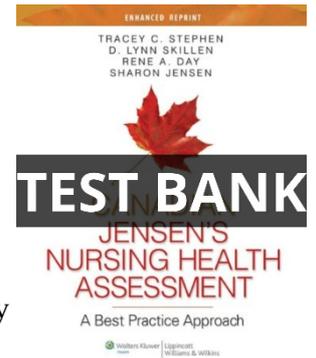


1. To enhance personal health practices, the most fundamental and effective approach to individual client assessment would be:
  - A) Ascertaining past and current use of health care services
  - B) Determining client stress levels related to lifestyle choices
  - C) Using reputable health-education strategies to reduce risk behaviours
  - D) Understanding the health problems that clients experience in everyday life
2. During the initial stages of working with a group of single, teenage mothers to improve their living circumstances, a community health nurse would begin by assessing the:
  - A) Availability of needed health education resources
  - B) Physical health status of the teens and their infants
  - C) Teens' identified lack of knowledge about birth control
  - D) Social and physical conditions that influence the teens' health
3. A few nursing students revealed to a faculty advisor that they were concerned about the effects of their program demands on their personal health practices. Follow-up with other students indicated that this was a common concern among the student group. Further assessment showed that the students expressed their belief in the importance of maintaining good health practices, but that most students had discontinued weekday efforts because of their focus on school-related stress and limited economic resources. Faculty members supported the concept of integrated health programs and were prepared to develop a program as a project. To assess the need for health promotion among the group of students, which of the following assessment methods would be most useful?
  - A) Physical assessment and health history
  - B) Individual student interview and questionnaire
  - C) Review of literature and consultation with faculty
  - D) Walk-through of education facility and faculty questionnaire
4. Program planners work with students and faculty to develop and implement a set of strategies that provide students with alternatives such as peer support, life skills counselling, fitness activity groups, and a social action student coalition. These strategies best reflect which of the *Ottawa Charter* strategies for health promotion?
  - A) Building healthy public policy
  - B) Creating supportive environments
  - C) Strengthening community action
  - D) Re-orienting health services
5. Program strategies consistent with a socioenvironmental approach to health and health promotion for nursing students would include:
  - A) Promoting personal health practices such as nutrition and fitness
  - B) Advocating policies that ensure adequate financial support for students
  - C) Screening for occupationally induced physiological risk factors of disease
  - D) Supporting lifestyle change to manage stress with exercise and time management



6. During the initial assessment of a 61-year-old male client, the nurse uses the CAGE questionnaire as a screening tool for alcohol abuse. Which of the historical approaches to health is best exemplified by the nurse's action?
  - A) Medical
  - B) Behavioural/lifestyle
  - C) Socioenvironmental
  - D) Preventative
  
7. Which of the following nursing actions best demonstrates a focus on the determinants of health?
  - A) A nurse reviews the medication regimen of a client with chronic obstructive pulmonary disease.
  - B) A nurse performs client teaching on activity management for a client who has been diagnosed with congestive heart failure.
  - C) A nurse provides education on health promotion to a group of workers in an industrial setting.
  - D) A nurse discusses the health activities that a client's income can accommodate.
  
8. A nurse is helping a group of parents advocate for a more stringent food-inspection framework in Canada. This strategy best reflects which of the *Ottawa Charter* strategies for health promotion?
  - A) Building healthy public policy
  - B) Creating supportive environments
  - C) Strengthening community action
  - D) Re-orienting health services
  
9. Which of the following statements best captures the essence of the *settings* approach to health?
  - A) Educational and economic considerations profoundly affect health.
  - B) The health of individuals is a product of their social and physical environment.
  - C) Health-promotion activities should be chosen based on individuals' geographical locations.
  - D) Adequate primary health care is essential to achieving adequate health outcomes.
  
10. Which of the following statements best conveys the rationale for health promotion in a school setting?
  - A) Health promotion in a school setting can yield improved health outcomes for the student's siblings and parents.
  - B) Children younger than 13 years are some of the most common consumers of acute health care services.
  - C) Children contract numerous communicable diseases in the school environment.
  - D) Healthy child development is a critical health determinant because of its implications for lifelong health.



**Answer Key**

1. C
  2. D
  3. B
  4. B
  5. C
  6. B
  7. D
  8. A
  9. B
  10. D
- 
1. If a client does not speak English, when is a trained interpreter required?
    - A) For any meaningful communication, including pain assessment or client teaching
    - B) When a family member is not available
    - C) For legal purposes such as obtaining informed consent
    - D) When there is no one on staff who speaks the person's language
  
  2. If a client seems reluctant to make eye contact, a health care provider should consider the possibility that this is which of the following?
    - A) A feature of the person's culture
    - B) An indicator of respect
    - C) An indication of discomfort or intimidation
    - D) A feature of the person's racial group
  
  3. From a critical cultural perspective, culture refers to which of the following?
    - A) Values, beliefs, and practices of specific groups
    - B) Genetically inherited behavioural traits
    - C) A web of connections among ethnically-related persons
    - D) A dynamic process enacted between people and their families
  
  4. In Canada, the Indian Act:
    - A) Outlined the relationship between the state and Aboriginal people
    - B) Is no longer in effect
    - C) Identified who qualifies as “Aboriginal”
    - D) Ensured fair and equitable treatment of Aboriginal people
  
  5. Which of the following is a primary goal of cultural safety?
    - A) Treat everyone the same.
    - B) Develop and use knowledge about the practices of different cultures.
    - C) Develop sensitivity to differences among ethnic groups.
    - D) Examine how our own perspectives shape how we see clients.

6. A nurse who practices in Northern Saskatchewan is aware of the need to be cognizant of the characteristics and needs of Aboriginal Canadians. Which of the following statements most accurately conveys an aspect of the health of Aboriginal peoples in Canada?
- A) Policy improvements and public health programs have brought the health of Aboriginal peoples nearly equal to that of other Canadians.
  - B) By most health indicators, the health of Aboriginal Canadians is worse than that of non-Aboriginal Canadians.
  - C) A combination of genetic factors and low levels of self-care means that Aboriginal Canadians live shorter, less healthy lives than other Canadians.
  - D) Health care providers have played a key role in countering many of the myths and disparities long associated with Aboriginal peoples.
7. A nurse is providing care for a 73 year-old woman receiving treatment for a septic venous ulcer. The nurse is frustrated with what he perceives as an unfair burden of care that the client's family places on the eldest son's wife. Knowing that the client and her family are members of a different culture than he is, how can the nurse best respond?
- A) Strategize with the client and her family on how to more equitably share the burden of care.
  - B) Inquire of the family why their culture dictates a central caregiving role for the daughter-in-law.
  - C) Reflect that the nurse's own culture should not be a consideration when caring for members of other cultures.
  - D) Determine what beliefs and assumptions on his part contribute to his conceptualization of justice and fairness.
8. Which of the following statements best characterizes the practice of treating clients equitably?
- A) The nurse has a responsibility to identify and redress historical injustices.
  - B) The nurse should seek to ensure that all clients from all cultures receive the same treatment and care.
  - C) The nurse must take measures to plan and implement care so that it is fair and just.
  - D) The importance of equality supersedes the unique situations and needs of various groups and individuals.
9. Current Canadian immigration legislation prioritizes which of the following considerations?
- A) Building the Canadian economy
  - B) Redressing previous discriminatory immigration policies
  - C) Privileging the citizens of politically-friendly countries
  - D) Achieving prevailing notions of a "culturally-balanced" society
10. Which of the following statements most accurately communicates an aspect of Canada's geographical diversity?
- A) Rural Canadians enjoy healthier lifestyles, and better health outcomes, than urban dwellers.

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- B) Incomes and health indicators in rural settings are lower than in urban settings.
- C) Only one-half of Canadians live in rural settings.
- D) Unmet healthcare needs are highest in major urban regions.

## Answer Key

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

1. A nurse is running late after a quarterly quality improvement meeting at the hospital and has just been paged from the nurses' station. A client's relative wants to talk as soon as possible about the client's care. The nurse has clinic duty this afternoon and is about to see the first client. The first appointment time slot is double-booked, and three other clients have arrived, all of whom are sitting in the waiting room. Which of the following demeanours is consistent with skilled interviewing when the nurse walks into the examination room to speak with the first client at the clinic?
  - A) Irritability
  - B) Impatience
  - C) Boredom
  - D) Calm
2. Suzanne, 25 years old, comes to the clinic to establish care. The student nurse is preparing to enter the examination room to interview the client. Which of the following is the most logical sequence for the client–provider interview?
  - A) Establish the agenda, negotiate a plan, establish rapport, and invite the client's story.
  - B) Invite the client's story, negotiate a plan, establish the agenda, and establish rapport.
  - C) Greet the client, establish rapport, invite the client's story, establish the agenda, expand and clarify the client's story, and negotiate a plan.
  - D) Negotiate a plan, establish an agenda, invite the client's story, and establish rapport.
3. Alexandra, 28 years old, presents to the clinic. She has abdominal pain that she describes as a dull ache, located in the right upper quadrant, and that she rates as a 3 at the least and an 8 at the worst. The pain started a few weeks ago; it lasts for 2 to 3 hours at a time, comes and goes, and seems to be worse a few hours after eating. The client has noticed that the pain starts after eating greasy foods, so she has cut down on this as much as she can. Initially the pain occurred once a week, but now it happens every other day. Nothing makes it better. From this description, which of the attributes of a symptom has been omitted?
  - A) Setting in which the symptom occurs
  - B) Associated symptoms and signs
  - C) Quality

- D) Timing
4. Jason, a 41-year-old electrician, presents to the clinic for evaluation of shortness of breath, which occurs with exertion and improves with rest. The shortness of breath has been occurring for several months. Initially, it happened only a few times a day with strenuous exertion; however, it has started to occur with minimal exertion and is happening more than 12 times a day. The shortness of breath lasts for fewer than 5 minutes at a time. The client has no cough, chest pressure, chest pain, swelling in his feet, palpitations, orthopnea, or paroxysmal nocturnal dyspnea. Which of the following symptom attributes was not addressed in this description?
- A) Severity
  - B) Setting in which the symptom occurs
  - C) Timing
  - D) Associated symptoms and signs
5. The nurse is interviewing an elderly woman in the ambulatory setting and trying to get more information about her urinary symptoms. Which of the following techniques is **not** a component of guided questioning?
- A) Use directed questioning: start with the general and proceed to the specific in a manner that does not make the client give a yes/no answer.
  - B) Reassure the client that the urinary symptoms are most often treated successfully.
  - C) Offer the client multiple choices to clarify the character of the urinary symptoms that she is experiencing.
  - D) Ask the client to tell you exactly what she means when she states that she has a urinary tract infection.
6. Mr. W., a 51-year-old auto mechanic, comes to the emergency department wanting to be examined for the symptom of chest pain. While listening to the client describe his symptom in more detail, the nurse says "Go on," then later "Mm-hmmm." This is an example of which of the following skilled interviewing techniques?
- A) Echoing
  - B) Nonverbal communication
  - C) Continuers
  - D) Empathic response
7. Mrs. R., a 92-year-old retired teacher, comes to the clinic with her daughter. The nurse asks Mrs. R. why she came to the clinic today. The client looks at her daughter and doesn't respond to the question. This is an example of which type of challenging client?
- A) Talkative client
  - B) Angry client
  - C) Silent client
  - D) Hearing-impaired client