

Chapter 1: Nursing Today

MULTIPLE CHOICE

1. The first practicing nurse epidemiologist was
 - a. Florence Nightingale.
 - b. Mildred Montag.
 - c. Clara Barton.
 - d. Mary Agnes Snively.

ANS: A

Nightingale was the first practicing nurse epidemiologist. Her statistical analyses connected poor sanitation with cholera and dysentery. Mildred Montag, Clara Barton, and Mary Agnes Snively came after Nightingale, each contributing to the nursing profession in her own way. Clara Barton founded the American Red Cross. Dr. Mildred Montag established the first associate degree nursing program in 1952. Mary Agnes Snively began forming the Canadian National Association of Trained Nurses in 1883.

DIF: Remember OBJ: Discuss the historical development of professional nursing roles.

TOP: Assessment MSC: Teaching/Learning

2. The American Red Cross was founded by
 - a. Florence Nightingale.
 - b. Harriet Tubman.
 - c. Clara Barton.
 - d. Mary Mahoney.

ANS: C

In 1882, the United States ratified the American Red Cross, founded by Clara Barton. Florence Nightingale established the Training School for Nurses in London, England, in 1860. Harriet Tubman was active in the Underground Railroad movement during the American Civil War. Mary Mahoney was the first professionally trained African American nurse.

DIF: Remember OBJ: Discuss the historical development of professional nursing roles.

TOP: Assessment MSC: Teaching/Learning

3. Nurses working in the Henry Street Settlement in 1893 were among the first nurses to demonstrate autonomy in practice. This was because those nurses
 - a. Had no ability to work in the hospital setting.
 - b. Were required to use critical thinking skills.
 - c. Focused solely on healing the very ill.
 - d. Planned their care around research findings.

ANS: B

In 1893, nurses working in the Henry Street Settlement were some of the first to demonstrate autonomy in practice because they encountered situations that required quick and innovative problem solving and critical thinking, and provided therapies aimed at maintaining wellness, as well as curing the ill. Nursing hospitals expanded in the late nineteenth century and were major providers of nursing care. Not until the early twentieth century was there a movement toward a scientific, research-based body of nursing knowledge.

DIF: Understand OBJ: Discuss the historical development of professional nursing roles.
TOP: Assessment MSC: Teaching/Learning

4. In 1923, the Goldmark Report was an important study that
 - a. Formed formal nurse midwifery programs.
 - b. Established the Center for Ethics and Human Rights.
 - c. Revised the ANA code of ethics.
 - d. Led to the development of the Yale School of Nursing.

ANS: D

In 1923, the Goldmark Report identified the need for increased financial support for university-based schools of nursing. As a result, the Yale School of Nursing was developed. Graduate nurse midwifery programs did not come into existence until the 1940s, and the Center for Ethics and Human Rights was founded in 1990. The ANA code of ethics was published in 1985 and was last updated in 2001.

DIF: Remember OBJ: Discuss the historical development of professional nursing roles.
TOP: Assessment MSC: Teaching/Learning

5. The major difference between a baccalaureate degree nursing program and an associate's degree nursing program is that the baccalaureate program includes studies in
 - a. Basic sciences and theoretical courses.
 - b. Social sciences and humanities.
 - c. Theoretical and clinical courses.
 - d. Basic sciences and clinical courses.

ANS: B

Both associate's degree programs and baccalaureate programs focus on basic sciences and on theoretical and clinical courses. Baccalaureate programs, however, also focus on courses in the social sciences, arts, and humanities to support nursing theory.

DIF: Understand
OBJ: Describe educational programs available for professional registered nurse education.
TOP: Evaluation MSC: Teaching/Learning

6. The nurse has been working in the clinical setting for several years as an advanced practice nurse and has earned her master's degree as a family nurse practitioner. However, she seems unfulfilled and has a strong desire to do research. To fulfill her desire, the nurse most likely would apply to attend a program that would lead to a
 - a. Doctor of Nursing Science degree (DNSc).
 - b. Doctor of Philosophy degree (PhD).
 - c. Doctor of Nursing Practice degree (DNP).
 - d. Doctor in the Science of Nursing degree (DSN).

ANS: B

PhD programs emphasize basic research and theory and are research oriented. Professional doctoral programs in nursing (DSN or DNSc) prepare graduates to apply research findings to clinical nursing. The DNP is a practice doctorate that prepares advanced practice nurses such as nurse practitioners.

DIF: Understand

OBJ: Describe educational programs available for professional registered nurse education.

TOP: Evaluation MSC: Teaching/Learning

7. The nurse is caring for her patients and is focused on managing their care as opposed to managing and performing skills. This nurse demonstrates which level of proficiency according to Benner?
- Novice
 - Competent
 - Proficient
 - Expert

ANS: C

The proficient nurse focuses on managing care as opposed to managing and performing skills. The novice nurse deals with a specific set of rules or procedures, which are usually stepwise and linear. The competent nurse understands the organization and the specific care required by specific types of patients and has experience with psychomotor skills. The expert nurse identifies patient-centered problems, as well as problems related to the health care system.

DIF: Understand

OBJ: Describe educational programs available for professional registered nurse education.

TOP: Evaluation MSC: Teaching/Learning

8. Which of the following resources guides faculty on structure and evaluation of the nursing curriculum?
- ANA's *Standards of Nursing Practice*
 - Essentials of Baccalaureate Education*
 - NLNAC Interpretive Guidelines*
 - Standards of Professional Performance*

ANS: B

The American Association of Colleges of Nursing (AACN) published *Essentials of Baccalaureate Education for Professional Nursing: A Final Report* (1998), which guides faculty on structure and evaluation of the curriculum and the performance of the graduate. The ANA's *Standards of Nursing Practice* demonstrates the critical thinking model known as the nursing process. *Standards of Professional Performance* describes a competent level of behavior in the professional role. *NLNAC Interpretive Guidelines* identifies core competencies for the professional nurse.

DIF: Understand

OBJ: Describe educational programs available for professional registered nurse education.

TOP: Evaluation MSC: Teaching/Learning

9. The nurse is caring for the patient who has had major abdominal surgery and also has a large sacral pressure sore. The nurse implements coughing and deep breathing exercises and consults the wound care specialist to evaluate and prescribe care for the pressure sore, even though no physician order has provided instructions to do so. In doing this, the nurse is implementing the element of
- Autonomy.
 - Accountability.
 - Advanced practice.
 - Nurse practitioner.

ANS: A

Autonomy is an essential element of professional nursing. Some independent nursing interventions such as implementing coughing and deep breathing exercises and collaboration with other health professionals can be initiated without medical orders. Accountability means that the nurse is responsible, professionally and legally, for the type and quality of nursing care provided. "Advanced practice nurse" is an umbrella term for advanced clinical nurses such as nurse practitioners who provide care to a group of patients.

DIF: Understand OBJ: Describe the roles and career opportunities for nurses.
TOP: Evaluation MSC: Teaching/Learning

10. The physician is planning to take the patient to surgery in the morning and leaves an order for the nurse to get the patient to sign the surgical permit. The physician's note indicates that the patient has been educated on the procedure. However, the patient tells the nurse, "I have no idea what he's going to do. He rushed in and rushed out so fast, I couldn't ask any questions." The nurse does not allow the patient to sign the permit and calls the physician to inform him of the patient's statement. This is an example of the nurse acting as
- Patient advocate.
 - Patient educator.
 - Manager.
 - Clinical nurse specialist.

ANS: A

As a patient advocate, the nurse protects the patient's human and legal rights, including the right of the patient to understand procedures before signing permits. Although nurses can be educators, it is the responsibility of the surgeon to provide education for the patient in preparation for surgery, and it is the nurse's responsibility to notify the physician if the patient is not properly educated. Managers coordinate the activities of members of the nursing staff in delivering nursing care, and clinical nurse specialists are experts in a specialized area of nursing practice in a variety of settings.

DIF: Apply OBJ: Describe the roles and career opportunities for nurses.
TOP: Evaluation MSC: Teaching/Learning

11. The patient requires routine gynecological services after giving birth to her son, and while seeing the nurse midwife, she asks for a referral to a pediatrician for the newborn. The nurse midwife should
- Provide the referral as requested.
 - Offer to provide the newborn care.
 - Refer the patient to the supervising physician.
 - Tell the patient that she cannot make referrals.

ANS: B

The practice of nurse midwifery involves providing independent care for women during normal pregnancy, labor, and delivery, as well as care for the newborn. As an independent practitioner, supervising physicians are not required by the certified nurse midwife (CNM). However, a CNM practices with a health care agency that provides medical consultation, collaborative management, and referral. After being apprised of the CNM role, if the patient insists on seeing a pediatrician, the nurse midwife should provide the referral.

DIF: Apply OBJ: Describe the roles and career opportunities for nurses.
TOP: Implementation MSC: Teaching/Learning

12. The student nurse has a goal of becoming a certified registered nurse anesthetist (CRNA). It is important for the student to understand that the CRNA
- Works under the guidance of an anesthesiologist.
 - Manages acute medical conditions.
 - Manages gynecological services such as PAP smears.
 - Must have a PhD degree in anesthesiology.

ANS: A

Nurse anesthetists provide surgical anesthesia under the guidance and supervision of an anesthesiologist, who is a physician with advanced knowledge of surgical anesthesia. Nurse practitioners, not CRNAs, manage self-limiting acute and chronic stable medical conditions; certified nurse midwives provide gynecological services such as routine Papanicolaou (Pap) smears. The CRNA is an RN with an advanced education in a nurse anesthesia accredited program. A PhD is not a requirement.

DIF: Understand OBJ: Describe the roles and career opportunities for nurses.
TOP: Implementation MSC: Teaching/Learning

13. The nurse is speaking in front of a group of ninth grade students about nursing as a profession. One student states that she does not want to be a nurse because all nurses do is take care of sick people and play politics. The most appropriate response that the nurse could give and expand on is that
- Nursing is ideal for the person who hates politics.
 - Nursing focuses on curing the person's disease.
 - Nursing is not political because it has its own knowledge base.
 - An area of nursing exists for every interest.

ANS: D

It is important to remember that opportunities are limitless for caring, compassionate, and competent nursing care; an area of nursing exists for every interest. Current philosophies and definitions of nursing demonstrate the holistic trend in nursing—to address the whole person in all dimensions, in health and illness, and in interaction with family and community. Political activism and commitment are a part of professionalism and are an important aspect of the delivery of health care. Nursing continues to draw on the social sciences and other fields as the focus of nursing care expands.

DIF: Understand
OBJ: Discuss the influence of social and economic changes on nursing practices.
TOP: Implementation MSC: Teaching/Learning

14. A bill has been submitted to the State House of Representatives that is designed to reduce the cost of health care by increasing the patient-to-nurse ratio from a maximum of 2:1 in intensive care units to 3:1. The nurse realizes that
- Legislation is politics beyond the nurse's control.
 - National programs have no bearing on state politics.
 - The individual nurse can influence legislative decisions.
 - Focusing on nursing care provides the best patient benefit.

ANS: C

Nurses can influence policy decisions at all governmental levels. One way is to get involved in ANA's national efforts, such as *Nursing's Agenda for the Future: A Call to the Nation*. This effort is critical in exerting nurses' influence early in the political process. Nurses need to become serious students of social needs, activists in influencing policy to meet those needs, and generous contributors of time and money to nursing organizations and candidates to help legislate conditions that are likely to produce the best care possible.

DIF: Analyze

OBJ: Discuss the influence of social and economic changes on nursing practices.

TOP: Implementation

MSC: Teaching/Learning

15. During the American Civil War, which of the following women was active in the Underground Railroad movement and assisted in leading more than 300 slaves to freedom?
- Harriet Tubman
 - Clara Barton
 - Dorothea Dix
 - Mary Ann Ball (Mother Bickerdyke)

ANS: A

Harriet Tubman was active in the Underground Railroad movement and assisted in leading more than 300 slaves to freedom. Clara Barton, founder of the American Red Cross, tended soldiers on the battlefields, cleansing their wounds, meeting their basic needs, and comforting them in death. As superintendent of the female nurses of the Union Army, Dorothea Lynde Dix organized hospitals, appointed nurses, and oversaw and regulated supplies to the troops. Mother Bickerdyke organized ambulance services and walked abandoned battlefields at night, looking for wounded soldiers.

DIF: Remember

OBJ: Discuss the historical development of professional nursing roles.

TOP: Assessment

MSC: Teaching/Learning

16. Graduates of baccalaureate degree or associate's degree nursing programs are eligible to take which of the following to become registered nurses in the state in which they will practice?
- Continuing education credits
 - In-service education programs
 - National Council Licensure Examination
 - Graduate education

ANS: C

Currently, in the United States, the most common way to become a registered nurse (RN) is through completion of an associate's degree or baccalaureate degree program. Graduates of both programs are eligible to take the National Council Licensure Examination for Registered Nurses (NCLEX-RN) to become registered nurses in the state in which they will practice. Continuing education involves formal, organized educational programs offered by universities, hospitals, state nurse associations, professional nursing organizations, and educational and health care institutions. In-service education programs consist of instruction or training provided by a health care agency or institution. An in-service program is held in the institution and is designed to increase the knowledge, skills, and competencies of nurses and other health care professionals. A nurse who is completing a graduate program can receive a master's degree in nursing.

DIF: Remember

OBJ: Describe educational programs available for professional registered nurse education.

TOP: Evaluation MSC: Teaching/Learning

17. Which concept means that the nurse is responsible, professionally and legally, for the type and quality of nursing care provided?
- Autonomy
 - Accountability
 - Patient advocacy
 - Patient education

ANS: B

Accountability means that the nurse is responsible, professionally and legally, for the type and quality of nursing care provided. Autonomy is an essential element of professional nursing that involves the initiation of independent nursing interventions without medical orders. As a patient advocate, the nurse protects the patient's human and legal rights and provides assistance in asserting these rights if the need arises. As an educator, the nurse explains concepts and facts about health, describes the reasons for routine care activities, demonstrates procedures such as self-care activities, reinforces learning or patient behavior, and evaluates the patient's progress in learning.

DIF: Remember

OBJ: Discuss the influence of social and economic changes on nursing practices.

TOP: Evaluation MSC: Teaching/Learning

MULTIPLE RESPONSE

1. The nurse in the twenty-first century is facing an extremely complex profession with multiple external forces affecting the nursing profession. Factors influencing the nursing profession include which of the following? (*Select all that apply.*)
- Demography
 - Women's health care
 - Human rights
 - The threat of bioterrorism
 - The medically underserved

ANS: A, B, C, D, E

Multiple external forces affect nursing. These include demographic changes in the population, human rights, increasing numbers of medically underserved, and the threat of bioterrorism. The women's movement brought greater sensitivity to the health care needs of women and the role of women in health care research.

DIF: Remember

OBJ: Discuss the influence of social and economic changes on nursing practices.

TOP: Diagnosis MSC: Nursing Process

2. After licensure, the practicing nurse is required to update his or her knowledge about the latest research and practice developments. The most common way nurses do this is through _____ programs. (*Select all that apply.*)
- Continuing education
 - Master's degree
 - In-service education
 - DNP

ANS: A, C

Continuing education updates the nurse's knowledge about the latest research and practice developments. In-service education programs are provided by a health care agency to increase the knowledge, skills, and competencies of nurses employed by the institution. Both can provide the nurse with continuing education credit. Master's degree programs are valuable for those in the role of nurse educator, nurse administrator, or advanced practice nurse. The DNP is a practice doctorate that prepares advanced practice nurses.

DIF: Understand

OBJ: Describe educational programs available for professional registered nurse education.

TOP: Evaluation MSC: Teaching/Learning

3. Which of the following is (are) an example of an advanced practice nurse? (*Select all that apply.*)
- Nurse practitioner
 - Clinical nurse specialist
 - Patient advocate
 - Certified registered nurse anesthetist
 - Nurse midwife

ANS: A, B, D, E

Although all nurses should function as patient advocates, "advanced practice nurse" is an umbrella term for an advanced clinical nurse such as a nurse practitioner, clinical nurse specialist, certified registered nurse anesthetist, or nurse midwife.

DIF: Remember OBJ: Describe the roles and career opportunities for nurses.

TOP: Evaluation MSC: Teaching/Learning

4. The nurse manager from the oncology unit has had two callouts; the orthopedic unit has had multiple discharges and probably will have to cancel one or two of its nurses. The orthopedic unit has agreed to "float" two of its nurses to the oncology unit if oncology can "float" a nursing assistant to the orthopedic unit to help with obtaining vital signs. This is an example of (*Select all that apply.*)
- Autonomy.

- b. Accountability.
- c. Political activism.
- d. Politics.

ANS: A, B, D

Staffing is an independent nursing intervention and is an example of autonomy. Along with increased autonomy comes accountability or responsibility for outcomes of an action. Nurses are involved in politics when seeking additional resources. However, political activism usually involves more than day-to-day activities such as unit staffing.

DIF: Apply

OBJ: Discuss the influence of social and economic changes on nursing practices.

TOP: Implementation

MSC: Teaching/Learning



Chapter 01: Health and Wellness Test Bank

MULTIPLE CHOICE

1. What is the most commonly cited definition of health?
 - a. Health is the absence of disease.
 - b. Health is a function of the physiological state.
 - c. Health is a state of well-being involving the whole person.
 - d. Health is the ability to pursue activities of daily living (ADLs).

ANS: C

	Feedback
A	Health is considered to be more than merely the absence of disease.
B	The definition of health has broadened beyond the physiological state to include mental, social, and spiritual well-being.
C	The most commonly cited definition of health is from the World Health Organization and is “a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity.” The nurse should consider the total person when formulating a definition of “health.” Health is a positive concept emphasizing social and personal resources, as well as physical capacities.
D	An individual who is able to pursue ADLs may not define himself or herself as healthy. Life conditions such as environment, diet, and lifestyle practices may negatively affect one’s health long before one is unable to perform ADLs.

DIF: Cognitive Level: Comprehension

REF: page 2

OBJ: 2

TOP: Nursing Process: Assessment

MSC: CRNE: CH-1

2. The population health promotion model aims to develop actions for improving health. In addition to asking “On what should we take action?” “How should we take action?” and “Why should we take action?”, what is the fourth major question explored by the model?
- “With whom should we act?”
 - “When should we take action?”
 - “Which government should take action?”
 - “Where should we first act?”

ANS: A

	Feedback
A	The fourth question is “ <i>With whom should we act?</i> ”
B	“ <i>When should we take action?</i> ” is not one of the four questions.
C	“ <i>Which government should take action?</i> ” is not one of the four questions.
D	“ <i>Where should we first act?</i> ” is not one of the four questions.

DIF: Cognitive Level: Knowledge REF: page 12, Figure 1-5
 OBJ: 3 TOP: Nursing Process: Planning MSC: CRNE: HW-3

3. What does the principle “Health promotion is multisectoral” mean?
- Relationships between individual, social, and environmental factors must be recognized.
 - Physical, mental, social, ecological, cultural, and spiritual aspects of health must be recognized.
 - In order to change unhealthy living and working conditions, areas other than health must also be involved.
 - Health promotion uses knowledge from disciplines such as social, economic, political, environmental, medical, and nursing sciences, as well as from first-hand experience.

ANS: C

	Feedback
A	The principle explained by the necessity to recognize relationships between individual, social, and environmental factors is “Health promotion addresses health issues in context.”
B	The principle explained by the necessity to recognize physical, mental, social, ecological, cultural, and spiritual aspects of health is “Health promotion supports a holistic approach.”
C	The principle explained by the necessity to involve areas other than health in order to change unhealthy living and working conditions is “Health promotion is multisectoral.”
D	The principle explained by the idea that health promotion uses knowledge from disciplines such as social, economic, political, environmental, medical, and nursing sciences, as well as from first-hand experience is “Health promotion draws on knowledge from a variety of sources.”

DIF: Cognitive Level: Comprehension REF: page 11 OBJ: 7
 TOP: Nursing Process: Planning MSC: CRNE: HW-19

4. What priority strategy for health promotion in Canada is seen as important to incorporate in nursing education curricula?
- Knowledge of disease prevention
 - Strategies for health promotion
 - Policy advocacy
 - Concepts of determinants of health

ANS: C

	Feedback
A	Disease prevention is an integral part of nursing curricula.
B	Health promotion is a fundamental part of nursing curricula.
C	Increasingly, policy advocacy is incorporated into nursing role statements and nursing education curricula. Nurses should think about policies that have contributed to health problems, policies that would help to alleviate health problems, and how nursing champions public policies.
D	Nursing curricula integrate determinants of health.

DIF: Cognitive Level: Comprehension REF: page 11 OBJ: 10
 TOP: Nursing Process: Planning MSC: CRNE: PP-15

5. The Ottawa Charter for Health Promotion identified which of the following as a prerequisite for health?
- Education
 - Social support
 - Self-esteem
 - Physical environment

ANS: A

	Feedback
A	Education is one of the nine prerequisites for health that were identified in the <i>Ottawa Charter for Health Promotion</i> .
B	Lack of social support was identified as a psychosocial risk factor by Labonte (1993).
C	Low self-esteem was identified as a psychosocial risk factor by Labonte (1993).
D	Dangerous physical environments were identified as socioenvironmental risk conditions by Labonte (1993).

DIF: Cognitive Level: Knowledge REF: page 4 OBJ: 5
 TOP: Nursing Process: Planning MSC: CRNE: HW-19

6. Which of the following has been identified as the greatest determinant of health affecting Canadians?
- Education
 - Health services
 - Social support networks
 - Income and social status

ANS: D

	Feedback
A	Some investigators suggest that literacy and education are important influences on health status because they affect many other health determinants.
B	Approximately 25% of a population's health status is attributed to the quality of its health care services.
C	Social support affects health, health behaviours, and health care utilization, but is not the greatest determinant of health.
D	Income and social status are the greatest determinants of health.

DIF: Cognitive Level: Application
TOP: Nursing Process: Planning

REF: page 7 OBJ: 6
MSC: CRNE: HW-19

7. A paraplegic patient is in the hospital for an electrolyte imbalance. At which level of prevention is the patient receiving care?
- Primary prevention level
 - Secondary prevention level
 - Tertiary prevention level
 - Health promotion level

ANS: B

	Feedback
A	The primary prevention level focuses on health promotion and specific protection measures such as immunizations, and the reduction of risk factors such as smoking.
B	The secondary prevention level focuses on early detection of disease once pathogenesis has occurred, so that prompt treatment can be initiated to halt disease and limit disability.
C	The tertiary prevention level focuses on minimizing residual disability.
D	Health promotion is a focus of the primary prevention level.

DIF: Cognitive Level: Application
TOP: Nursing Process: Implementation

REF: page 11 OBJ: 8
MSC: CRNE: HW-8

8. The nurse incorporates levels of prevention as based on client needs and the type of nursing care provided. Which one of the following nursing activities is an example of tertiary level preventive caregiving?
- Teaching a patient how to irrigate a new temporary colostomy
 - Providing a lesson on hygiene for an elementary school class
 - Informing a client that immunizations for her infant are available through the health department
 - Arranging for a hospice nurse to visit with the family of a client with cancer

ANS: D

	Feedback
A	Teaching a patient how to irrigate a new colostomy would be an example of secondary prevention. If the colostomy is to be permanent, care may later move to the tertiary level of prevention.
B	Providing a lesson on hygiene for an elementary school class would be an example of primary prevention.

C	Informing a client about available immunizations would be an example of primary prevention.
D	Tertiary prevention occurs when a defect or disability is permanent and irreversible. At this level, the hospice nurse aims to help the client and his or her family to achieve a high level of function, despite the limitations caused by the client's illness.

DIF: Cognitive Level: Application REF: page 11 OBJ: 8
TOP: Nursing Process: Implementation MSC: CRNE: HW-8

9. Since the early 1990s, which group has had the highest amount of absenteeism of all workers in Canada?
- “White collar sector” workers
 - Nurses
 - Workers in the trades
 - Transport and equipment operators

ANS: B

Feedback	
A	Rates of absenteeism for the “white collar sector” were not given.
B	There is considerable concern regarding negative workplace conditions in the health care sector. Nurses have had the highest or second-highest rate of absenteeism of all workers in Canada since the early 1990s.
C	Rates of absenteeism for workers in the trades were not given.
D	Rates of absenteeism for transport and equipment operators were not given.

DIF: Cognitive Level: Knowledge REF: page 8 OBJ: 10
TOP: Nursing Process: Assessment MSC: CRNE: PP-8

10. According to research about nutrition in Canada, which one of the following statements is true?
- Canadians have increased their total fat and salt consumption.
 - Canadians report that their children eat the recommended daily number of fruits and vegetables.
 - Fifty percent of children aged 2 to 17 years were overweight or obese.
 - The 2004 Canadian Community Health Survey (CCHS) revealed that 40% of adult Canadians were obese (body mass index of 30 or more) and 50% were overweight.

ANS: A

Feedback	
A	One-quarter of Canadians overall, and one-third of teens aged 14 to 18 years, had eaten at a fast-food outlet the previous day, exposing them to foods high in fats and salts.
B	Seventy percent of children aged 4 to 8 ate fewer than the minimum servings of fruits and vegetables daily.
C	It is 26 % of children aged 2 to 17 years were overweight or obese, not 50%.
D	The 2004 Canadian Community Health Survey (CCHS) revealed that 23% of adult Canadians were obese (body mass index of 30 or more), not 40% and 36%

were overweight, not 50 %.

DIF: Cognitive Level: Application REF: page 9 OBJ: 6
TOP: Nursing Process: Planning MSC: CRNE: HW-26

11. Which of the following is one of the five health promotion strategies identified by the Ottawa Charter for Health Promotion?
- Create supportive environments
 - Strengthen educational opportunities
 - Develop a medical approach
 - Minimize stressful situations

ANS: A

	Feedback
A	“Create supportive environments” is one of the five broad health promotion strategies identified by the <i>Ottawa Charter for Health Promotion</i> . These strategies are: building healthy public policy, creating supportive environments, strengthening community action, developing personal skills, and reorienting health services.
B	“Strengthen educational opportunities” is not one of the five strategies.
C	“Develop a medical approach” is not one of the five strategies.
D	“Minimize stressful situations” is not one of the five strategies.

DIF: Cognitive Level: Application REF: page 12 OBJ: 5
TOP: Nursing Process: Planning MSC: CRNE: NCP-4

12. Which one of the following is an example of tertiary prevention?
- Reduction of risk factors, such as smoking
 - Breast self-examination and testicular self-examination
 - Cardiac rehabilitation programs
 - Blood pressure screening to detect hypertension

ANS: C

	Feedback
A	Reducing risk factors, such as smoking, is an example of primary prevention.
B	Breast self-examination and testicular self-examination are examples of secondary prevention.
C	Tertiary prevention activities occur in the convalescence stage of disease and are directed toward minimizing residual disability and helping people to live productively with limitations. An example is a cardiac rehabilitation program following a myocardial infarction.
D	Blood pressure screening to detect hypertension is an example of secondary prevention.

DIF: Cognitive Level: Comprehension REF: page 11 OBJ: 8
TOP: Nursing Process: Implementation MSC: CRNE: HW-11

13. What is the greatest internal client factor for the nurse to consider when educating an adult client concerning health promotion activities?

- a. Emotional wellness
- b. Developmental stage
- c. Professed spirituality
- d. Levels of education and literacy

ANS: D

	Feedback
A	The client's degree of stress, depression, or fear, for example, can influence health beliefs and practices. The manner in which a person handles stress throughout each phase of life will influence the way he or she reacts to illness. However, this is not the best available option.
B	A person's thought and behaviour patterns change throughout life. The nurse must consider the client's level of growth and development when using his or her health beliefs and practices as a basis for planning care. In this case, the client has been identified as an adult, and therefore the developmental stage has been determined.
C	Spirituality is reflected in how a person lives his or her life, including the values and beliefs exercised, the relationships established with family and friends, and the ability to find hope and meaning in life. However, this is not the best available option.
D	Levels of education and literacy are important influences to consider when educating an adult client concerning health promotion activities. Literacy can influence health both directly (e.g., medication use, safety practices) as well as indirectly through use of services, lifestyles, income, work environments, and stress levels.

DIF: Cognitive Level: Analysis REF: page 7 OBJ: 6
 TOP: Nursing Process: Implementation MSC: CRNE: HW-19

14. Which of the following statements would help the nurse to best discuss the impact of a known risk factor on a client's health?
- a. "It doesn't mean that you'll get the disease, just that the odds are greater for you."
 - b. "Now that you know the possibility is there, you can take steps to prevent it."
 - c. "This risk factor can be managed by making a change to your lifestyle."
 - d. "You're lucky because you have the benefit of being able to do something about it."

ANS: A

	Feedback
A	The presence of risk factors does not mean that a disease will develop, but risk factors increase the chances that the individual will experience a particular disease or dysfunction.
B	While the statement, "Now that you know the possibility is there, you can take steps to prevent it" is not incorrect, it does not address the impact of the risk factor on the client's health.
C	It is not always true that a risk factor can be managed by making lifestyle changes, and therefore this is not the best available option.
D	The strategy of telling the client that he or she is lucky and has the benefit of

	being able to do something about a risk factor minimizes the client's concern, and does not address the impact of the risk factor on the client's health.
--	---

DIF: Cognitive Level: Analysis REF: page 3 OBJ: 3
TOP: Nursing Process: Implementation MSC: CRNE: HW-2

15. Which type of data does the population health approach emphasize to determine health and disease?
- a. Physical
 - b. Psychological
 - c. Experiential
 - d. Epidemiological

ANS: D

Feedback	
A	The population health approach does not emphasize the use of physical data to determine health and disease.
B	The population health approach does not emphasize the use of psychological data to determine health and disease.
C	The population health approach does not emphasize the use of experiential data to determine health and disease.
D	The population health approach emphasizes the use of epidemiological data to determine the etiology of health and disease.

DIF: Cognitive Level: Comprehension REF: page 5 OBJ: 10
TOP: Nursing Process: Assessment MSC: CRNE: CH-8