Test Bank for Health Assessment in Nursing 3rd Lewis

HEALTH ASSESSMENT IN NURSING

Chapter 1 – The nurse's role in health assessment: Collecting and analysing data

TEST BANK

1. An instructor is describing a comprehensive nursing health assessment to a group of students. The instructor determines that the teaching was successful when the students identify which of the following as the overall purpose?

A) Collect accurate data

B) Assist the physician

C) Validate previous data

D) Make a clinical judgement

2. Which individual typically would be responsible for collecting the subjective data on a patient during the initial comprehensive assessment?

A) Doctor

B) Nurse

C) Secretary

D) Technician

3. When discussing the nursing process with a group of students, which of the following statements best describes it?

A) Each step is independent of the others.

B) It is ongoing and continuous.

C) It is used primarily in acute care settings.

D) It involves independent nursing actions.

4. Before meeting the patient and performing a comprehensive health assessment, which of the following would be most important for the nurse to do?

A) Review the patient's medical record.

B) Obtain basic biographic data.

C) Consult essential resources.

D) Validate information with the patient.

5. Which of the following patient situations would the nurse interpret as requiring an emergency assessment?

A) A patient with sunburn.

B) A patient needing an employment physical.

C) A patient with suspected cardiac arrest.

D) A patient who wants a pregnancy test.

6. In comparison with the doctor's medical exam, the comprehensive health assessment performed by the nurse focuses on which aspect?

A) Current physiological status

B) Effect of health on lifestyle

C) Past medical history

D) Motivation for compliance

7. After teaching a group of students about the phases of the nursing process, the instructor determines that the teaching was successful when the students identify which phase as the first and most critical?

A) Assessment

B) Planning

C) Implementation

D) Evaluation

8. Following completion of the comprehensive health assessment, the nurse periodically performs a partial assessment primarily for which reason?

A) To detect any new problems.

B) Provide information for the patient's record.

C) Address areas previously omitted.

D) Determine the need for crisis intervention.

9. The nurse is working in an ambulatory care clinic. Which patient would the nurse determine to be in most need of an emergency assessment?

A) A 14-year-old girl who is crying because she thinks she is pregnant.

B) A 35-year-old man with chest pain and diaphoresis for 1 hour.

C) A 3-year-old child with fever, rash, and sore throat.

D) A 20-year-old man with an 8-centimetre shallow laceration on his leg.

10. A nurse has completed gathering some basic data about a patient and then reflects on personal feelings about the patient. The nurse does this primarily to accomplish which of the following?

A) Determine if pertinent data has been omitted

B) Identify the need for referral

C) Avoid biases and judgements

D) Construct a plan of care

11. The nurse is collecting data from a patient. Which of the following best reflects objective data?

A) Religion

B) Occupation

C) Appearance

D) Age

12. Which of the following would the nurse implement in response to a collaborative problem?

A) Encouraging oral fluids.

B) Providing a bedtime protein snack.

C) Assisting with personal hygiene.

D) Referring a patient for management of blood glucose.

13. The nurse is analysing the data obtained from the following patients. Which patient would the nurse expect to facilitate a referral?

A) An 80-year-old patient who lives with her daughter.

B) A 50-year-old patient newly diagnosed with diabetes.

C) A 3-year-old child with an acute ear infection.

D) A teenager seeking information about contraception.

14. A patient is running late for their appointment. The nurse best utilises this time to prepare for the appointment by:

A) Educating themselves about the patient's diagnosis

B) Catching up on documentation from the previous patient

C) Taking a tea break

D) Planning for tomorrow's appointments

15. Which of the following have affected the nurses' ability to perform health assessment in the past? Select all that apply.

A) Lack of time

B) Lack of confidence

C) Lack of training

D) Ward culture

16. An RN listens to a patient's chest during a physical assessment. The primary reason for the RN to perform this task is to:

A) Gather baseline data about the patient's respiratory

B) Diagnose the cause of any abnormal sounds.

C) Determine the appropriate intervention.

D) To plan therapy including exercises and breathing aids.

17. During an in-service presentation, the presenter stresses the importance of accurate and thorough documentation for which reason?

A) Guarantee a continual assessment process.

B) Identify abnormal data.

C) Assure valid conclusions from analysed data.

D) Allow for drawing inferences and identifying problems.

18. When performing the steps of the assessment phase of the nursing process, which of the following would the nurse do first?

A) Collect objective data

B) Validate the data

C) Establish rapport with the patient

D) Document the data

19. A nurse is gathering subjective data. Which of the following would the nurse be most likely to assess?

A) Feelings of happiness

B) Posture

C) Mood

D) Behaviour

20. When describing a focused assessment to a group of students, which of the following statements would the instructor use?

A) It is done before the physical exam.

B) It replaces the comprehensive data base.

C) It assesses a particular patient problem.

D) It is done after gathering subjective data.

21. The nurse is reviewing a patient's health history and physical examination. Which of the following would the nurse identify as subjective data? Select all that apply.

A) "I feel so tired sometimes"

B) Weight—66 kg

C) Lungs clear to auscultation

D) Patient complains of a headache

E) "My father died of a heart attack"

F) Pupils equal, round and reactive to light

22. The activities below reflect the steps of the nursing process. Place the activities in their proper sequence from first to last.

A) Established a rapport with the patient

B) Collecting subjective and objective data

C) Analysing data

D) Developing a plan of care

E) Carrying out a plan of care

F) Evaluating outcomes

23. After explaining the skills used to gather subjective and objective data, the instructor determines that additional teaching is needed when the students identify which of the following as a skill necessary for collecting subjective data?

A) Inspection

B) Therapeutic communication

C) Interviewing

D) Active listening

24. The nurse is performing a health assessment on patient. Which of the following would be most important for the nurse to do?

A) Focus the assessment on the patient as an individual.

B) Interpret the information about the patient in context.

C) Rely primarily on the patient's statements.

D) Gather information from a variety of sources.

25. A patient comes to the healthcare provider's office for a visit. The patient has been seen in this office for the past five years and arrives today complaining of a fever and sore throat. Which type of assessment would the nurse most likely perform?

A) Comprehensive assessment

B) Ongoing assessment

C) Focused assessment

D) Emergency assessment

Answer key

1. D

2. B

3. B

4. A
5. C
6. B
7. A
8. A
9. B
10. C
11. C
12. D
13. B
14. A
15. A, B, D
16. A
17. C
18. C
19. A
20. C
21. A, D, E
22. A, B, C, D, E
23. A
24. B
25. C