

Test Bank for Nursing Concepts 1st Caputi

Chapter 1. Introduction to Concepts and How Nurses Use Concepts to Think

Multiple Choice

Identify the choice that best completes the statement or answers the question.

- _____ 1. Which of the five categories of nursing concepts focuses on caring, collaboration, communication, and professionalism?
1. Physiological concepts
 2. Healthcare concepts
 3. Nursing practice concepts
 4. Person-centered concepts
- _____ 2. Which is a benefit of a concept-based nursing curriculum?
1. Reflects real-world approaches to clinical reasoning
 2. Reduces the number of nonnursing classes needed
 3. Provides more opportunities for hands-on learning
 4. Emphasizes memorization of complex diseases and procedures
- _____ 3. How is a deep understanding of concepts applied to the nursing assessment step?
1. Guides the nurse in identifying priority actions
 2. Provides a protocol to follow for specific diseases or conditions
 3. Allows the nurse to rely on objective data over subjective data
 4. Helps the nurse identify related patient issues that require additional investigation
- _____ 4. The nurse is caring for a patient with heart failure. The patient is experiencing increased shortness of breath, new cough, “puffy feet,” and a 3-pound weight gain. Which step is the nurse engaged in when they identify these manifestations as potential signs of worsening fluid overload?
1. Prioritize hypotheses
 2. Generate solutions
 3. Recognize cues
 4. Analyze cues
- _____ 5. While assessing a patient with shortness of breath, the nurse notes crackles in both lungs, oxygen saturation of 88%, mild pedal edema, and a history of heart failure. The nurse recognizes that fluid overload, pneumonia, or anxiety could be causing these manifestations. Which action would the nurse take next?

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1. Analyze cues
2. Generate solutions
3. Take action
4. Prioritize hypotheses

_____ 6. Which concept knowledge category is most closely associated with verifying the patient's name and date of birth before administering medications?

1. Safety
2. Professionalism
3. Communication
4. Comfort

_____ 7. What action does the nurse take immediately after identifying the interconnected concepts affecting a patient?

1. Categorize each of the concepts identified
2. Determine what potential complications the patient is at risk for
3. Develop a personalized plan of care
4. Identify whether any of the patient's symptoms are attributable to modifiable risk factors

_____ 8. Immediately implementing needed nursing actions and planning ongoing nursing actions that address both the conceptual issue and interconnected conceptual issues reflects which step(s) in the Clinical Judgment Measurement Model?

1. Recognize and analyze cues
2. Evaluate outcomes
3. Generate solutions and take actions
4. Prioritize hypotheses

_____ 9. The nurse manager has noticed an increase in catheter-associated urinary tract infections (CAUTIs). During the daily shift huddle, the nurse manager provides staff education on practices to prevent CAUTIs in patients with indwelling catheters. What category of concept-based thinking is the nurse manager practicing?

1. Person-centered concepts
2. Nursing practice concepts
3. Psychosocial concepts
4. Physiological concepts

- _____ 10. The nurse is preparing to give report to the oncoming nurse. During bedside report, the nurse reassesses the patient's temperature after administering prescribed acetaminophen 45 minutes ago. The nurse is demonstrating what category of concept-based thinking?
1. Physiological concepts
 2. Psychosocial concepts
 3. Person-centered concepts
 4. Healthcare concepts
- _____ 11. Checking the food tray to see how much food the patient ate is an example of which concept?
1. Cellular regulation
 2. Nutrition
 3. Fluid and electrolytes
 4. Mood and affect
- _____ 12. While taking the patient's vital signs, the nurse records a blood pressure reading of 195/100 mm Hg, recognizes that this is a hypertensive crisis, immediately alerts the healthcare provider, and assesses for severe headache, visual changes, chest pain, shortness of breath, numbness, and confusion. Assessing for headache and other symptoms best aligns with which of the six steps to thinking using concepts?
1. Recall the attributes or characteristics related to the identified conceptual issue
 2. Identify interconnected concepts that may occur as a result of the identified conceptual problem
 3. Predict potential complications that may occur if the conceptual issue is not addressed
 4. Immediately implement needed nursing actions and plan ongoing nursing actions
- _____ 13. What is the primary risk of assessing a patient based solely on the medical diagnosis?
1. Makes it more challenging to prioritize nursing care
 2. Increases patient nonadherence
 3. Commonly results in underuse of standardized protocols
 4. May miss conceptual issues unrelated to the medical diagnosis
- _____ 14. The nurse is caring for a patient with diagnoses of chronic heart failure, chronic kidney disease, and depression. Which approach to care best exemplifies a conceptual approach?
1. Approaching each diagnosis individually both in terms of assessment and nursing interventions
 2. Assessing how perfusion, fluid balance, and mood regulation affect one another in this patient
 3. Prioritizing nursing actions that are aimed at addressing the primary medical diagnosis

4. Focusing the assessment on acute symptoms of each disease

Multiple Response

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

- _____ 15. A 10-year-old patient is newly diagnosed with type 1 diabetes. The nurse asks the patient and their parents about their daily routines and what feels manageable, collaboratively developing a meal and activity plan that fits their family's schedule. Which three concepts are predominantly demonstrated in this scenario?
1. Nursing practice concepts
 2. Person-centered concepts
 3. Physiological concepts
 4. Psychosocial concepts
 5. Healthcare concepts

Chapter 1. Introduction to Concepts and How Nurses Use Concepts to Think Answer Section

MULTIPLE CHOICE

1. ANS: 3

Chapter: 1, Introduction to Concepts and How Nurses Use Concepts to Think

Objective:

Heading: Welcome to Concept-Based Learning in Nursing Education > Concept > What Is a Concept?

Integrated Processes: Nursing Process

Client Need: Health Promotion and Maintenance

Cognitive Level: Knowledge [Remembering]

Concept: Professionalism

Difficulty: Moderate

	Feedback
1	This is incorrect. Physiological concepts focus on the physical needs of patients, such as immunity, nutrition, and elimination.
2	This is incorrect. Healthcare concepts focus on the healthcare system, population health, and social determinants of health.
3	This is correct. Nursing practice concepts are concepts that influence the daily practice of nurses, such as caring, collaboration, communication, and professionalism.
4	This is incorrect. Person-centered concepts place family, health promotion, and self-care at the center of focus.

2. ANS: 1

Chapter: 1, Introduction to Concepts and How Nurses Use Concepts to Think

Objective:

Heading: How Nurses Think With Concepts

Integrated Processes: Nursing Process

Client Need: Safe and Effective Care Environment: Management of Care

Cognitive Level: Comprehension [Understanding]

Concept: Teaching and Learning

Difficulty: Moderate

	Feedback
1	This is correct. Concept-based curricula teach students to consider interconnected concepts, improving their ability to assess real-world complex

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	situations and respond appropriately.
2	This is incorrect. The number of nonnursing education courses is typically set by academic requirements and is not influenced by whether the nursing curriculum is concept-based or traditional.
3	This is incorrect. Hands-on learning depends on clinical and lab hours, not the structure of the curriculum.
4	This is incorrect. Concept-based curricula intentionally reduce reliance on memorization, instead encouraging students to understand and apply principles across multiple conditions.

3. ANS: 4

Chapter: 1, Introduction to Concepts and How Nurses Use Concepts to Think

Objective:

Heading: How Nurses Think With Concepts

Integrated Processes: Nursing Process

Client Need: Safe and Effective Care Environment: Management of Care

Cognitive Level: Comprehension [Understanding]

Concept: Teaching and Learning

Difficulty: Moderate

	Feedback
1	This is incorrect. Prioritizing actions comes after the assessment step.
2	This is incorrect. A concept-based approach is not protocol-driven; it encourages nurses to think broadly across conditions, not follow disease-specific checklists during assessment.
3	This is incorrect. Both objective and subjective data are important to collect during assessment.
4	This is correct. A deep conceptual understanding allows the nurse to recognize interconnected issues and ask deeper or follow-up questions during assessment, improving accuracy and completeness.

4. ANS: 4

Chapter: 1, Introduction to Concepts and How Nurses Use Concepts to Think

Objective:

Heading: Six Steps to Thinking Using Concepts

Integrated Processes: Clinical Judgment

Client Need: Physiological Integrity: Basic Care and Comfort

Cognitive Level: Application [Applying]

Concept: Clinical Judgment

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Difficulty: Easy

	Feedback
1	This is incorrect. Prioritizing hypotheses comes next. When prioritizing hypotheses, the nurse is ranking hypotheses according to priority.
2	This is incorrect. Generating solutions comes later in the process. It involves identifying expected outcomes and then defining interventions.
3	This is incorrect. Recognizing cues is the first step in the process. It includes identifying information that is relevant and of immediate concern.
4	This is correct. Analyzing cues involves determining which conditions are consistent with the cues, as is being done here when the nurse connects the manifestations to worsening fluid overload.

5. ANS: 4

Chapter: 1, Introduction to Concepts and How Nurses Use Concepts to Think

Objective:

Heading: Six Steps to Thinking Using Concepts

Integrated Processes: Clinical Judgment

Client Need: Safe and Effective Care Environment: Management of Care

Cognitive Level: Application [Applying]

Concept: Clinical Judgment

Difficulty: Moderate

	Feedback
1	This is incorrect. The nurse has already identified possible causes for the patient's manifestations (analyze cues).
2	This is incorrect. The nurse cannot generate solutions until the highest priority hypothesis has been established.
3	This is incorrect. The take action step is completed after the nurse has generated solutions.
4	This is correct. Once the cues have been analyzed, the next step is to prioritize hypotheses.

6. ANS: 1

Chapter: 1, Introduction to Concepts and How Nurses Use Concepts to Think

Objective:

Heading: Exemplars > Another Application of Conceptual Thinking in Nursing > Table 1-1

Integrated Processes: Nursing Process

Client Need: Safe and Effective Care Environment: Safety and Infection Control

Cognitive Level: Comprehension [Understanding]

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Concept: Safety

Difficulty: Difficult

	Feedback
1	This is correct. Verifying patient identity before administering medications is a core safety measure to prevent medication errors, aligning directly with the concept of safety in nursing practice.
2	This is incorrect. An example of professionalism would be the nurse introducing themselves to the patient.
3	This is incorrect. "Communication" refers to therapeutic communication. The behavior demonstrated in this example best reflects the concept of safety.
4	This is incorrect. Although certain medications, such as pain relievers, may be linked to patient comfort, the behavior demonstrated in this example best reflects the concept of safety.

7. ANS: 2

Chapter: 1, Introduction to Concepts and How Nurses Use Concepts to Think

Objective:

Heading: Applying Concept Knowledge When a Conceptual Issue Is Identified

Integrated Processes: Clinical Judgment

Client Need: Safe and Effective Care Environment: Management of Care

Cognitive Level: Application [Applying]

Concept: Clinical Judgment; Safety

Difficulty: Moderate

	Feedback
1	This is incorrect. The focus at this time is on action and clinical reasoning, not classification.
2	This is correct. The next step is to determine what potential complications or problems may occur if the conceptual issues are not addressed.
3	This is incorrect. A plan of care is not developed until after the potential complications have been identified.
4	This is incorrect. While evaluating modifiable risk factors can be useful, it is not the next immediate step after identifying interconnected concepts.

8. ANS: 3

Chapter: 1, Introduction to Concepts and How Nurses Use Concepts to Think

Objective:

Heading: Six Steps to Thinking Using Concepts

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Integrated Processes: Clinical Judgment

Client Need: Safe and Effective Care Environment: Management of Care

Cognitive Level: Analysis [Analyzing]

Concept: Clinical Judgment

Difficulty: Easy

	Feedback
1	This is incorrect. Recognize and analyze cues align with steps 1 through 4 of the six steps to thinking using concepts.
2	This is incorrect. Evaluating outcomes occurs after this step.
3	This is correct. This step aligns with two steps in the CJMM: Generate solutions and take actions.
4	This is incorrect. This step occurs after cues are analyzed but before solutions are generated.

9. ANS: 2

Chapter: 1, Introduction to Concepts and How Nurses Use Concepts to Think

Objective:

Heading: Welcome to Concept-Based Learning in Nursing Education > Concept > What Is a Concept?

Integrated Processes: Teaching/Learning

Client Need: Safe and Effective Care Environment: Safety and Infection Control

Cognitive Level: Application [Applying]

Concept: Professionalism

Difficulty: Moderate

	Feedback
1	This is incorrect. Person-centered concepts focus on the patient and include family, health promotion, and self-care.
2	This is correct. Nursing practice concepts focus on caring, collaboration, communication, and professionalism, as demonstrated in this scenario.
3	This is incorrect. Psychosocial concepts include cognition, comfort, and grief and loss. These are not elements of the scenario described.
4	This is incorrect. Physiological concepts focus on immunity, nutrition, and elimination. This is not the focus of the interaction described.

10. ANS: 1

Chapter: 1, Introduction to Concepts and How Nurses Use Concepts to Think

Objective:

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Heading: Welcome to Concept-Based Learning in Nursing Education > Concept > What Is a Concept?

Integrated Processes: Nursing Process

Client Need: Physiological Integrity: Basic Care and Comfort

Cognitive Level: Application [Applying]

Concept: Professionalism

Difficulty: Moderate

	Feedback
1	This is correct. Physiological concepts focus on aspects of physiological wellness and homeostasis like thermoregulation. Performing a follow-up assessment to determine if administering acetaminophen was effective in treating the patient's fever demonstrates concept-based thinking by the student nurse.
2	This is incorrect. Psychosocial concepts focus on aspects of comfort, cognition, and addiction. This category does not include the aspects of physiological concepts.
3	This is incorrect. Person-centered concepts focus on aspects like family and growth development rather than physiological concepts like thermoregulation.
4	This is incorrect. Healthcare concepts focus on aspects such as social determinants of health and healthcare policy rather than physiological concepts like thermoregulation.

11. ANS: 2

Chapter: 1, Introduction to Concepts and How Nurses Use Concepts to Think

Objective:

Heading: How Nurses Think With Concepts

Integrated Processes: Caring

Client Need: Physiological Integrity: Basic Care and Comfort

Cognitive Level: Comprehension [Understanding]

Concept: Caring

Difficulty: Moderate

	Feedback
1	This is incorrect. Cellular regulation refers to cell growth, replication, and repair. Observing food intake is not directly related to this concept.
2	This is correct. Assessing how much the patient ate is a direct evaluation of nutritional intake.
3	This is incorrect. Simply observing food intake does not directly assess hydration status or electrolyte balance.
4	This is incorrect. Mood and affect involve emotional state and behavioral expression, which could indirectly influence appetite, but checking food intake

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	alone does not directly assess this concept.
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12. ANS: 3

Chapter: 1, Introduction to Concepts and How Nurses Use Concepts to Think

Objective:

Heading: Six Steps to Thinking Using Concepts

Integrated Processes: Nursing Process

Client Need: Physiological Integrity: Reduction of Risk Potential

Cognitive Level: Application [Applying]

Concept: Clinical Judgment

Difficulty: Moderate

	Feedback
1	This is incorrect. The nurse is not simply recalling information about hypertension; they are actively assessing for effects or complications, which goes beyond recognition of characteristics.
2	This is incorrect. The nurse is not identifying related concepts (e.g., perfusion or oxygenation) in a conceptual sense. The action is focused on assessing for complications, not mapping concept interconnections.
3	This is correct. The nurse is anticipating serious complications of hypertensive crisis (e.g., stroke, cardiac events) and assessing for their presence.
4	This is incorrect. This correlates with generating solutions and implementing a solution. The act of assessing the patient for specific symptoms is an example of predicting potential complications.

13. ANS: 4

Chapter: 1, Introduction to Concepts and How Nurses Use Concepts to Think

Objective:

Heading: So When Do Nurses Use Medical Diagnoses?

Integrated Processes: Clinical Judgment

Client Need: Safe and Effective Care: Management of Care

Cognitive Level: Comprehension [Understanding]

Concept: Clinical Judgment

Difficulty: Moderate

	Feedback
1	This is incorrect. Relying solely on a medical diagnosis may actually make prioritization seem easier (e.g., following disease-based protocols), but it risks being too narrow rather than more challenging.

2	This is incorrect. While poor assessment can indirectly contribute to nonadherence, this is not the primary risk. The main concern is omission of important, unrelated issues, not adherence outcomes.
3	This is incorrect. Relying on the diagnosis alone can lead to defaulting to standardized care pathways, which may neglect individualized assessment.
4	This is correct. The patient may be experiencing conceptual issues that are unrelated to the medical diagnosis, which may be missed if the focus is only on the medical diagnosis.

14. ANS: 2

Chapter: 1, Introduction to Concepts and How Nurses Use Concepts to Think

Objective:

Heading: Welcome to Concept-Based Learning in Nursing Education > Concept-Based Nursing Curriculum

Integrated Processes: Clinical Judgment

Client Need: Safe and Effective Care: Management of Care

Cognitive Level: Comprehension [Understanding]

Concept: Clinical Judgment

Difficulty: Easy

	Feedback
1	This is incorrect. Approaching each diagnosis individually represents a traditional, diagnosis-based approach rather than a conceptual one. A conceptual approach emphasizes underlying principles and interrelationships.
2	This is correct. Focusing on interconnected concepts like perfusion (heart failure), fluid balance (kidney disease), and mood (depression) to guide care represents concept-based care.
3	This is incorrect. Although prioritization is essential, a conceptual approach would balance multiple domains, not focus solely on the primary medical condition.
4	This is incorrect. Focusing on treating symptoms represents a disease-specific approach, which may overlook broader patterns and relationships between underlying concepts.

MULTIPLE RESPONSE

15. ANS: 1, 2, 3

Chapter: 1, Introduction to Concepts and How Nurses Use Concepts to Think

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Objective:

Heading: Welcome to Concept-Based Learning in Nursing Education > Concept > What Is a Concept?

Integrated Processes: Caring

Client Need: Safe and Effective Care Environment: Management of Care

Cognitive Level: Application [Applying]

Concept: Caring; Communication; Teaching and Learning

Difficulty: Moderate

	Feedback
1.	This is correct. Nursing practice concepts are demonstrated by the nurse's collaboration and communication with both the patient and family.
2.	This is correct. Person-centered concepts are demonstrated by the focus on health promotion and self-care.
3.	This is correct. Physiological concepts are demonstrated in the form of addressing nutrition concerns.
4.	This is incorrect. Psychosocial concepts focus more on cognition, comfort, and grief and loss.
5.	This is incorrect. Healthcare concepts focus more on healthcare systems, population health, and social determinants of health.