Test Bank for Taylor's Clinical Nursing Skills A Nursing Process Approach 5th Lynn

1. Nurses and other healthcare workers play a key role in reducing the spread of disease, minimizing complications and reducing adverse outcomes for their patients. Which of the following statements accurately describe this process? Select all that apply.
   A) Nurses limit the spread of microorganisms by completing the chain of infection.
   B) Nurses practice asepsis, which includes all activities to prevent infection.
   C) Nurses use medical asepsis, which involves procedures and practices that reduce the number and transfer of microorganisms.
   D) Nurses perform surgical asepsis, which includes practices used to render and keep objects and areas free from microorganisms.
   E) Nurses use PPE, which is the most effective way to help prevent the spread of organisms.
   F) Nurses use Standard and Transmission-Based Precautions as an important part of preventing infection.

2. Nurses use medical asepsis in practice to reduce the number and transfer of pathogens. Which of the following are principles of this practice? Select all that apply.
   A) Carry soiled items close to the body to prevent transfer of pathogens into the environment.
   B) Place soiled bed linen or any other items on the floor, instead of the bed or furniture.
   C) Move equipment close to you when brushing, dusting, or scrubbing articles.
   D) Clean the least soiled areas first and then move to the more soiled ones.
   E) Use personal grooming habits, such as shampooing hair often, to prevent spreading microorganisms.
   F) Shake out linens and patient clothing before placing them back on the bed.

3. An experienced nurse is teaching a student nurse the proper use of hand hygiene. Which of the following is an accurate guideline that should be discussed?
   A) The use of gloves eliminates the need for hand hygiene.
   B) The use of hand hygiene eliminates the need for gloves.
   C) Hand hygiene must be performed after contact with inanimate objects near the patient.
   D) Hand lotions should not be used after hand hygiene.

4. When is hand hygiene with an alcohol-based rub appropriate as opposed to using handwashing?
   A) When hands are not visibly soiled
   B) Before eating and after using the restroom
   C) When hands have been in contact with blood or body fluids
   D) When hands have been in contact with blood or body fluids, but there is no visible soiling

5. A nurse changing the linens of a patient bed is exposed to urine and performs hand hygiene. Which of the following is a guideline for performing this skill properly following this patient encounter?
   A) Use an alcohol-based hand rub to decontaminate hands.
   B) Remove all jewelry, including wedding bands before handwashing.
   C) Keep hands lower than elbows to allow water to flow toward fingertips.
   D) Pat dry with a paper towel, beginning with the forearms and moving down to fingertips.

6. A nurse follows surgical asepsis techniques for inserting an indwelling urinary catheter in a patient. Which of the following is an accurate guideline for using this technique?
   A) Hold sterile objects above waist level to prevent accidental contamination.
   B) Consider the outside of the sterile package to be sterile.
   C) Consider the outer 3-inch edge of a sterile field to be contaminated.
   D) Open sterile packages so that the first edge of the wrapper is directed toward you.

7. Which of the following is a recommended guideline for maintaining a sterile field?
   A) When a portion of the sterile field becomes contaminated, the nurse should remove the contaminated objects and continue with the procedure.
   B) If a supply is missing, you may leave the sterile field briefly to obtain it.
   C) If the patient touches the sterile field, you should discard the supplies and prepare a new sterile field.
   D) If the patient touches the nurse's gloves during the procedure, you may still proceed with the procedure.

8. A nurse is adding a sterile solution to a sterile field and has just opened the bottle according to manufacturer's directions. What is the next step?
   A) Touch the tip of the bottle to the sterile container to start the flow of the solution and pour it into the container directly from the top of the container edge.
   B) Hold the bottle outside the edge of the sterile field with the label side facing the palm of the hand and prepare to pour from a height of 4 to 6 inches.
   C) “Lip” a new or old bottle of solution before pouring it and hold the solution with the label facing out from a height of 4 to 6 inches.
   D) Hold the bottle inside the 1-inch edges of the sterile field with the label side facing the palm of the hand and pour from a height of 2 to 4 inches.

9. Place the following steps for putting the first hand into a sterile glove in the order in which they would be performed.
   A) Carefully open the inner package. Fold open the top flap, then the bottom and sides.
   B) Place the inner package on the work surface with the side labeled 'cuff end' closest to the body.
   C) With the thumb and forefinger of the nondominant hand, grasp the folded cuff of the glove for dominant hand, touching only the exposed inside of glove.
   D) Keeping the hands above the waistline, lift and hold the glove up and off the inner package with fingers down.
   E) Place sterile glove package on clean, dry surface at or above your waist.
   F) Carefully insert dominant hand palm up into glove and pull on glove.
   G) Open the outside wrapper by carefully peeling the top layer back and remove inner package, handling only the outside of it.

10. Place the following steps for putting on PPE in the order in which they would be performed.
   A) Put on goggles and place over eyes and adjust to fit.
   B) Put on the mask or respirator over your nose, mouth, and chin.
   C) Put on the gown, with the opening in the back. Tie gown securely at neck and waist.
   D) Perform hand hygiene.
   E) Put on clean, disposable gloves and extend gloves to cover the cuffs of the gown.
   F) Provide instruction about precautions to patient, family members, and visitors.

11. Which of the following is an accurate guideline for removing soiled gloves after patient care?
   A) Use the nondominant hand to grasp the opposite glove near the cuffed end on the outside exposed area.
   B) Remove the glove on the nondominant hand by pulling it straight off, keeping the contaminated area on the outside.
   C) After removing the glove on the nondominant hand, hold the removed glove in the remaining gloved hand.
   D) After removing the first glove, slide the fingers of the ungloved hand between the remaining glove and the wrist and pull the glove straight off with the contaminated area on the outside.

12. Which of the following pieces of personal protective equipment should be removed first?
    A) Gloves
    B) Respirator
    C) Gown
    D) Goggles

13. A nurse is performing a venipuncture on a patient and notices that there is a hole in one of the sterile gloves. What would be the appropriate action to take to maintain a sterile field?
    A) Finish the procedure and perform handwashing immediately afterward.
    B) Finish the procedure, remove damaged gloves, and open new sterile gloves.
    C) Stop the procedure, remove damaged gloves, and open new sterile gloves.
    D) Stop the procedure, remove damaged gloves, perform handwashing, and open new sterile gloves.

14. For which of the following patients would the use of Standard Precautions alone be appropriate?
    A) A patient with diphtheria who needs pm care
    B) A patient with TB who needs medications administered
    C) An incontinent patient in a nursing home who has diarrhea
    D) A child with chickenpox who is treated in the ER

15. A nurse is in charge of patient care for a patient who has MRSA. Which of the following is an accurate guideline for using Transmission-Based Precautions when caring for this patient?
    A) Place the patient in a private room that has monitored negative air pressure.
    B) Keep visitors 3 feet from the patient.
    C) Use respiratory protection when entering the room.
    D) Wear gloves whenever entering the patient's room.

16. A nurse is caring for a child who is hospitalized for diphtheria. Which one of the following guidelines would be appropriate when caring for this patient?
    A) Use a private room with the door closed.
    B) Wear PPE when entering the room for all interactions that may involve contact with the patient.
    C) Place patient in private room that has monitored negative air pressure.
    D) Use respiratory protection when entering the room of patient with known or suspected diphtheria.

17. Which of the following is an accurate guideline for the use of PPE?
    A) Put on PPE after entering the patient's room.
    B) Substitute personal glasses for protective eyewear, if desired.
    C) Replace gloves if they are visibly soiled.
    D) When wearing gloves, work from “dirty” areas to ”clean” ones.

18. Which of the following would be appropriate nursing diagnoses related to the use of PPE? Select all that apply.
    A) Risk for infection
    B) Deficient knowledge
    C) Ineffective protection
    D) Bowel incontinence
    E) Self-care deficit
    F) Risk for falls

Answer Key

1. B, C, D, F
2. D, E
3. C
4. A
5. C
6. A
7. C
8. B
9. E, G, B, A, C, D, F
10. D, F, C, B, A, E
11. C
12. A
13. D
14. C
15. D
16. B
17. C
18. A, B, C, D