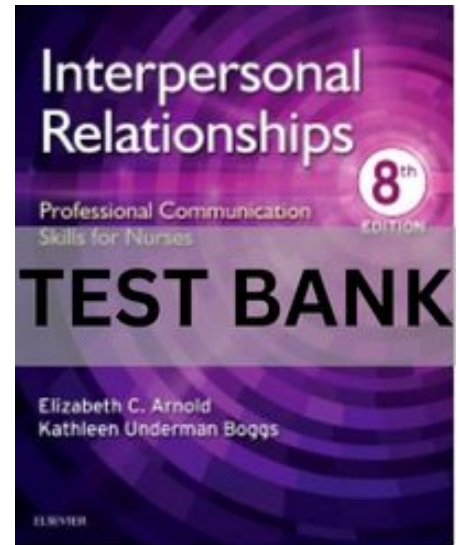


Chapter 01: Historical Perspectives and Contemporary Dynamics
Arnold: Interpersonal Relationships, 8th Edition



MULTIPLE CHOICE

1. When describing nursing to a group of nursing students, the nursing instructor lists all of the following characteristics of nursing except
 - a. historically nursing is as old as mankind.
 - b. nursing was originally practiced informally by religious orders dedicated to care of the sick.
 - c. nursing was later practiced in the home by female caregivers with no formal education.
 - d. nursing has always been identifiable as a distinct occupation.

ANS: A

Historically, nursing is as old as humankind. Originally practiced informally by religious orders dedicated to care of the sick and later in the home by female caregivers with no formal education, nursing was not identifiable as a distinct occupation until the 1854 Crimean War. There, Florence Nightingale's *Notes on Nursing* introduced the world to the functional roles of professional nursing and the need for formal education.

DIF: Cognitive Level: Comprehension TOP: Step of the Nursing Process: All Phases
MSC: Client Needs: Psychosocial Integrity

2. The nursing profession's first nurse researcher, who served as an early advocate for high-quality care and used statistical data to document the need for hand washing in preventing infection, was
 - a. Abraham Maslow.
 - b. Martha Rogers.
 - c. Hildegard Peplau.
 - d. Florence Nightingale.

ANS: D

An early advocate for high-quality care, Florence Nightingale's use of statistical data to document the need for hand washing in preventing infection marks her as the profession's first nurse researcher.

DIF: Cognitive Level: Knowledge TOP: Step of the Nursing Process: All Phases
MSC: Client Needs: Management of Care

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3. Today, professional nursing education begins at the
- undergraduate level.
 - graduate level.
 - advanced practice level.
 - administrative level.

ANS: A

Today, professional nursing education begins at the undergraduate level, with a growing number of nurses choosing graduate studies to support differentiated practice roles and/or research opportunities. Nurses are prepared to function as advanced practice nurse practitioners, administrators, and educators.

DIF: Cognitive Level: Comprehension TOP: Step of the Nursing Process: All Phases
MSC: Client Needs: Management of Care

4. Nursing's metaparadigm, or worldview, distinguishes the nursing profession from other disciplines and emphasizes its unique functional characteristics. The four key concepts that form the foundation for all nursing theories are
- caring, compassion, health promotion, and education.
 - respect, integrity, honesty, and advocacy.
 - person, environment, health, and nursing.
 - nursing, teaching, caring, and health promotion.

ANS: C

Individual nursing theories represent different interpretations of the phenomenon of nursing, but central constructs—person, environment, health, and nursing—are found in all theories and models. They are referred to as nursing's *metaparadigm*.

DIF: Cognitive Level: Knowledge TOP: Step of the Nursing Process: All Phases
MSC: Client Needs: Management of Care

5. When admitting a patient to the medical-surgical unit, the nurse asks the patient about *cultural* issues. The nurse is demonstrating use of the *concept* of
- person.
 - environment.
 - health.
 - nursing.

ANS: B

The concept of *environment* includes all cultural, developmental, and social determinants that influence a patient's health perceptions and behavior. A *person* is defined as the recipient of nursing care, having unique bio-psycho-social and spiritual dimensions. The word *health* derives from the word *whole*. Health is a multidimensional concept, having physical, psychological, sociocultural, developmental, and spiritual characteristics. The World Health Organization (WHO, 1946) defines *health* as "a state of complete physical, mental, social well-being, not merely the absence of disease or infirmity." *Nursing* includes the promotion of health, prevention of illness, and the care of ill, disabled, and dying people.

DIF: Cognitive Level: Application TOP: Step of the Nursing Process: Assessment
MSC: Client Needs: Psychosocial Integrity

6. A young mother tells the nurse, "I'm worried because my son needs a blood transfusion. I don't know what to do, because blood transfusions cause AIDS." Which central nursing construct is represented in this situation?
- Environment
 - Caring
 - Health
 - Person

ANS: D

The concept of *environment* includes all cultural, developmental, and social determinants that influence a patient's health perceptions and behavior. *Caring* is not one of the four central nursing constructs. The word *health* derives from the word *whole*. Health is a multidimensional concept, having physical, psychological, sociocultural, developmental, and spiritual characteristics. The World Health Organization (WHO, 1946) defines *health* as "a state of complete physical, mental, social well-being, not merely the absence of disease or infirmity." Nursing includes the promotion of health, prevention of illness, and the care of ill, disabled, and dying people. *Person* is defined as the recipient of nursing care, having unique bio-psycho-social and spiritual dimensions.

DIF: Cognitive Level: Application TOP: Step of the Nursing Process: Implementation
MSC: Client Needs: Psychosocial Integrity

7. The nurse performs a dressing change using sterile technique. This is an example of which pattern of knowledge?
- Empirical
 - Personal
 - Aesthetic
 - Ethical

ANS: A

Empirical knowledge is the scientific rationale for skilled nursing interventions. *Personal* ways of knowing allow the nurse to understand and treat each individual as a unique person. *Aesthetic* ways of knowing allow the nurse to connect in different and more meaningful ways. *Ethical* ways of knowing refer to the moral aspects of nursing.

DIF: Cognitive Level: Comprehension TOP: Step of the Nursing Process: Implementation
MSC: Client Needs: Management of Care

8. The nurse-patient relationship as described by Hildegard Peplau
- would not be useful in a short-stay unit.
 - allows personal and social growth to occur only for the patient.
 - facilitates the identification and accomplishment of therapeutic goals.
 - focuses on maintaining a personal relationship between the nurse and the patient.

ANS: C

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Hildegard Peplau offers the best-known nursing model for the study of interpersonal relationships in health care. Her model describes how the nurse-patient relationship can facilitate the identification and accomplishment of therapeutic goals to enhance patient and family well-being. In contemporary practice, Peplau's framework is more applicable today in longer term relationships, and in settings such as rehabilitation centers, long-term care, and nursing homes. Despite the brevity of the alliances in acute care settings, basic principles of being a participant observer in the relationship, building rapport, developing a working partnership, and terminating a relationship remain relevant.

DIF: Cognitive Level: Knowledge TOP: Step of the Nursing Process: All Phases
MSC: Client Needs: Psychosocial Integrity

9. The identification phase of the nurse-patient relationship
- sets the stage for the rest of the relationship.
 - correlates with the assessment phase of the nursing process.
 - focuses on therapeutic goals to enhance patient and family well-being.
 - uses community resources to help resolve health care issues.

ANS: C

Hildegard Peplau offers the best-known nursing model for the study of interpersonal relationships in health care. Her model describes how the nurse-patient relationship can facilitate the identification and accomplishment of therapeutic goals to enhance patient and family well-being.

DIF: Cognitive Level: Knowledge TOP: Step of the Nursing Process: Implementation
MSC: Client Needs: Management of Care

10. Which of the following is NOT a specific way interpersonal health communication impacts health care service quality?
- More effective diagnosis and earlier recognition of health changes.
 - Better understanding of the patient's condition.
 - Development of a workable treatment partnership.
 - Each communicator constructs a mental picture of the other during the conversation.

ANS: D

Communication between health care providers and patients impacts the way care is delivered; it is as important as the care itself. Outcomes of effective interpersonal communication in health care relate to higher patient satisfaction and productive health changes.

DIF: Cognitive Level: Applying TOP: Step of the Nursing Process: All Phases
MSC: Client Needs: Management of Care

11. Which of the following statements about communication theory is true?
- Primates are able to learn new languages to share ideas and feelings.
 - Concepts include only verbal communication.
 - Perceptions are clarified through feedback.
 - Past experience does not influence communication.

ANS: C

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Feedback is the only way to know that one's perceptions about meanings are valid. Human communication is unique. Only human beings have large vocabularies and are capable of learning new languages as a means of sharing their ideas and feelings. Communication includes language, gestures, and symbols to convey intended meaning, exchange ideas and feelings, and to share significant life experience. To encode a message appropriately requires a clear understanding of the receiver's mental frame of reference (e.g., feelings, personal agendas, past experiences) and knowledge of its purpose or intent of the communication.

DIF: Cognitive Level: Knowledge TOP: Step of the Nursing Process: Assessment
MSC: Client Needs: Psychosocial Integrity

12. In the circular transactional model of communication,
- questions are framed in order to recognize the context of the message.
 - people take only complementary roles in the communication.
 - the context of the communication is unimportant.
 - the purpose of communication is to influence the receiver.

ANS: A

A circular model expands linear models to include the context of the communication, feedback loops, and validation. With this model, the sender and receiver construct a mental picture of the other, which influences the message and includes perceptions of the other person's attitude and potential reaction to the message.

DIF: Cognitive Level: Comprehension TOP: Step of the Nursing Process: All Phases
MSC: Client Needs: Psychosocial Integrity

13. The nurse recognizes that feedback loops
- do not allow for correction of original information.
 - are solely based on the General Systems Theory.
 - do not allow for validation of information.
 - allow the human system to correct its original information.

ANS: D

Feedback (from the receiver or the environment) allows the system to correct or maintain its original information. Feedback loops (from the receiver, or the environment) validate the information, or allow the human system to correct its original information. General Systems Theory, initially described by Ludwig von Bertalanffy (1968), focuses on process and interconnected relationships comprising the "whole."

DIF: Cognitive Level: Knowledge TOP: Step of the Nursing Process: All Phases
MSC: Client Needs: Psychosocial Integrity

14. Which of the following statements best represents therapeutic communication when a student discovers a patient crying in bed?
- "I am the nurse who will be doing your treatments today."
 - "Will you listen to me so I can help you get better?"
 - "This is what is going to happen during surgery."
 - "Can we talk about what seems to be bothering you?"

ANS: D

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Asking about what is bothering the patient is goal directed. Its purpose is to promote patient well-being. “I am the nurse who will be doing your treatments today” is a statement of fact, and it ignores the patient’s emotional needs. “Will you listen to me so I can help you get better?” is not goal directed and does not involve mutuality. “This is what is going to happen during surgery” is simply one way. It does not engage the patient in a therapeutic manner.

DIF: Cognitive Level: Application TOP: Step of the Nursing Process: Assessment
MSC: Client Needs: Psychosocial Integrity

15. The central constructs of person, environment, health, and nursing are found in all nursing theories and models and are referred to as
- telehealth.
 - the medical model.
 - nursing’s metaparadigm.
 - five core areas of competency.

ANS: C

Individual nursing theories represent different interpretations of the phenomenon of nursing, but central constructs—person, environment, health, and nursing—are found in all theories and models. They are referred to as nursing’s *metaparadigm*. These constructs are the “metalanguage” of nursing, and together they act as basic building blocks for the discipline of professional nursing. *Telehealth* is fast becoming an integral part of the health care system, used both as a live interactive mechanism (particularly in remote areas, where there is a scarcity of health care providers) and as a way to track clinical data. Two important outcomes are reduced health costs and increased access to care. During the last century, the bulk of professional care was delivered in acute care settings, based on the disease-focused *medical model*. Switching to today’s community focus recognizes the fact that chronic medical conditions account for most of today’s care, with most being treated in the community. The IOM report *Health professions education: A bridge to quality (2003)* calls for the restructuring of clinical education responsive to the 21st century health system transformation goals of providing the highest quality and safest medical care possible. This report identified five core areas of competency required to cross the bridge to quality.

DIF: Cognitive Level: Comprehension TOP: Step of the Nursing Process: All Phases
MSC: Client Needs: Health Promotion and Maintenance

MULTIPLE RESPONSE

1. The discipline of nursing has “a unique perspective, a distinct way of viewing all phenomena, which ultimately defines and limits the nature of its inquiry,” related to (*Select all that apply.*)
- principles and laws that govern the life processes, well-being, and optimum functioning of human beings, sick or well.
 - patterning of human behavior in interaction with the environment in critical life situations.
 - processes by which positive changes in health status are affected.
 - processes by which negative changes in health status are affected.
 - patterning of human behavior in interaction with the environment in every life situation.
 - principles and laws that govern the life processes, well-being, and optimum functioning of human beings, in relation to wellness only.

ANS: A, B, C

Donaldson and Crowley characterize the discipline of nursing as having “a unique perspective, a distinct way of viewing all phenomena, which ultimately defines and limits the nature of its inquiry,” related to “Principles and laws that govern the life processes, well-being, and optimum functioning of human beings, sick or well; patterning of human behavior in interaction with the environment in critical life situations; and processes by which positive changes in health status are affected.”

DIF: Cognitive Level: Application TOP: Step of the Nursing Process: Implementation
MSC: Client Needs: Health Promotion and Maintenance

Chapter 02: Clarity and Safety in Communication
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MULTIPLE CHOICE

1. A nurse manager is teaching a group of nurses about patient safety. The nurse manager teaches the nurses that safety is defined as “avoidance, prevention, and amelioration of adverse outcomes or injuries stemming from the process of health care itself.” What is the source of this definition?
 - a. Hippocratic oath
 - b. National Patient Safety Foundation
 - c. American Association of Colleges of Nursing
 - d. American Nurses Association’s Code of Ethics

ANS: B

The National Patient Safety Foundation defines safety as “avoidance, prevention, and amelioration of adverse outcomes or injuries stemming from the process of healthcare itself.”

DIF: Cognitive Level: Knowledge TOP: Step of the Nursing Process: All Phases
MSC: Client Needs: Management of Care

2. When conducting an in-service on serious medical errors, the nurse teaches that nearly 70% of sentinel events are related to
 - a. lack of education.
 - b. inadequate resources.
 - c. minimal rest periods.
 - d. miscommunication.

ANS: D

Multiple studies have pinpointed miscommunication as a major causative agent in sentinel events, that is, errors resulting in unnecessary death and serious injury. Miscommunication is the root cause in nearly 70% of sentinel events.

DIF: Cognitive Level: Understanding TOP: Step of the Nursing Process: All Phases
MSC: Client Needs: Management of Care

3. When working on a nursing unit, the nurse recognizes that incomplete communication errors most often occur during
 - a. staff meetings.
 - b. the night shift.
 - c. a handoff procedure.

d. medication administration.

ANS: C

It is estimated that 70% of reported errors are preventable. "Preventable" means the error occurs through a medical intervention, not because of the patient's illness. Fatigue is repeatedly cited as a factor contributing to errors. The most common cause of error is incomplete communication during the very many "handoffs" transferring responsibility for client care to another care provider, another unit, or agency. It is estimated that in one day a client may experience up to eight handoffs.

DIF: Cognitive Level: Understanding TOP: Step of the Nursing Process: All Phases

MSC: Client Needs: Management of Care

4. A student nurse is learning about how to reduce errors and increase safety. The nursing instructor recognizes that further teaching is warranted when the student nurse states which of the following?
- "When communicating with patients, I will be clear."
 - "I will be timely in my communication with patients."
 - "I will promote communication with patients that is ambiguous."
 - "When communicating with patients, I will ensure the patient understood."

ANS: C

Standardization of communication is an effective tool to avoid incomplete or misleading messages. Standardization needs to be institutionalized at the system level and implemented consistently at the staff level. Safe communication about patient care matters needs to be clear, unambiguous, timely, accurate, complete, open, and understood by the recipient to reduce errors.

DIF: Cognitive Level: Analyzing TOP: Step of the Nursing Process: All Phases

MSC: Client Needs: Management of Care

5. The nurse manager sets a goal to establish a new safety culture on a hospital unit. The nurse manager recognizes that basic components in establishing a new safety culture include
- support of effective health care teamwork.
 - encouragement of individualism.
 - discouragement of new concepts.
 - promotion of a hierarchical system.

ANS: A

A major international effort is underway to prioritize safety goals by improving communication about patients among his or her various providers. The aim is to reduce patient mortality, decrease medical errors, and promote effective health care teamwork.

DIF: Cognitive Level: Application TOP: Step of the Nursing Process: All Phases

MSC: Client Needs: Management of Care

6. A nurse attends an in-service aimed to educate staff about reporting hospital errors. The nurse demonstrates understanding when listing which of the following as being NOT consistent with creating a culture of safety?
- Creating a way to advise and compensate harmed patients
 - Supporting care providers after adverse events
 - Ensuring the negative consequences of disclosing errors serve as a guide
 - Installing a nonpunative reporting system

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ANS: C

Many health care providers express concern about reporting errors or near miss incidents. The system needs to be redesigned to be nonpunitive if we are to create a culture of safety. A culture of safety is characterized by installing a strong, nonpunitive reporting system; supporting care providers after adverse events; and developing a method to inform and compensate patients who were harmed.

DIF: Cognitive Level: Analyzing TOP: Step of the Nursing Process: All Phases
MSC: Client Needs: Management of Care

7. When educating a newly diagnosed patient about management of diabetes mellitus, the nurse recognizes that health care–related communication
- does not lead to errors within the hospital.
 - is generally well understood by most patients.
 - is not an important component of patient care.
 - can cause patients to misunderstand information.

ANS: D

It is important to make verbal and written information as simple as possible. Nurses need to assess the health literacy level of each patient. Nurses should provide privacy to avoid embarrassment and obtain feedback or “teach-backs” to determine the patient’s understanding of teaching: Simplify, Clarify, Verify!

DIF: Cognitive Level: Understanding TOP: Step of the Nursing Process: All Phases
MSC: Client Needs: Management of Care

8. A nurse manager reminds staff that if an adverse event occurs, everyone’s focus needs to be on
- how the aviation industry would handle things.
 - correcting system flaws to avoid future events.
 - the fact that only a tiny fraction of unsafe care incidents are reported.
 - determining what staff member(s) made the error.

ANS: B

Create a new climate of safety in which agencies, policies, and employees maintain a vigilant, proactive attitude toward adverse events. Recognizing that human error occurs, everyone’s focus needs to be on correcting system flaws to avoid future adverse events, rather than finding the one to blame.

DIF: Cognitive Level: Application TOP: Step of the Nursing Process: All Phases
MSC: Client Needs: Management of Care

9. When educating a student nurse about safety communication improvement solutions, the nursing instructor recognizes that additional teaching is warranted when the student nurse lists which of the following as a safety communication improvement solution?
- Adopting technology-oriented tools
 - Using standardized verbal and electronic communication tools
 - Disempowering patients to be partners in safer care
 - Participating in team training communication seminars

ANS: C

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While a nurse's clinical judgment remains a valid, essential aspect of communication, other safety communication improvement solutions include using standardized verbal and electronic communications tools, participating in team-training communication seminars, adopting technology-oriented tools, and empowering patients to be partners in safer care. Communication that promotes patient safety needs to include both communication of concise critical information and active listening.

DIF: Cognitive Level: Application TOP: Step of the Nursing Process: All Phases
MSC: Client Needs: Management of Care

10. The nurse is teaching the student nurse about how to use SBAR when calling a physician. The student nurse verbalizes understanding of SBAR when stating that SBAR is
- used as a situational briefing.
 - utilized strictly within the hospital setting.
 - not used in e-mails due to HIPAA rules.
 - never recorded within the patient's chart.

ANS: A

SBAR is used as a situational briefing, so the team is "on the same page." It is used across all types of agencies, groups, and even in e-mails. SBAR simplifies verbal communication between nurses and physicians because content is presented in an expected format. Some hospitals use laminated SBAR guidelines at the telephones for nurses to use when calling physicians about changes in patient status and requests for new orders. Documenting the new order is the only part of SBAR that gets recorded.

DIF: Cognitive Level: Application TOP: Step of the Nursing Process: All Phases
MSC: Client Needs: Management of Care

11. A nurse recognizes that strategies for clear, accurate communication to promote patient safety include which of the following?
- Establishing a safe environment
 - Maintaining a climate of closed communication
 - Using unique interdisciplinary communication tools
 - Using communication tools that promote vague communication

ANS: A

Clear, accurate communication is the bedrock of safe care. Accurate, clear communication and best practice are indicators of quality of care and serve to maintain a safe environment.

DIF: Cognitive Level: Understanding TOP: Step of the Nursing Process: All Phases
MSC: Client Needs: Management of Care

12. What tool for safer care is designed to increase cognitive decision-making skills, increase technical proficiency, and enhance teamwork, including communication skills?
- Clinical situation simulations
 - SBAR
 - Checklists
 - Team training models

ANS: A