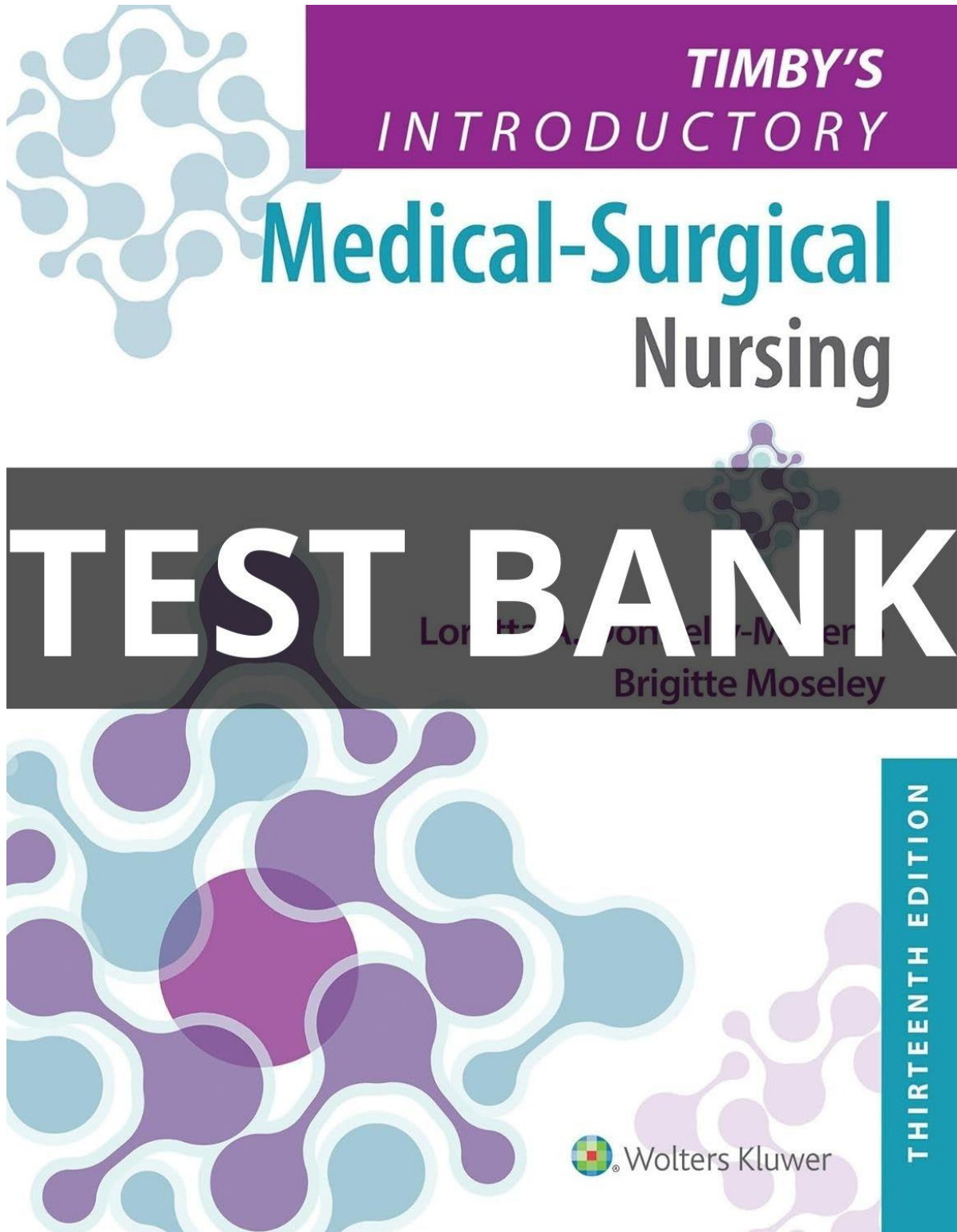


# **Test Bank**

**Timby's Introductory Medical-Surgical  
Nursing, 13th Edition by Loretta A Donnelly-  
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## **Chapter 1: Concepts and Trends in Health Care**

### **MULTIPLE CHOICE**

1. Managed care organizations are insurers that carefully plan and closely supervise the distribution of healthcare services. What is one of the goals of managed care?
  - a. Preventing illness through screening and promotion of health activities
  - b. Improving training of healthcare professionals
  - c. Eliminating health disparities between segments of the population
  - d. Providing hospice or home hospice care

ANS: A

Rationale: Preventing illness through screening and promotion of health activities is one of the goals of managed care. Improved training of healthcare professionals is the priority for international health and not the goal of managed care. Eliminating health disparities between the segments of population is a goal of Healthy People 2030. Providing hospice or home hospice care is only for terminally ill clients.

REF: p. 6, Managed Care

NAT: Client Needs: Health Promotion and Maintenance

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Understand

2. In an effort to cut costs, hospitals have instituted many changes. Which of these cost-cutting factors is most likely to jeopardize the quality of care?
  - a. Using unlicensed assistive personnel
  - b. Increasing numbers of clients in hospitals
  - c. Not devoting enough time to the client
  - d. The rise of medical care costs in healthcare systems

ANS: A

Rationale: Hospitals are using unlicensed assistive personnel to perform some duties practical and registered nurses once provided. Many are concerned that the use of unlicensed assistive personnel will jeopardize the quality of care. Increasing numbers of clients in hospitals, not devoting enough time to the client, or the rise of medical costs are less likely to jeopardize the quality of care.

REF: p. 7, Effects of Cost-Driven Changes

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Remember

3. Since losing a leg years ago, the client and their spouse have formed a community walking group to raise money for the homeless in their area. Which of the following has contributed to the client being viewed as "healthy"?
  - a. The client is married and is moving on.
  - b. The client is experiencing high quality of life within the limits of the physical condition.
  - c. The client is facing various states of health and illness.
  - d. The client is physiologically and psychologically stable.

ANS: B

Rationale: Clients adapt physically, emotionally, and socially, enabling them to maintain comfort, stability, and self-expression. Clients with chronic illness can achieve a high level of wellness and experience high quality of life. Marriage is an aspect that contributes to quality of life but does not by itself define the quality of the client's life. All clients experience various states of health and illness.

REF: pp. 2-3, The Health-Illness Continuum

NAT: Client Needs: Psychosocial Integrity

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Apply

4. A 17-year-old client is having protected sex one to two times a week in a monogamous relationship. What is the client participating in?
- Health promotion
  - Health maintenance
  - Illness prevention
  - Wellness

ANS: B

Rationale: Protecting one's current level of health by practicing safe sex to prevent illness is an example of a health maintenance activity. Health promotion strategies are used to enhance health, such as eating a diet high in fiber. Illness prevention includes identifying risk factors such as hypertension. Wellness is the balance of total well-being.

REF: p. 3, Health Maintenance and Promotion

NAT: Client Needs: Health Promotion and Maintenance

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Apply

5. A client complaining of bloody urine has scheduled an appointment with a family practitioner. What type of care is the client receiving?
- Tertiary
  - Secondary
  - Skilled nursing care
  - Primary

ANS: D

Rationale: The first provider that clients contact about a health need provides primary care; this person is typically a family practitioner or nurse practitioner. Secondary care includes referrals to facilities for additional testing. Tertiary care focuses on more complex medical and surgical intervention. Skilled nursing care occurs in facilities or units that offer prolonged health maintenance or rehabilitative services.

REF: p. 3, The Health Care Delivery System

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Understand

6. The hospital is having a problem with healthcare-associated infections. A committee has been established to study the problem and make recommendations. The nurse working on the committee knows that this work addresses what?
- Inpatient quality indicators
  - Prevention quality indicators
  - National Patient Safety Goals
  - Patient safety indicators

ANS: C

Rationale: The Joint Commission has established National Patient Safety Goals that are updated annually. These safety goals have changed how patients are identified and prevent adverse effects. Some of the 2016 goals include reducing the risk of healthcare-associated infections. Patient safety indicators reflect the quality of care in hospitals but focus on potentially avoidable complications. Prevention indicators identify hospital admissions that could be avoided through high-quality outpatient care. Inpatient indicators reflect quality of care inside the hospital.

REF: p. 8, Measures of Quality of Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

KEY: Integrated Process: Communication and Documentation      BLM: Cognitive Level: Apply

7. After hip surgery, a client is admitted to the rehabilitation hospital. What type of care is the client receiving?
- Secondary
  - Tertiary
  - Rehabilitation
  - Primary

ANS: B

Rationale: Hospitals where specialized technology is available provide tertiary care. Primary care is the initial contact that a client has, such as an appointment with a family practitioner. Secondary care includes referrals for additional testing. Rehabilitation is aimed at restoring a people to their fullest abilities.

REF: p. 3, The Health Care Delivery System

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

KEY: Integrated Process: Nursing Process      BLM: Cognitive Level: Understand

8. The Healthy People 2030 initiative targets the improvement of health for all. In addition to eliminating health disparities, what are the broad goals of this plan?
- Increasing technological innovations
  - Preventing treatable problems
  - Applying a systematic approach to health improvement
  - Increasing the quality and length of a healthy life

ANS: D

Rationale: Two broad goals of the Healthy People 2030 initiative are to increase quality and years of healthy life and eliminate health disparities. Healthy People 2030 initiatives will help with treatable problems but will not prevent problems. The initiative does not apply a systematic approach to health improvement or increase technological innovations.

REF: p. 8, Future Trends and Goals for Health Care

NAT: Client Needs: Health Promotion and Maintenance

KEY: Integrated Process: Teaching/Learning      BLM: Cognitive Level: Remember

9. What method for financing healthcare is based on the ability to keep clients healthy and out of the hospital through periodic screening, health education, and preventive services?
- Managed care
  - Preferred provider organization
  - Health maintenance organization
  - Point-of-service organization

ANS: C

Rationale: Health maintenance organizations strive to keep their costs low and members out of the hospital through periodic screenings, health education, and preventive services. Managed care organizations are insurers who carefully plan and closely supervise the distribution of healthcare services. Preferred provider organizations are a community network of providers who are willing to discount their fees for service in exchange for a steady stream of referral customers. Point-of-service organizations involve a network of providers; clients select a primary care physician within the group who then serves as the gatekeeper for other healthcare services

REF: p. 6, Health Maintenance Organizations

NAT: Client Needs: Health Promotion and Maintenance

KEY: Integrated Process: Teaching/Learning      BLM: Cognitive Level: Understand

10. The nurse is leading a cardiac rehabilitation support group. How can the nurse best demonstrate meeting the client's needs holistically?
- Lead an exercise, show a video about healthy lifestyle changes, and invite a spiritual leader to talk with the group.
  - Have the clients share various healthy low-cholesterol recipes and participate in a cooking class.
  - Have the clients discuss ways to relieve stress and practice stress reduction.
  - Demonstrate low-impact aerobic exercise to the group and bring in a lecturer on Tai Chi.

ANS: A

Rationale: Nurses practice from the perspective of holism, which is viewing a person's health as a state balance between body, mind, and spirit. Leading an exercise, showing a video about healthy lifestyle changes, and inviting a spiritual leader to talk with the support group are all ways the nurse can meet the clients' needs holistically. By combining these activities, the nurse addresses the needs of the body, mind, and spirit. Cooking classes, having clients discuss stress reduction, and demonstrating exercise techniques are each only addressing one type of need, and therefore are not on their own holistic methods.

REF: p. 2, Concepts Related to Health

NAT: Client Needs: Health Promotion and Maintenance

KEY: Integrated Process: Teaching/Learning

BLM: Cognitive Level: Apply

11. A client is brought into the emergency department by the rescue squad after involvement in a motorcycle accident with a severe spinal cord injury. As what type of illness does the nurse view this event?
- Terminal
  - Acute
  - Chronic
  - Catastrophic

ANS: D

Rationale: Illness refers to a state of being sick and can be viewed as catastrophic or a sudden, traumatic illness, which has occurred with this client. The client has suffered a traumatic accident with serious injury and would be classified as catastrophic. This event is not chronic, terminal, or acute.

REF: p. 2, Illness and Disease

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Apply

12. A client with chronic obstructive pulmonary disease visits a local long-term care facility once a week to lead a bingo game for the residents. How does the nurse determine that this client is achieving a high level of wellness?
- The client enjoys the activity that the nurse provides to the clients.
  - The client finds satisfaction in socialization with the residents.
  - The client is achieving a high quality of life within the limits of the illness.
  - The client needs to feel a part of a group setting.

ANS: C

Rationale: Clients with chronic illness can achieve a high level of wellness if they can experience a high quality of life within the limits of that illness. By engaging in a personal and social activity weekly, this client would be considered healthy. Although the client may enjoy the activity, find satisfaction in socialization, or need to feel a part of a group, choosing to take part in an activity that promotes a high quality of life within the limits of the client's illness is what demonstrates wellness to the nurse.

REF: pp. 2-3, The Health-Illness Continuum

NAT: Client Needs: Psychosocial Integrity

KEY: Integrated Process: Caring

BLM: Cognitive Level: Apply

13. The nurse is providing a program at the local YMCA about stress-reduction techniques combined with a 1-mile walk around the indoor track once a week. What does this type of program address for the community?
- Health promotion
  - Health maintenance
  - Illness prevention
  - Early detection of illness

ANS: A

Rationale: Health promotion refers to engaging in strategies to enhance health such as eating a diet high in grains and complex carbohydrates, exercising regularly, balancing work with leisure activities, and practicing stress-reduction techniques. Illness prevention involves identifying risk factors such as a family history of hypertension or diabetes and reducing the effects of risk factors on one's health. Early detection uses screening diagnostic tests and procedures to identify a disease process earlier, so that treatment may be initiated earlier and be more effective. Health maintenance refers to protecting one's current level of health by preventing illness or deterioration, such as by complying with medication regimens, being screened for diseases such as breast and colon cancers, or practicing safe sex.

REF: p. 3, Health Maintenance and Promotion

NAT: Client Needs: Health Promotion and Maintenance

KEY: Integrated Process: Teaching/Learning

BLM: Cognitive Level: Apply

14. The nurse is collecting data at the clinic from a new client who is being seen for an employee physical. The client informs the nurse that both parents have a history of high blood pressure, with one of them having a stroke at the age of 52 years. The nurse discusses diet and exercise programs that may benefit the client. What is the nurse displaying with this information?
- Early detection
  - Health maintenance
  - Health promotion
  - Illness prevention

ANS: D

Rationale: Illness prevention involves identifying risk factors such as family history of hypertension or diabetes and reducing the effects of risk factors on one's health. Early detection uses screening diagnostic tests and procedures to identify a disease process earlier, so that treatment may be initiated earlier and be more effective. Health maintenance refers to protecting one's current level of health by preventing illness or deterioration, such as by complying with medication regimens, being screened for diseases such as breast and colon cancers, or practicing safe sex. Health promotion refers to engaging in strategies to enhance health such as eating a diet high in grains and complex carbohydrates, exercising regularly, balancing work with leisure activities, and practicing stress-reduction techniques.

REF: p. 3, Health Maintenance and Promotion

NAT: Client Needs: Health Promotion and Maintenance

KEY: Integrated Process: Teaching/Learning

BLM: Cognitive Level: Apply

15. The nurse informs the administrative assistant that a client is expected to come in for lab work. The administrative assistant asks why the nurse refers to the individual as a client. What is the best response by the nurse?
- "We should refer to everyone as a client. They pay for our service."
  - "That's how the physician wants us to refer to them."



- c. "Using the term *client* implies that they are an active partner in nursing care."
- d. "Using the term *client* is more respectful than using the term patient."

ANS: C

Rationale: A client is an active partner in nursing care, and the person receiving healthcare services should no longer play a passive, ill role. The use of the term *client* reflects the attitude of personal responsibility for health. Though clients may be paying for these services, some physicians may request their staff members to use this terminology, and some people may consider it to be a more respectful term than "patient", these are not the primary reasons to refer to the individual as a client.

REF: p. 3, Health Maintenance and Promotion

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

KEY: Integrated Process: Caring                      BLM: Cognitive Level: Apply

16. A nurse is providing care for a client who has had a hip replacement and is going to be discharged in 2 days. The nurse has provided the client instructions for care after discharge. Which instruction would be considered accessing tertiary care?
- a. "Begin physical therapy in 1 week."
  - b. "Follow up with your primary health care provider in 2 days to discuss laboratory results."
  - c. "Go to the outpatient laboratory for blood studies in 3 days."
  - d. "Report to the emergency department for signs of infection, shortness of breath, or chest pain."

ANS: A

Rationale: Starting physical therapy, a type of rehabilitation, is a form of tertiary care. Tertiary care focuses on complex medical and surgical interventions, and specialized services such as cancer care and rehabilitative services. Encouraging the client to see a family health care provider would be promoting primary care. Sending the client for lab studies or instructing them to go to the emergency department would be directing the client to seek secondary care, which includes additional testing and emergency care.

REF: p. 10, Three Levels of Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

KEY: Integrated Process: Nursing Process                      BLM: Cognitive Level: Apply

17. The client is referred from the physician to a cardiologist for a cardiac catheterization to determine if the client has coronary artery disease. What type of care does the nurse understand that this is?
- a. Primary care
  - b. Secondary care
  - c. Tertiary care
  - d. Acute care

ANS: B

Rationale: Secondary care includes referrals to facilities for additional testing such as cardiac catheterization, consultation, and diagnosis as well as emergency and acute care interventions. This client falls into this category due to the referral to the cardiologist for the cardiac catheterization. The client does not fall into the acute care category. Primary care would include being seen by the client's primary physician. Tertiary care focuses more on complex medical and surgical interventions, cancer care, rehabilitative services, long-term care such as burn care, and palliative and hospice care.

REF: p. 3, The Health Care Delivery System

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

KEY: Integrated Process: Nursing Process                      BLM: Cognitive Level: Apply

18. A client with terminal cancer is being referred to hospice services to assist with care of the client and the family in the home environment. What type of care does the nurse determine this is?
- Primary care
  - Secondary care
  - Tertiary care
  - Acute care

ANS: C

Rationale: Tertiary care focuses more on complex medical and surgical interventions, cancer care, rehabilitative services, long-term care such as burn care, and palliative and hospice care. This client is terminally ill and being referred for hospice service. Secondary care includes referrals to facilities for additional testing such as cardiac catheterization, consultation, and diagnosis as well as emergency and acute care interventions. The client does not fall into the acute care category. Primary care would include being seen by the client's primary physician.

REF: p. 3, The Health Care Delivery System

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Apply

19. A client comes to the clinic and reports being ill for several weeks but does not have insurance and has delayed care. What does the nurse understand about the overall healthcare reform goals that will address issues such as this client?
- The goal of healthcare reform is to provide care to women, infants, and children.
  - The goal of healthcare reform is to provide more healthcare programs to address illness.
  - The goal of healthcare reform is to provide quality healthcare for those that can afford it.
  - The goal of healthcare reform is to provide affordable healthcare to more citizens.

ANS: D

Rationale: The overall goal of healthcare reform is to provide affordable healthcare to more U.S. citizens. Other goals are to reduce the insurance companies' control of healthcare and to provide more assistance to senior citizens on fixed incomes. Providing care to women, infants and children and offering more healthcare programs to address illness may be results of healthcare reform but are not themselves the overall goal. Healthcare reform seeks to provide quality healthcare that is affordable to as many U.S. citizens as possible, not to only provide it to those who can already afford it.

REF: p. 4, Access to Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Apply

20. A 72-year-old client who is hospitalized will be going on anticoagulant therapy and will require home healthcare nurses to visit once weekly to draw blood for coagulation studies. What coverage does the client have that will cover this service?
- Medicaid
  - Medicare Part A
  - Medicare Part B
  - Medicare Part C

ANS: B

Rationale: Medicare covers individuals who are 65 years of age or older, permanently disabled workers of any age with specific disabilities, and persons with end-stage renal disease. Medicare Part A covers hospital care, skilled care, hospice, and home health services. Medicare Part B covers medically necessary services such as physician services that are not covered under Part A. Medicare Part C is the Medicare Advantage Plan and includes Parts A and B. Medicaid coverage is coverage for indigent patients that are unable to afford healthcare and qualify financially.



REF: p. 5, Government-Funded Health Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Apply

21. A 65-year-old client is prescribed multiple medications for diabetes, hypertension, and angina and is going to the pharmacy to have the prescriptions filled. What coverage will the client use to assist with financial coverage of the medication?
- Medicare Part A
  - Medicare Part B
  - Medicare Part C
  - Medicare Part D

ANS: D

Rationale: Medicare Part D is Medicare Prescription Drug Coverage and helps to cover and possibly reduce prescription drug costs and protect against catastrophic drug expenses. Medicare Part A covers hospital care, skilled care, hospice, and home health services. Medicare Part B covers medically necessary services such as physician services that are not covered under Part A. Medicare Part C is the Medicare Advantage Plan and includes Parts A and B.

REF: p. 5, Government-Funded Health Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Apply

22. A group insurance plan requires a client to pay a preset, fixed fee for healthcare services. What type of insurance plan does the nurse understand the client to have?
- A preferred provider organization (PPO)
  - A health maintenance organization (HMO)
  - Medicare
  - Medicaid

ANS: B

Rationale: An HMO is a group insurance plan in which participants pay a preset, fixed fee in exchange for healthcare services. The fee is not based on the number of services provided but rather is projected to the number of participants and expected services. A PPO operates on the principle that competition can control costs. Acting as agents for health insurance companies, PPOs create a community network of providers who are willing to discount their fees for service in exchange for a steady stream of referred customers. Medicare is for people that are age 65 years and older or disabled. Medicaid is coverage for those clients who are unable to afford healthcare.

REF: p. 6, Managed Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Understand

23. An HMO client obtained a second opinion regarding a diagnosis of colon cancer. There was no authorization obtained for this second opinion from the client or primary care provider. What is the consequence of this action?
- The client will be responsible for the entire bill for the second opinion.
  - The client will still receive full coverage.
  - The client will be dropped from the HMO for breaking the rules.
  - The client will be fined by the HMO for not using the authorization process.

ANS: A

Rationale: Members of an HMO must receive authorization for secondary care, such as second opinions from specialists or diagnostic testing. If members obtain unauthorized care, they are responsible for the entire bill. In this way, HMOs serve as gatekeepers for healthcare services. The member will not be fined or dropped from the program but will not receive coverage for the service rendered from the second opinion.

REF: p. 6, Managed Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Apply

24. What does the nurse understand is the focus of healthcare when a client receives services from a health maintenance organization (HMO)?
- Avoiding coverage for needed services
  - Health promotion and maintenance
  - To offer discounted services to all patients
  - High-quality service and contain cost

ANS: B

Rationale: If the HMO does not require much high-cost care, providers make money; if members use many high-cost resources, providers lose money. This method of financing provides the strongest incentives for limiting use of expensive services and focusing healthcare on health maintenance and promotion. If services such as diagnostic testing are required, the HMO will cover this and not avoid payment. Services are not discounted for patients that are nonmembers or members. The goals of a physician hospital organization (PHO) are to maintain high-quality service and contain costs while fostering group contracts, collaboration, and capitation.

REF: p. 6, Managed Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Understand

25. The nurse has been asked to assist in gathering data regarding the incidence of falls in the hospital as part of a project that is geared toward identifying avoidable contributing factors and their effects. What type of quality indicators (QI) is this considered?
- Prevention QI
  - Inpatient QI
  - Client safety QI
  - Pediatric QI

ANS: C

Rationale: Client safety QIs reflect quality of care within hospitals but focus on potentially avoidable complications and adverse effects. Prevention QIs identify hospital admissions that could be avoided through high-quality outpatient care. Inpatient QIs reflect quality of care inside hospitals, including inpatient mortality for medical conditions and surgical events. The question does not indicate that client age is considered when gathering data, so Pediatric QIs would not be relevant here.

REF: p. 8, Measures of Quality of Care

NAT: Client Needs: Safe, Effective Care Environment: Management of Care

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Apply

26. A client undergoing a surgical procedure at the hospital died related to complications during the procedure. The nurse is required to collect data about the event so that a cause can be determined. What type of quality indicators would be used in this incident?
- Prevention QIs
  - Inpatient QIs