Nutritional Assessment

17. When evaluating a person's clinical food intake, when is it important to discuss foods eaten outside the home, in addition to those eaten inside the home?

Ans: Diet reflects the variety of foods and beverages eaten over time in the home and in settings such as work sites, schools, and restaurants; therefore, it is important to gather all diet information when gathering food diaries

Complexity: Moderate
Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation
Subject: Chapter 1
Title: Nutritional Assessment

18. What is the relationship between impaired glucose tolerance (IGT) and diabetes?

Ans: Impaired glucose tolerance increases the risk for developing DM.

Complexity: Difficult
Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation
Subject: Chapter 1
Title: Nutritional Assessment

19. Discuss how lifestyle factors affect the onset and management of diabetes.

Ans: Healthy eating patterns, engaging in regular physical activity, and taking prescribed medications to lower blood glucose levels all affect the onset and management of diabetes. Another critical part of diabetes management is reducing cardiovascular disease risk factors such as high blood pressure, high lipid levels, and the use of tobacco.

Complexity: Difficult
Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation
Subject: Chapter 1
Title: Nutritional Assessment

20. Discuss how childhood obesity has far-reaching impacts into adulthood.

Ans: Childhood obesity is linked to a higher chance of adult obesity, premature death, and adult disability. Aside from health risks in their future, obese children suffer from breathing problems and have higher risks for fractures, hypertension, cardiovascular disease, insulin resistance, and attendant psychological consequences.

Complexity: Difficult
Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation
Subject: Chapter 1
Title: Nutritional Assessment

21. Discuss the behavioral factors that can influence cardiovascular disease.

Ans: Use of tobacco, being obese and overweight, engaging in unhealthy eating patterns, having a physically inactive lifestyle, and consuming alcohol in more than recommended amounts

Complexity: Moderate

Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation

Subject: Chapter 1

Title: Nutritional Assessment

22. Discuss how epidemiologists (who work at population levels) and healthcare providers (who work with individuals) support each other.

Ans: As epidemiologists research illness occurrence, they depend on healthcare providers to determine the correct diagnosis of each individual. On the other hand, epidemiologists offer providers an increased understanding of the clinical presentation and history of the condition being evaluated. Considerable epidemiologic studies are focused on finding causal elements that affect any individual's possibility of developing disease.

Complexity: Difficult

Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation

Subject: Chapter 1

Title: Nutritional Assessment

23. In epidemiology, nutrition has historically received less attention than have other risk factors for disease. Why might this have happened?

Ans: Because it is difficult to measure diet and physical activity accurately.

Complexity: Difficult

Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation

Subject: Chapter 1

Title: Nutritional Assessment

24. Many people experience contradictory messages about nutrition and health. State one contributor to this problem.

Ans: Meta-analyses with questionable designs and executions

Complexity: Difficult

Ahead: Emerging Opportunities for Nutritional Assessment and Evaluation

Subject: Chapter 1

Title: Nutritional Assessment