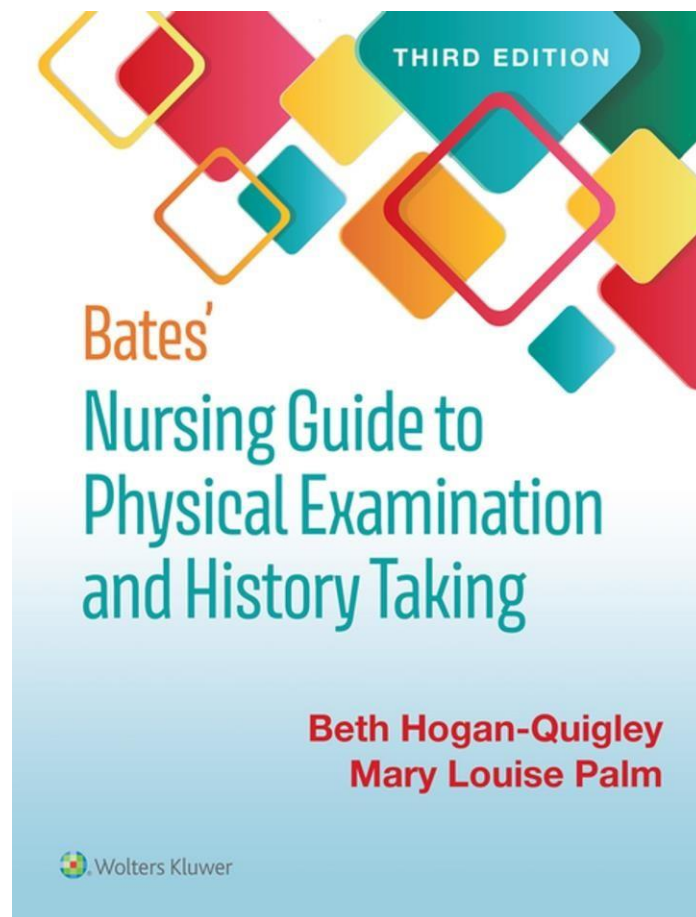


TEST BANK

Bates' Nursing Guide to Physical Examination and History Taking 3rd Edition Hogan-Quigley Test Bank



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1. During an assessment, a patient states the importance of spending quality time with family and friends. The nurse would document this information as fulfilling which facet of the patient's health?
- A) ***Social well-being***
 - B) Developmental level
 - C) Spiritual influences
 - D) Cultural influences
2. The nurse is conducting a health assessment with a patient. What will the nurse do when completing this health assessment? (Select all that apply.)
- A) ***Complete the health history.***
 - B) Interpret findings.
 - C) Formulate a plan of care
 - D) Implement a plan of care.
 - E) ***Conduct a physical examination.***
3. Before beginning a health assessment with a patient, the nurse reviews Healthy People 2020 because:
- A) It helps determine the patient's plan of care.
 - B) It serves as a guide for the health assessment.
 - C) ***It identifies risk factors, health issues, and diseases.***
 - D) It lists specific interventions to address most patient health problems.
4. After completing a health history, the nurse determines that a patient would benefit from interventions to address the Healthy People 2020 indicator prevalence and mortality of chronic disease. What did the nurse assess in this patient? (Select all that apply.)
- A) Body mass index overweight
 - B) ***History of hypertension***
 - C) Currently without health insurance
 - D) ***Diagnosed with heart disease***
 - E) ***Previous treatment for skin cancer***
5. The nurse is following a structured head-to-toe approach to identify changes in a patient's body systems. Which component of the health assessment is the nurse completing with the patient?
- A) Health history
 - B) ***Physical examination***
 - C) Goal setting
 - D) Planning care

6. While conducting the health assessment, the nurse instructs the patient about secondary prevention activities. What did the nurse most likely teach this patient?
- A) Immunizations recommended for the patient's age
 - B) Consistent use of seat belts when in a motor vehicle
 - C) Importance of annual vision examinations
 - D) *The need for annual mammograms***
7. The nurse is preparing to conduct a health assessment with a patient. What will be the nurse's initial role when caring for this patient?
- A) Teaching
 - B) Planning care
 - C) *Collecting data***
 - D) Identifying interventions
8. During the assessment of vital signs, a hospitalized patient demonstrates confusion and asks how the nurse gained access to the patient's home. The nurse recognizes this change as being in which facet of the patient's health?
- A) *Mental***
 - B) Physical
 - C) Spiritual
 - D) Social
9. From data collected during the health assessment, the nurse determines that a patient would benefit from smoking cessation information. What would be the best approach for the nurse to take when teaching smoking cessation to this patient?
- A) *Discuss with the patient if smoking cessation is a goal the patient may have.***
 - B) Explain the detrimental effects of smoking on the entire body.
 - C) Remind the patient that smoking is a modifiable risk factor for health problems.
 - D) Tell the patient that smoking is expensive and is harmful to the body.
10. During a health assessment, the nurse learns that an adolescent is sexually active. What can the nurse instruct the patient to support the Healthy People 2020 indicator of responsible sexual behavior?
- A) *The importance of using a condom with sexual activity***
 - B) The importance of abstaining from sexual activity until marriage
 - C) The frequency of being tested for sexually transmitted infections
 - D) The percentage of adolescents who are HIV positive

Answer Key

- 1.A
- 2.A, E
- 3.C
- 4.B, D, E
- 5.B
- 6.D
- 7.C
- 8.A
- 9.A
- 10.A

-
1. The nurse is working with a patient to identify health goals and interventions to achieve the goals. In which phase of the nursing process are the nurse and patient participating?
 - A) Assessment
 - B) Diagnosis
 - C) *Planning***
 - D) Evaluation

 2. The nurse is changing a patient's plan of care because identified goals have not been achieved. The nurse is working within which phase of the nursing process?
 - A) Assessment
 - B) Planning
 - C) Implementation
 - D) *Evaluation***

 3. During an assessment, the nurse asks a patient with low back pain what has been used to try to alleviate the pain. The nurse is asking questions to determine which category of the mnemonic OLD CART?
 - A) *Treatments***
 - B) Duration
 - C) Location
 - D) Onset

 4. The nurse is completing an assessment of a patient with cardiac and respiratory problems. Which data would the nurse categorize as subjective?
 - A) Blood pressure 168/94 mm Hg
 - B) Respiratory rate 28 and shallow
 - C) Heart rate 94 and irregular
 - D) *Palpitations every morning***

 5. After completing an assessment, the nurse is generating the patient's problem list. Which problem would have the highest priority for the patient?
 - A) *Shoulder pain***
 - B) Insomnia
 - C) Anxiety about work
 - D) Lack of appetite

 6. The nurse has identified that a patient has 24 health issues to be included on the problem list. What can the nurse do to help focus on the patient's most acute health care needs first?
 - A) Place the problems in alphabetical order.

- B)** *Separate the list into active and inactive problems.*
- C) List the problems according to body system.
- D) Ask the patient which problem is the highest priority.

7. The nurse is determining diagnoses that would be appropriate for a patient with heart failure. Which diagnosis would have the highest priority for the patient?

- A)** *Activity intolerance related to shortness of breath and fatigue*
- B)** Ineffective health maintenance related to last mammogram being 2 years ago
- C) Knowledge deficit related to lack of information regarding low-sodium diet
- D)** Anxiety related to hospitalization and inability to attend to home and work needs

8. The nurse is developing nursing diagnosis for a patient. Which health concerns would be appropriate for the nurse to identify as health maintenance problems? (Select all that apply.)

- A) Prescribed medication to treat prostate cancer
- B)** *Instruction needed on newly prescribed renal diet*
- C)** *Importance of having pneumococcal pneumonia vaccination*
- D)** *Exercises for range of motion and mobility due to arthritis*
- E) Schedule for hemodialysis to start three times each week

9. The nurse has completed a plan of care for a patient having a total knee replacement. What should the nurse do prior to implementing this plan of care?

- A) Discuss the plan of care with the nurse manager.
- B) Share the assessment and plan with the admitting health care provider.
- C)** *Ask the patient for opinions and willingness to proceed with the interventions.*
- D) Identify which quality improvement activities will be included in the plan of care.

10. After reassessing a patient with a foot wound, the nurse identifies a new health problem of reduced breath sounds in both lung bases. What should the nurse do with this information? (Select all that apply.)

- A) Notify the nurse manager.
- B)** *Formulate a nursing diagnosis.*
- C)** *Add interventions to the care plan.*
- D)** *Add the new problem to the problem list.*
- E) Nothing because this is an expected finding.