

OBJ: Nursing Process Step: Implementation

MSC: Client Needs: Psychosocial Integrity

MULTIPLE RESPONSE

20. The nurse is formulating a nursing care plan for a postpartum client. Which actions by the nurse indicate use of critical thinking skills when formulating the care plan? (*Select all that apply*).

- a. Using a standardized postpartum care plan
- b. Determining priorities for each diagnosis written
- c. Writing interventions from a nursing diagnosis book
- d. Reflecting and suspending judgment when writing the care plan
- e. Clustering data during the assessment process according to normal versus abnormal

ANS: B, D, E

Critical thinking focuses on appraisal of the way the individual thinks, and it emphasizes reflective skepticism. Determining priorities, reflecting and suspending judgment, and clustering data are actions that indicate the use of critical thinking. Using a standardized care plan and writing interventions from a nursing diagnosis book do not show that reflection about the clients individual care is being done.

Chapter 2: Family-Centered and Community-Based Maternal and Pediatric Nursing

MULTIPLE CHOICE

1. The nurse is teaching a homeless pregnant teenager about prenatal care. Which should the nurse emphasize in the teaching session?

- a. The importance of naming the baby
- b. Risk factors associated with pregnancy
- c. Information about employment opportunities

- d. Eating habits that will provide adequate nutrition

ANS: D

Homeless teens are more likely to have poor eating habits, smoke, and have greater risks for preterm labor, anemia, and hypertension during pregnancy and to deliver a low-birth-weight (LBW) infant. Teaching about proper eating habits is the priority at this time. Naming the baby, risk factors associated with pregnancy, and information about employment are not the highest priorities to teach at this time.

PTS: 1 DIF: Cognitive Level: Application REF: 35

OBJ: Nursing Process Step: Implementation

MSC: Client Needs: Health Promotion and Maintenance

2. The United States ranks 27th in terms of worldwide infant mortality rates. Which factor has the greatest impact on decreasing the mortality rate of infants?

- a. Providing more womens shelters
- b. Ensuring early and adequate prenatal care
- c. Resolving all language and cultural differences
- d. Enrolling pregnant women in the Medicaid program by their eighth month of pregnancy

ANS: B

Because preterm infants form the largest category of those needing expensive intensive care, early pregnancy intervention is essential for decreasing infant mortality. The women in shelters have the same difficulties in obtaining health care as other poor people, particularly lack of transportation and inconvenient clinic hours. Language and cultural differences are not infant mortality issues but must be addressed to improve overall health care. Medicaid provides health care for poor pregnant women, but the process may take weeks to take effect. The eighth month is too late to apply and receive benefits for this pregnancy.

PTS: 1 DIF: Cognitive Level: Understanding REF: 35

OBJ: Nursing Process Step: Assessment MSC: Client Needs: Health Promotion and Maintenance

3. Which statement is true regarding the quality assurance or incident report?

- a. Reports are a permanent part of the patients chart.
- b. The report assures the legal department that there is no problem.
- c. The nurses notes should contain this statement: Incident report filed and copy placed in chart.
- d. This report is a form of documentation of an event that may result in legal action.

ANS: D

Documentation on the chart should include all factual information regarding the clients condition that would be recorded in any situation. The nurse completes an incident report when something occurs that might result in a legal action against the clinic or hospital. Incident reports are not part of the patients chart. The report is a warning to the legal department to be prepared for a potential legal action. Incident reports are not mentioned in the nurses notes.

PTS: 1 DIF: Cognitive Level: Analysis REF: 39

OBJ: Nursing Process Step: Implementation

MSC: Client Needs: Safe and Effective Care Environment

4. The nurse is planning a teaching session for staff on ethical theories. Which situation best reflects the deontologic theory?

- a. Approving a physician-assisted suicide
- b. Supporting the transplantation of fetal tissue and organs
- c. Using experimental medications for the treatment of AIDS
- d. Initiating resuscitative measures on a 90-year-old patient with terminal cancer

ANS: D

In the deontologic theory, life must be maintained at all costs, regardless of quality of life. Approving a physician-assisted suicide, supporting the transplantation of fetal tissue and organs, and using experimental medications for the treatment of AIDS are examples of a utilitarian model.

PTS: 1 DIF: Cognitive Level: Application REF: 29

OBJ: Nursing Process Step: Planning MSC: Client Needs: Psychosocial Integrity

5. Which step of the nursing process is being used when the nurse decides whether an ethical dilemma exists?

- a. Analysis
- b. Planning
- c. Evaluation
- d. Assessment

ANS: A

When a nurse uses the collected data to determine whether an ethical dilemma exists, the data are being analyzed. Planning is done after the data have been analyzed. Evaluation occurs once the outcome has been achieved. Assessment is the data collection phase.

PTS: 1 DIF: Cognitive Level: Understanding REF: 30

OBJ: Nursing Process Step: Evaluation

MSC: Client Needs: Safe and Effective Care Environment: Coordinated Care

6. The nurse is interviewing a 6-week pregnant client. The client asks the nurse, Why is elective abortion considered an ethical issue? Which is the best response that the nurse should make?

- a. Abortion requires third-party consent.
- b. The U.S. Supreme Court ruled that life begins at conception.
- c. Abortion law is unclear about a woman's constitutional rights.

- d. There is a conflict between the rights of the woman and the rights of the fetus.

ANS: D

Elective abortion is an ethical dilemma because two opposing courses of action are available. Abortion does not require third-party consent. The Supreme Court has not ruled on when life begins. Abortion laws are clear concerning a woman's constitutional rights.

PTS: 1 DIF: Cognitive Level: Application REF: 31

OBJ: Nursing Process Step: Implementation

MSC: Client Needs: Safe and Effective Care Environment

7. At the present time, surrogate parenting is governed by which of the following?

- a. State law
- b. Federal law
- c. Individual court decision
- d. Protective child services

ANS: C

Each surrogacy case is decided individually in a court of law. Surrogacy is not governed by state law. Surrogacy is not governed by federal law. Protective child services does not make decisions about surrogacy.

PTS: 1 DIF: Cognitive Level: Understanding REF: 33

OBJ: Nursing Process Step: Assessment MSC: Client Needs: Health Promotion and Maintenance

8. Which client will most likely seek prenatal care?

- a. Janice, 15 years old, tells her friends, I don't believe I am pregnant.
- b. Carol, 28 years old, is in her second pregnancy and abuses drugs and alcohol.

- c. Margaret, 20 years old, is in her first pregnancy and has access to a free prenatal clinic.
- d. Glenda, 30 years old, is in her fifth pregnancy and delivered her last infant at home with the help of her mother and sister.

ANS: C

The client who acknowledges the pregnancy early, has access to health care, and has no reason to avoid health care is most likely to seek prenatal care. Being in denial about the pregnancy will prevent a client from seeking health care. Substance abusers are less likely to seek health care. Some women see pregnancy and birth as a natural occurrence and do not seek health care.

PTS: 1 DIF: Cognitive Level: Understanding REF: 35

OBJ: Nursing Process Step: Assessment MSC: Client Needs: Health Promotion and Maintenance

9. A medical surgical nurse is asked to float to a womens health unit to care for clients who are scheduled for therapeutic abortions. The nurse refuses to accept this assignment and expresses her personal beliefs as being incongruent with this medical practice. The nursing supervisor states that the unit is short-staffed and that they could really use her expertise because it just involves taking care of clients who have undergone a surgical procedure. In consideration of legal and ethical practices, can the nursing supervisor enforce this assignment?

- a. The staff nurse has the responsibility of accepting any assignment that is made while working for a health care unit, so the nursing supervisor is within his or her rights to enforce this assignment.
- b. Because the unit is short-staffed, the staff nurse should accept the assignment to provide care by benefit of her or his experience to clients who need care.
- c. The staff nurse has expressed a legitimate concern based on his or her feelings; the nursing supervisor does not have the authority to enforce this assignment.
- d. The nursing supervisor should emphasize that this assignment requires care of a surgical client for which the staff nurse is adequately trained and should therefore enforce the assignment.

ANS: C

The Nurse Practice Act allows nurses to refuse assignments that involve practices that they have expressed as being opposed to their religious, cultural, ethical, and/or moral values. Although the nursing supervisor has a right to arrange assignments, the supervisor, if made aware of a potential bias or limitation, must act accordingly and accept the nurses position. This should be upheld regardless of staffing limitations and independent of persuasive efforts to make the nurse feel guilty for her or his stated beliefs.

PTS: 1 DIF: Cognitive Level: Analysis REF: 31

OBJ: Nursing Process Step: Implementation

MSC: Client Needs: Safe Effective Care: Ethical Practice/Assignment, Delegation and Supervision

10. With regard to an obstetric litigation case, a nurse working in labor and birth is found to be negligent. Which intervention performed by the nurse indicates that a breach of duty has occurred?

- a. The nurse did not document fetal heart tones (FHR) during the second stage of labor.
- b. The client was only provided ice chips during the labor period, which lasted 8 hours.
- c. The nurse allowed the client to use the bathroom rather than a bedpan during the first stage of labor.
- d. The nurse asked family members to leave the room when she prepared to do a pelvic exam on the client.

ANS: A

A breach of duty is indicated by a nurse (or health care provider) failing to provide treatment relative to the standard of care. In this case, documentation of FHR during the second stage of labor is a standard of care. Providing ice chips to laboring clients is within the standard of care. The time period of 8 hours is not excessive. A client without any risk factors can use the bathroom and be ambulatory during the first stage of labor. Asking family members to leave during a vaginal exam helps maintain client privacy.

PTS: 1 DIF: Cognitive Level: Analysis REF: 37

OBJ: Nursing Process Step: Implementation

MSC: Client Needs: Safe Effective Care: Legal Rights and Responsibilities

11. A nurse is working with a labor client who is in preterm labor and is designated as a high-risk client. The client is very apprehensive and asks the nurse, Is everything going to be all right? The nurse tells the client, Everything will be okay. Following birth via an emergency cesarean section, the newborn undergoes resuscitation and does not survive. The client is distraught over the outcome and blames the nurse for telling her that everything would be okay. Which ethical principle did the nurse violate?

- a. Autonomy
- b. Fidelity
- c. Beneficence
- d. Accountability

ANS: B

In this type of situation, the nurse (and/or health care provider) cannot make statements (promises) that cannot be kept. Telling the client that everything will be okay is not based on the accuracy of medical diagnosis and should not be conveyed to the client. The other ethical principles of autonomy (self-determination), beneficence (greatest good), and accountability (accepting responsibility) do not apply.

PTS: 1 DIF: Cognitive Level: Analysis REF: 30

OBJ: Nursing Process Step: Implementation

MSC: Client Needs: Safe Effective Care: Legal Rights and Responsibilities

12. A nurse is working in the area of labor and birth. Her assignment is to take care of a gravida 1 para 0 who presents in early labor at term. Vaginal exam reflects the following: 2 cm, cervix posterior, 1 station, and vertex with membranes intact. The client asks the nurse if she can break

her water so that her labor can go faster? The nurses response, based on the ethical principle of nonmaleficence, is which of the following?

- a. Tell the client that she will have to wait until she has progressed further on the vaginal exam and then she will perform an amniotomy.
- b. Have the client write down her request and then call the physician for an order to implement the amniotomy.
- c. Instruct the client that only a physician or certified midwife can perform this procedure.
- d. Give the client an enema to stimulate labor.

ANS: C

The ethical principle of nonmaleficence conveys the concept that one should avoid risk taking or harm to others. The procedure of amniotomy is performed by a physician and/or certified nurse midwife. It is not in the scope of practice of a RN, so option C validates that the nurse is upholding this ethical principle. Options A and B are not within the scope of practice. The use of an enema as a labor stimulant is no longer considered to be part of labor and birth practices.

PTS: 1 DIF: Cognitive Level: Analysis REF: 30

OBJ: Nursing Process Step: Implementation

MSC: Client Needs: Safe Effective Care: Legal Rights and Responsibilities

13. A nurse working in a labor and birth unit is asked to take care of two high-risk clients in the labor and birth suite: a 34 weeks gestation 28-year-old gravida 3, para 2 in preterm labor and a 40-year-old gravida 1, para 0 who is severely preeclamptic. The nurse refuses this assignment telling the charge nurse that based on individual client acuity, each client should have one-on-one care. Which ethical principle is the nurse advocating?

- a. Accountability
- b. Beneficence
- c. Justice
- d. Fidelity

ANS: B

In this situation, the clients are each exhibiting significant high-risk conditions and should receive individual nursing care. The nurse is advocating the principle of beneficence in that she is trying to do the greatest good or the least harm to improve client outcomes. The other ethical principles do not apply in this situation.

PTS: 1 DIF: Cognitive Level: Analysis REF: 30

OBJ: Nursing Process Step: Implementation

MSC: Client Needs: Safe Effective Care: Legal Rights and Responsibilities

14. A charge nurse is working on a postpartum unit and discovers that one of the clients did not receive AM care during her shift assessment. The charge nurse questions the nurse assigned to provide care and finds out that the nurse thought that the client should just do it by herself because she will have to do this at home. On further questioning of the nurse, it is determined that the rest of her assigned clients were provided AM care. The assigned nurse has violated which ethical principle?

- a. Justice
- b. Truth
- c. Confidentiality
- d. Autonomy

ANS: A

The ethical principle of justice indicates that all clients should be treated equally and fairly. In this case, the charge nurse ascertained that the AM care was not equally applied to all the nurses assigned clients. The other ethical principles do not apply to this situation.

PTS: 1 DIF: Cognitive Level: Analysis REF: 30

OBJ: Nursing Process Step: Implementation

MSC: Client Needs: Safe Effective Care: Legal Rights and Responsibilities