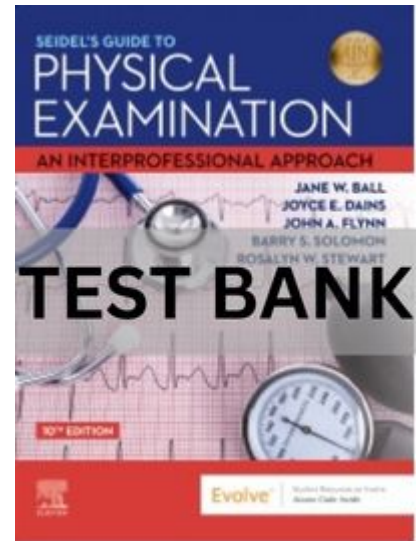


Chapter 01: Cultural Competency

Ball: Seidel's Guide to Physical Examination, 10th Edition



MULTIPLE CHOICE

1. Which statement is *true* regarding the relationship of physical characteristics and culture?
 - a. Physical characteristics should be used to identify members of cultural groups.
 - b. There is a difference between distinguishing cultural characteristics and distinguishing physical characteristics.
 - c. To be a member of a specific culture, an individual must have certain identifiable physical characteristics.
 - d. Gender and race are the two essential physical characteristics used to identify cultural groups.

ANS: B

Physical characteristics are not used to identify cultural groups; there is a difference between the two, and they are considered separately. Physical characteristics should not be used to identify members of cultural groups. To be a member of a specific culture, an individual does not need to have certain identifiable physical characteristics. You should not confuse physical characteristics with cultural characteristics. Gender and race are physical characteristics, not cultural characteristics, and are not used to identify cultural groups.

DIF: Cognitive Level: Understanding (Comprehension)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

2. An image of any group that rejects its potential for originality or individuality is known as a(n)
 - a. acculturation.
 - b. norm.
 - c. stereotype.
 - d. ethnos.

ANS: C

A fixed image of any group that rejects its potential for originality or individuality is the definition of stereotype. Acculturation is the process of adopting another culture's behaviors. A norm is a standard of allowable behavior within a group. Ethnos implies the same race or nationality.

Seidel's Guide to Physical Examination: An Interprofessional Approach 10th Edition Test Bank

DIF: Cognitive Level: Remembering (Knowledge)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

3. Mr. L presents to the clinic with severe groin pain and a history of kidney stones. Mr. L's son tells you that for religious reasons, his father wishes to keep any stone that is passed into the urine filter that he has been using. What is your most appropriate response?
- "With your father's permission, we will examine the stone and request that it be returned to him."
 - "The stone must be sent to the lab for examination and therefore cannot be kept."
 - "We cannot let him keep his stone because it violates our infection control policy."
 - "We don't know yet if your father has another kidney stone, so we must analyze this one."

ANS: A

We should be willing to modify the delivery of health care in a manner that is respectful and in keeping with the patient's cultural background. "With your father's permission, we will examine the stone and request that it be returned to him" is the most appropriate response. "The stone must be sent to the lab for examination and therefore cannot be kept" and "We don't know yet if your father has another kidney stone, so we must analyze this one" do not support the patient's request. "We cannot let him keep his stone because it violates our infection control policy" does not provide a reason that it would violate an infection control policy.

DIF: Cognitive Level: Analyzing (Analysis)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

4. The motivation of the healthcare professional to "want to" engage in the process of becoming culturally competent, not "have to," is called
- cultural knowledge.
 - cultural awareness.
 - cultural desire.
 - cultural skill.

ANS: C

Cultural encounters are the continuous process of interacting with patients from culturally diverse backgrounds to validate, refine, or modify existing values, beliefs, and practices about a cultural group and to develop cultural desire, cultural awareness, cultural skill, and cultural knowledge. Cultural awareness is deliberate self-examination and in-depth exploration of one's biases, stereotypes, prejudices, assumptions, and "-isms" that one holds about individuals and groups who are different from them. Cultural knowledge is the process of seeking and obtaining a sound educational base about culturally and ethnically diverse groups. Cultural skill is the ability to collect culturally relevant data regarding the patient's presenting problem, as well as accurately performing a culturally based physical assessment in a culturally sensitive manner. Cultural desire is the motivation of the healthcare professional to want to engage in the process of becoming culturally competent, not have to.

DIF: Cognitive Level: Understanding (Comprehension)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

5. Mr. Marks is a 66-year-old patient who presents for a physical examination to the clinic. Which question has the most potential for exploring a patient's cultural beliefs related to a health problem?

- a. "How often do you have medical examinations?"
- b. "What is your age, race, and educational level?"
- c. "What types of symptoms have you been having?"
- d. "Why do you think you are having these symptoms?"

ANS: D

"Why do you think you are having these symptoms?" is an open-ended question that avoids stereotyping, is sensitive and respectful toward the individual, and allows for cultural data to be exchanged. The other questions do not explore the patient's cultural beliefs about health problems.

DIF: Cognitive Level: Analyzing (Analysis)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

6. The definition of ill or sick is based on a
 - a. stereotype.
 - b. cultural behavior.
 - c. belief system.
 - d. cultural attitude.

ANS: C

The definition of ill or sick is based on the individual's belief system and is determined in large part by his or her enculturation.

DIF: Cognitive Level: Understanding (Comprehension)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

7. A 22-year-old female nurse is interviewing an 86-year-old male patient. The patient avoids eye contact and answers questions only by saying, "Yeah," "No," or "I guess so." Which of the following is appropriate for the interviewer to say or ask?
 - a. "We will be able to communicate better if you look at me."
 - b. "It's hard for me to gather useful information because your answers are so short."
 - c. "Are you uncomfortable talking with me?"
 - d. "Does your religion make it hard for you to answer my questions?"

ANS: C

It is all right to ask if the patient is uncomfortable with any aspect of your person and to talk about it; the other choices are less respectful.

DIF: Cognitive Level: Applying (Application)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

8. As you explain your patient's condition to her husband, you notice that he is leaning toward you and pointedly blinking his eyes. Knowing that he is from England, your most appropriate response to this behavior is to
 - a. tell him that you understand his need to be alone.
 - b. ask whether he has any questions.
 - c. ask whether he would prefer to speak to the clinician.
 - d. tell him that it is all right to be angry.

ANS: B

The English worry about being overheard and tend to speak in modulated voices so, when they lean in toward you, they are probably poised to ask a question.

DIF: Cognitive Level: Analyzing (Analysis)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

9. An aspect of traditional Western medicine that may be troublesome to many Hispanics, Native Americans, Asians, and Middle Eastern groups is Western medicine's attempts to
- use a holistic approach that views a particular medical problem as part of a bigger picture.
 - determine a specific cause for every problem in a precise way.
 - establish harmony between a person and the entire cosmos.
 - restore balance in an individual's life.

ANS: B

A more scientific approach to healthcare problem solving, in which a cause can be determined for every problem in a precise way, is a Western approach. Hispanics, Native Americans, Asians, and Arabs embrace a more holistic approach. Using a holistic approach, establishing harmony between a person and the entire cosmos, and restoring balance in an individual's life would not be troublesome to many Hispanics, Native Americans, Asians, and Arabs.

DIF: Cognitive Level: Understanding (Comprehension)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

10. The attitudes of the healthcare professional
- are largely irrelevant to the success of relationships with the patient.
 - do not influence patient behavior.
 - are difficult for the patient to sense.
 - are culturally derived.

ANS: D

The attitudes of the healthcare provider are foundationally derived from his or her own culture; understanding this is relevant to the success of patient relationships. Attitudes of the healthcare professional are easily detected by others, and they influence patient behavior; they are not irrelevant to the success of relationships with the patient; they do influence patient behavior; and they are not difficult for the patient to sense.

DIF: Cognitive Level: Understanding (Comprehension)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

11. Mr. Sanchez is a 45-year-old gentleman who has presented to the office for a physical examination to establish a new primary care healthcare provider. Which of the following describes a physical, not a cultural, differentiator?
- Race
 - Rite
 - Ritual
 - Norm

ANS: A

Race is a physical, not a cultural, differentiator. Rite is a prescribed, formal, customary observance. Ritual is a stereotypic behavior regulating religious, social, and professional behaviors. A norm is a prescribed standard of allowable behavior within a group.

DIF: Cognitive Level: Remembering (Knowledge)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

12. Mr. Abdul is a 40-year-old Middle Eastern man who presents to the office for a first visit with the complaint of new abdominal pain. You are concerned about violating a cultural prohibition when you prepare to do his rectal examination. The best tactic would be to
- forego the examination for fear of violating cultural norms.
 - ask a colleague from the same geographic area if this examination is acceptable.
 - inform the patient of the reason for the examination and ask if it is acceptable to him.
 - refer the patient to a provider more knowledgeable about cultural differences.

ANS: C

Asking, if you are not sure, is far better than making a damaging mistake. Not completing the examination could cause the patient further harm. Asking a colleague from the same geographic area if this examination is acceptable may not be appropriate. Referring the patient to a provider more knowledgeable about cultural differences at this point is unnecessary.

DIF: Cognitive Level: Applying (Application)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

13. Mr. Jones is a 45-year-old patient who presents to the office. A person's definition of illness is likely to be most influenced by
- race.
 - socioeconomic class.
 - enculturation.
 - age group.

ANS: C

The definition of illness is determined in large part by the individual's enculturation (the process whereby an individual assumes the traits and behaviors of a given culture).

DIF: Cognitive Level: Understanding (Comprehension)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

14. As the healthcare provider, you are informing a patient that he or she has a terminal illness. This discussion is most likely to be discouraged in which cultural group?
- Navajo Native Americans
 - Dominant Americans
 - First-generation African descendants
 - First-generation European descendants

ANS: A

The Navajo culture believes that thought and language have the power to shape reality; the desire to avoid discussing negative information is particularly strong in this culture.

DIF: Cognitive Level: Understanding (Comprehension)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

15. Because of common cultural food preferences, avoidance of monosodium glutamate (MSG) is likely to be most problematic for the hypertensive patient of which group?
- Native Americans
 - Hispanics
 - Chinese
 - Italians

ANS: C

The Chinese are most likely to use MSG and soy sauce in their diet.

DIF: Cognitive Level: Understanding (Comprehension)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

16. An example of a cold condition is
- a fever.
 - a rash.
 - tuberculosis.
 - an ulcer.

ANS: C

A cold condition in cultures with a holistic approach is tuberculosis.

DIF: Cognitive Level: Remembering (Knowledge)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

MULTIPLE RESPONSE

1. Which variables can intrude on successful communication? (*Select all that apply.*)
- Social class
 - Gender
 - Stereotype
 - Phenotype
 - Age

ANS: A, B, E

Social class, age, and gender are variables that characterize everyone; they can intrude on successful communication if there is no effort for mutual knowledge and understanding.

DIF: Cognitive Level: Understanding (Comprehension)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

2. Campinha-Bacote's Process of Cultural Competence Model includes which cultural constructs? (*Select all that apply.*)
- Desire
 - Awareness
 - Thought processes
 - Skill
 - Language

ANS: A, B, D

Campinha-Bacote's Process of Cultural Competence Model includes the cultural constructs encounters, desires, awareness, knowledge, and skill.

DIF: Cognitive Level: Understanding (Comprehension)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

Chapter 02: The History and Interviewing Process

Ball: Seidel's Guide to Physical Examination, 10th Edition

MULTIPLE CHOICE

1. Which question would be considered a “leading question?”
 - a. “What do you think is causing your headaches?”
 - b. “You don’t get headaches often, do you?”
 - c. “On a scale of 1 to 10, how would you rate the severity of your headaches?”
 - d. “At what time of the day are your headaches the most severe?”

ANS: B

Stating to the patient that he or she does not get headaches would limit the information in the patient’s answer. Asking the patient what he or she thinks is causing the headaches is an open-ended question. Asking the patient how he or she would rate the severity of the headaches and asking what time of the day the headaches are the most severe are direct questions.

DIF: Cognitive Level: Applying (Application)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

2. When are open-ended questions generally most useful?
 - a. During sensitive area part of the interview
 - b. After several closed-ended questions have been asked
 - c. While designing the genogram
 - d. During the review of systems

ANS: A

Asking open-ended questions during the sensitive part of the interview allows you to gather more information and establishes you as an empathic listener, which is the first step of effective communication. Asking closed-ended questions may stifle the patient’s desire to discuss the history of the illness. Interviewing for the purpose of designing a genogram or conducting a review of systems requires more focused data than can be more easily gathered with direct questioning.

DIF: Cognitive Level: Understanding (Comprehension)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

3. Periods of silence during the interview can serve important purposes, such as
 - a. allowing the clinician to catch up on documentation.
 - b. promoting calm.
 - c. providing time for reflection.
 - d. increasing the length of the visit.

ANS: C

Silence is a useful tool during interviews for the purposes of reflection, summoning courage, and displaying compassion. This is not a time to document in the chart, but rather to focus on the patient. Periods of silence may cause anxiety rather than promote calm. The length of the visit is less important than getting critical information.

DIF: Cognitive Level: Understanding (Comprehension)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

4. Mr. Franklin is speaking with you, the healthcare provider, about his respiratory problem. Mr. Franklin says, "I've had this cough for 3 days, and it's getting worse." You reply, "Tell me more about your cough." Mr. Franklin states, "I wish I could tell you more. That's why I'm here. You tell me what's wrong!" Which caregiver response would be most appropriate for enhancing communication?
- "After 3 days, you're tired of coughing. Have you had a fever?"
 - "I'd like to hear more about your experiences. Where were you born?"
 - "I don't know what's wrong. You could have almost any disease."
 - "I'll examine you and figure out later what the problem is."

ANS: A

"After 3 days, you're tired of coughing. Have you had a fever?" is the only response aimed at focusing on the chief complaint to gather more data and does not digress from the issue.

DIF: Cognitive Level: Analyzing (Analysis)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

5. After you ask a patient about her family history, she says, "Tell me about your family now." Which response is generally most appropriate?
- Ignore the patient's comment and continue with the interview.
 - Give a brief, undetailed answer.
 - Ask the patient why she needs to know.
 - Tell the patient that you do not discuss your family with patients.

ANS: B

Giving a brief, undetailed answer will satisfy the patient's curiosity about yourself without invading your private life. Ignoring the patient's comment, continuing with the interview, and telling the patient that you do not discuss your family with patients will potentially anger or frustrate her and keep her from sharing openly. Asking the patient why she needs to know will distract from the real reason she is seeking care and instead move the interview conversation away from the topics that should be discussed.

DIF: Cognitive Level: Applying (Application)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

6. A 36-year-old woman complains that she has had crushing chest pain for the past 2 days. She seems nervous as she speaks to you. An appropriate response is to
- continue to collect information regarding the chief complaint in an unhurried manner.
 - finish the interview as rapidly as possible.
 - ask the patient to take a deep breath and calm down.
 - ask the patient if she wants to wait until another day to talk to you.

ANS: A

With an anxious, vulnerable patient, it is best to not hurry; a calm demeanor will communicate caring to the patient. If you as a healthcare provider are hurried, the patient will be more anxious. The best way to assist an anxious patient is to not hurry and remain calm, because this will communicate caring to the patient. Asking the patient if she wants to wait until another day to talk to you delays the needed health care.

DIF: Cognitive Level: Applying (Application)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

7. Ms. A states, "My life is just too painful. It isn't worth it." She appears depressed. Which one of the following statements is the most appropriate caregiver response?
- "Try to think about the good things in life."
 - "What in life is causing you pain?"
 - "You can't mean what you're saying."
 - "If you think about it, nothing is worth getting this upset about."

ANS: B

Specific but open-ended questions are best used when the patient has feelings of loss of self-worth and depression. "Try to think about the good things in life," "You can't mean what you're saying," and "If you think about it, nothing is worth getting this upset about" are statements that will hurry the patient and offer only superficial assurance.

DIF: Cognitive Level: Analyzing (Analysis)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

8. You are collecting a history from a 16-year-old girl. Her mother is sitting next to her in the examination room. When collecting history from older children or adolescents, they should be
- given the opportunity to be interviewed without the parent at some point during the interview.
 - mailed a questionnaire in advance to avoid the need for them to talk.
 - ignored while you address all questions to the parent.
 - allowed to direct the flow of the interview.

ANS: A

The adolescent should be given the opportunity to give information directly. This enhances the probability that the adolescent will follow your advice. Mailing a questionnaire in advance to avoid the need for her to talk does not assist the adolescent in learning to respond to answers regarding her health. The parent can help fill in gaps at the end. If she is ignored while you address all questions to the parent, the patient will feel as though she is just being discussed and is not part of the process for the health care. The healthcare provider should always direct the flow of the interview according to the patient's responses.

DIF: Cognitive Level: Applying (Application)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

9. Information that is needed during the initial interview of a pregnant woman includes all the following *except*
- the gender that the woman hopes the baby will be.
 - past medical history.
 - healthcare practices.
 - the woman's remembering (knowledge) about pregnancy.

ANS: A

The initial interview for the pregnant woman should include information about her past medical history, assessment of health practices, identification of potential risk factors, and assessment of remembering (knowledge) as it affects the pregnancy. The gender of the fetus is not as important as the information about her past medical history, healthcare practices, and the woman's remembering (knowledge) about her pregnancy.

DIF: Cognitive Level: Understanding (Comprehension)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

10. When interviewing older adults, the examiner should
- speak extremely loudly, because most older adults have significant hearing impairment.
 - provide a written questionnaire in place of an interview.
 - position himself or herself facing the patient.
 - dim the lights to decrease anxiety.

ANS: C

The healthcare provider should position himself or herself so that the older patient can see his or her face. Shouting distorts speech, dimming the lights impairs vision, and a written interview may be necessary if all else fails.

DIF: Cognitive Level: Understanding (Comprehension)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

11. To what extent should the patient with a physical disability or emotional disorder be involved in providing health history information to the health professional?
- The patient should be present during information collection but should not be addressed directly.
 - All information should be collected from past records and family members while the patient is in another room.
 - The patient should be involved only when you sense that he or she may feel ignored.
 - The patient should be fully involved to the limit of his or her ability.

ANS: D

Patients who are disabled may not give an effective history, but they must be respected, and the history must be obtained from them to the greatest extent possible. Patients should be addressed directly and participate in the interview to the extent of their ability.

DIF: Cognitive Level: Understanding (Comprehension)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

12. When taking a history, the nurse should
- ask the patient to give you any information he or she can recall about his or her health.
 - start the interview with the patient's family history.
 - use a chronologic and sequential framework.
 - use a holistic and eclectic structure.

ANS: C

To give structure to the present problem or chief complaint, the provider should proceed in a chronologic and sequential framework. Asking patients to give any information they can recall about their health and using a holistic and eclectic structure do not provide structure to the history. Gathering the patient's family history is only the first step.

DIF: Cognitive Level: Understanding (Comprehension)

OBJ: Nursing process—assessment MSC: Physiologic Integrity: Physiologic Adaptation

13. When questioning the patient regarding his or her sexual history, which question should be asked *initially*?
- “Do you have any particular sexual likes or dislikes?”
 - “Do you have any worries or concerns regarding your sexual life?”