## Chapter 02: Obtaining a Health History

**MULTIPLE CHOICE**

1. Which statement or question does the nurse use during the introduction phase of the interview?

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|---|---|
| a. | "I'm here to learn more about the pain you're experiencing." |
| b. | "Can you describe the pain that you're experiencing?" |
| c. | "I heard you say that the pain is 'all over' your body." |
| d. | "What relieves the pain you are having?" |

ANS: A
"I'm here to learn more about the pain you're experiencing" is an example of the introduction phase a nurse may use to explain the purpose of the interview to a patient. "Can you describe the pain that you're experiencing?" is an example of part of a symptom analysis that occurs in the discussion phase. "I heard you say that the pain is 'all over' your body" is an example of a summary statement by the nurse that occurs in the summary phase. "What relieves the pain you are having?" is an example of part of a symptom analysis that occurs in the discussion phase.

DIF: Cognitive Level: Apply REF: Box 2-1 | p. 8-9
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Therapeutic Communications

2. Which statement is appropriate to use when beginning an interview with a new patient?

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|---|---|
| a. | "Have you ever been a patient in this clinic before?" |
| b. | "What is your purpose for coming to the clinic today?" |
| c. | "Tell me a little about yourself and your family." |
| d. | "Did you have any difficulty finding the clinic?" |

ANS: B
"What is your purpose for coming to the clinic today?" is an open-ended question that focuses on the patient's reason for seeking care. "Have you ever been a patient in this clinic before?" is a close-ended question that yields a "yes" or "no" response. This question may be asked on the first visit, but not as an opening question for a health interview. "Tell me a little about yourself and your family" is an open-ended question, but it is too general, and it is at least two questions: one about the patient and another about the family. "Did you have

any difficulty finding the clinic?" is a social question and does not focus on the patient's purpose for the visit.

DIF: Cognitive Level: Understand REF: p. 8
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Therapeutic Communications

3. Which statement by the nurse demonstrates a patient-centered interview?

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|---|---|
| a. | "I need to complete this questionnaire about your medical and family history." |
| b. | "The hospital requires me to complete this assessment as soon as possible." |
| c. | "Tell me about the symptoms you've been having." |
| d. | "I've had the same symptoms that you've described." |

ANS: C
"Tell me about the symptoms you've been having" focuses on the needs of the patient so that the patient is free to share concerns, beliefs, and values in his or her own words. "I need to complete this questionnaire about your medical and family history" focuses on the nurse's need to complete the assessment rather than the needs of the patient. "The hospital requires me to complete this assessment as soon as possible" focuses on the nurse's need to meet hospital requirements rather than the needs of the patient. "I've had the same symptoms that you've described" focuses on the nurse rather than on the patient.

DIF: Cognitive Level: Apply REF: p. 8
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Therapeutic Communications

4. Which question is an example of an open-ended question?

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|---|---|
| a. | "Have you experienced this pain before?" |
| b. | "Do you have someone to help you at home?" |
| c. | "How many times a day do you use your inhaler?" |
| d. | "What were you doing when you felt the pain?" |

ANS: D
"What were you doing when you felt the pain?" is a broadly stated question that encourages a free-flowing, open response. "Have you experienced this pain before?" is closed-ended, which can obtain a "yes" or "no" answer to the question without any additional data. "Do you have someone to help you at home?" is closed-ended, which can obtain a "yes" or "no" answer to the question without any additional data. "How many times a day do you use your inhaler?" is closed-ended, which can obtain an answer of a specific number without any additional data.

DIF: Cognitive Level: Understand REF: pp. 10-11
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Therapeutic Communications

5. A nurse suspects a female patient is a victim of physical abuse. Which response is most likely to encourage the patient to confide in the nurse?

| | |
|---|---|
| a. | "You've got a huge bruise on your face. Did your husband hit you?" |
| b. | "That bruise looks tender. I don't know how people can do that to one another." |
| c. | "If your boyfriend hit you, you can get a restraining order against him." |
| d. | "I've seen women who have been hurt by boyfriends or husbands. Does anyone hit you?" |

ANS: D
"I've seen women who have been hurt by boyfriends or husbands" is an example of a technique referred to as "permission giving" in which the nurse communicates that it is safe to discuss uncomfortable topics. "You've got a huge bruise on your face. Did your husband hit you?" assumes that domestic violence did occur, and the comment does not encourage the patient to divulge additional information. "That bruise looks tender. I don't know how people can do that to one another" assumes that domestic violence did occur, and the comment does not encourage the patient to divulge additional information. "If your boyfriend has hit you, you can get a restraining order against him" assumes that domestic violence did occur, and the comment does not encourage the patient to divulge additional information.

DIF: Cognitive Level: Apply REF: p. 10
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Abuse/Neglect

6. Which technique used by the nurse encourages a patient to continue talking during an interview?

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|---|---|
| a. | Laughing and smiling during conversation |
| b. | Using phrases such as "Go on," and "Then?" |
| c. | Repeating what the patient said, but using different words |
| d. | Asking the patient to clarify a point |

ANS: B
Using phrases such as "Go on" and "Then?" encourages the patient to continue talking. Laughing and smiling during conversation may show attentiveness during the interview, but does not encourage more talking. Rephrasing what the patient has said is restatement.

It confirms your interpretation of what they said, but does not encourage additional talking. Asking the patient to clarify a point is done when the information is conflicting, vague, or ambiguous.

DIF: Cognitive Level: Remember REF: p. 11
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Therapeutic Communications

7. During the history, the patient states that she does not use many drugs. What is the nurse's appropriate response to this statement?

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|---|---|
| a. | "Tell me about the drugs you are using currently." |
| b. | "To some people six or seven is not many." |
| c. | "Do you mean prescription drugs or illicit drugs?" |
| d. | "How often are you using these drugs?" |

ANS: A
"Tell me about the drugs you are using currently" is an open-ended question that allows patients to provide further data. "To some people six or seven is not many" is a comment that does not ask a question or obtain useful data. "Do you mean prescription drugs or illicit street drugs?" is a closed-ended question that yields data about the type of drugs used only. "How often are you using these drugs?" asks about frequency of drug use, which is not useful until the drugs are known.

DIF: Cognitive Level: Apply REF: p. 11
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Therapeutic Communications

8. A nurse is interviewing a patient who was diagnosed with type 2 diabetes mellitus 6 months ago. Since that time, the patient has gained weight and her blood glucose levels remain high. The nurse suspects that the patient is noncompliant with her diet. Which response by the nurse enhances data collection in this situation?

| | |
|---|---|
| a. | "Tell me about what foods you eat and the frequency of your meals." |
| b. | "What symptoms do you notice when your blood sugar levels are high?" |
| c. | "You need to follow what the doctor has prescribed to manage your disease." |
| d. | "Tell me what you know about the cause of type 2 diabetes." |

ANS: A
"Tell me about what foods you eat and the frequency of your meals" gathers more data from the patient to help the nurse confirm if noncompliance is the reason for the weight gain and high glucose levels. "What symptoms do you notice when your blood sugar levels

are high?" does not help the nurse determine if the patient is noncompliant. It may be useful later when teaching the patient about her disease. "You need to follow what the doctor has prescribed to manage your disease" does not provide additional data for the nurse and may be viewed as authoritarian and paternalistic. "Tell me what you know about the cause of type 2 diabetes" assumes that the reason for the weight gain and high glucose levels is a lack of knowledge. A more therapeutic approach is to gather more data from the patient about how the diabetes has been managed.

DIF: Cognitive Level: Apply REF: p. 11
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Therapeutic Communications

9. A male patient tells the nurse that he rarely sleeps more than 4 hours a night and has not experienced any problems because of the lack of sleep. Which response by the nurse is most appropriate?

| | |
|---|---|
| a. | "That is interesting." |
| b. | "Only 4 hours of sleep? How do you stay awake during the day?" |
| c. | "Really? Everyone needs more sleep than that." |
| d. | "Did I understand that you sleep 4 hours every night?" |

ANS: D
"Did I understand that you sleep 4 hours every night?" is a reflection technique that allows the nurse to confirm and obtain additional information. "That is interesting" does not provide an opportunity for the patient to explain any reason for the number of hours of sleep. "Only 4 hours of sleep? How do you stay awake during the day?" questions the accuracy of the patient's data and may not encourage the patient to give further details. "Really? Everyone needs more sleep than that" can be perceived as argumentative, but does not encourage further data from the patient.

DIF: Cognitive Level: Apply REF: p. 11
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Therapeutic Communications

10. Which technique should the nurse use to obtain more data about a patient's vague or ambiguous statement?

| | |
|---|---|
| a. | Laughing and smiling during conversation |
| b. | Using phrases such as "Go on," and "Then?" |
| c. | Repeating what the patient has said, but using different words |
| d. | Asking the patient to explain a point |

ANS: D

Asking the patient to explain a point is clarification, which is used to obtain more information about conflicting, vague, or ambiguous statements. Laughing and smiling during conversation may show attentiveness during the interview, but does not help to clarify vague information. Using phrases such as "Go on" and "Then?" encourages patients to continue talking, but does not help clarify. Rephrasing what the patient has said is restatement. It confirms your interpretation of what they said, but does not encourage additional talking.

DIF: Cognitive Level: Understand REF: p. 11
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Therapeutic Communications

11. What does the nurse say to obtain more data about a patient's vague statement about diet such as, "My diet's okay"?

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|---|---|
| a. | "Eating a variety of meats, fruits, and vegetables each day is important." |
| b. | "Give me an example of the foods you eat in a typical day." |
| c. | "Go on." |
| d. | "Does your diet meet your needs or does it need improvement?" |

ANS: B
"Give me an example of the foods you eat in a typical day." This statement asks the patient to clarify the vague statement, "My diet is okay." "Eating a variety of meats, fruits, and vegetables each day is important." While this statement is true, it does not obtain data about what foods the patient consumes. "Go on" encourages patients to continue talking, but does not help clarify what foods are consumed. "Does your diet meet your needs or does it need improvement?" This response does not help clarify what foods the patient eats. Also it contains two questions rather than asking one question at a time.

DIF: Cognitive Level: Apply REF: p. 11
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Therapeutic Communications

12. While giving a history, a male patient describes several events out of order that occurred in different decades in his life. What technique does the nurse use to understand the timeline of these events?

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|---|---|
| a. | State the order of events as understood and ask the patient to verify the order. |
| b. | Draw conclusions about the order of events from data given. |
| c. | Ask the patient to elaborate about these events. |
| d. | Ask the patient to repeat what he said about these events. |

ANS: A
State the order of events as understood and ask patient to verify the order is correct. This **therapeutic** technique is useful when interviewing a patient who rambles or does not provide sequential data. Drawing conclusions about the order of events is interpretation. In this example, the sequence of events is more relevant than an interpretation. The nurse may have difficulty interpreting an unclear sequence of events. Asking the patient to elaborate about these events will not provide order to the sequence of events. Asking the patient to repeat what he said about these events will not necessarily provide a sequence of events.

DIF: Cognitive Level: Understand REF: p. 11
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Therapeutic Communications

13. A male patient is very talkative and shares much information that is not relevant to his history or the reason for his admission. Which action by the nurse improves data collection in this situation?

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|---|---|
| a. | Terminate the interview. |
| b. | Use closed-ended questions. |
| c. | Ask the patient to stay on the subject. |
| d. | Ask another nurse to complete the interview. |

ANS: B
Using closed-ended questions is useful to obtain specific data when open-ended questions are not obtaining the needed data. Terminating the interview is not beneficial to the patient and does not allow data collection. Asking the patient to stay on the subject is not therapeutic and may result in less data collection. Asking another nurse to complete the interview may not be practical and interrupts the nurse-patient relationship that has been established.

DIF: Cognitive Level: Understand REF: p. 11 | p. 12
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Therapeutic Communications

14. A patient answers questions quietly and appears sad. While answering questions about her marriage, she begins to cry. Which response by the nurse is appropriate in this situation?

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|---|---|
| a. | “Don’t cry! I’ll come back when you’ve settled down.” |
| b. | “I only have a few more questions to ask, and then I’ll leave you alone for a while.” |
| c. | “Everyone has ups and downs in their marriage. What problems are you having?” |
| d. | “I see that you are upset. Is there something you’d like to discuss?” |

ANS: D
"I see that you are upset. Is there something you'd like to discuss?" shows that the nurse is attentive to the patient's feelings and does not make assumptions about the reason why the patient is crying. The crying may signify additional data the nurse needs to collect during this interview. "Don't cry! I'll come back when you've settled down" is not a therapeutic response. The nurse needs to support the patient rather than leave her. "I only have a few more questions to ask, and then I'll leave you alone for a while" is not a therapeutic response. The nurse is more concerned about getting the history than the patient's response. "Everyone has ups and downs in their marriage. What problems are you having?" is not a therapeutic response. The nurse is assuming there are problems in the marriage instead of collecting more data.

DIF: Cognitive Level: Apply REF: pp. 11-12 | pp. 11-13
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Therapeutic Communications

15. During an interview, a patient begins to cry and appears angry. Which response by the nurse is most therapeutic?

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|---|---|
| a. | "This topic prompted an emotional response, tell me what you are feeling." |
| b. | "This topic does not usually cause such an emotional response." |
| c. | "Calm down and tell me what is wrong." |
| d. | "I will leave you alone for a few minutes so you can pull yourself together." |

ANS: A
Acknowledging the patient's feelings and encouraging their expression communicates acceptance of the emotion. Crying is a natural behavior and should be permitted. "This topic does not usually cause such an emotional response" may be perceived by the patient as judgmental and it does not help the patient meet the current need. Encouraging the patient to stop crying so that the nurse can help is not supportive of the patient's current need. The therapeutic action is to postpone further questioning until the patient is ready to proceed. Leaving the room so that the patient can be alone is not supportive of the patient.

DIF: Cognitive Level: Apply REF: p. 12
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Therapeutic Communications

16. In which situation is the nurse's use of closed-ended questions most appropriate?

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|---|---|
| a. | When clarifying vague or conflicting data |
| b. | When obtaining a history from an overly talkative patient |
| c. | When encouraging a patient to elaborate on details of his or her history |

| | |
|---|---|
| d. | When collecting data about the current health problem |

ANS: B
When obtaining a history from an overly talkative patient, a nurse can resort to closedended questions to complete the data collection in a timely manner. When clarifying vague and conflicting data, the nurse needs to use open-ended questions to obtain data. When encouraging the patient to elaborate on details of his or her history, the nurse needs to use open-ended questions to obtain the details. When collecting data about the current problem, the patient needs to describe the symptoms that brought him or her to seek help. These details are not collected with closed-ended questions.

DIF: Cognitive Level: Understand REF: p. 12
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Therapeutic Communications

17. The nurse is interviewing a woman with her husband present. The husband answers the questions for the wife most of the time. What is the most appropriate therapeutic nursing action to hear the patient's viewpoint?

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|---|---|
| a. | Continue the interview. |
| b. | Ask the husband to step out of the room. |
| c. | Ask another nurse to complete the interview. |
| d. | Tell the woman to speak up for herself. |

ANS: B
Asking the husband to step out of the room will allow the patient to answer questions in her own way. Continuing the interview is not a therapeutic action because the nurse needs to obtain the patient's answers to the questions. Asking another nurse to complete the interview does not solve the problem that the husband is answering questions for his wife. Telling the woman to speak up for herself does not solve the problem and may interfere with the therapeutic relationship between the patient and the nurse.

DIF: Cognitive Level: Remember REF: pp. 12-13
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Therapeutic Communications

18. A female Korean patient accompanied by her husband and son comes to the emergency department (ED) complaining of abdominal pain. The patient speaks and understands Korean only. Which person is the appropriate choice for the nurse to use to get a history from this patient?

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|---|---|
| a. | The patient's husband who speaks Korean and English |
| b. | The patient's son who speaks Korean and English |
| c. | A male technician who works in the ED who speaks Korean and English |

| | |
|---|---|
| d. | A female interpreter who speaks Korean and English and is available by phone |

ANS: D

A female interpreter who speaks Korean and English and is available by phone is the best choice because she can communicate with the patient and is the same gender as the patient. The patient's husband who speaks Korean and English is not the best choice because he is a family member and may alter the meaning of what is said. The patient's son who speaks Korean and English is not the best choice because he is a family member and may alter the meaning of what is said. A male technician working in the ED who speaks Korean and English is not a good choice because the patient may feel uncomfortable giving a history to a stranger who is male.

DIF: Cognitive Level: Understand REF: p. 13
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Cultural Diversity | NCLEX Patient Needs: Psychosocial Integrity: Therapeutic Communications

19. Which nurse demonstrates culturally competent care for a female patient from Russia?

| | |
|---|---|
| a. | Nurse A who asks the patient about cultural factors that influence health care |
| b. | Nurse B who interacts with every patient from Russia in the same manner |
| c. | Nurse C who learns the cultural variables of every culture, including Russia |
| d. | Nurse D who relies on her previous experience with patients from Russia |

ANS: A

Asking the patient about cultural factors that influence health care is demonstrating culturally competent care, along with interacting with each patient as a unique person who is a product of past experiences, beliefs, and values. Interacting with every patient from Russia in the same manner does not allow for the uniqueness of each person within the same culture. Learning the cultural variables of every group encountered can be valuable but it is impractical to learn about all cultures because each patient is unique. A better approach is to ask patients about their beliefs. Relying on previous experience with patients from Russia does not allow for the uniqueness of each person within the same culture.

DIF: Cognitive Level: Understand REF: p. 13
TOP: Nursing Process: Assessment
MSC: NCLEX Patient Needs: Psychosocial Integrity: Cultural Diversity

20. For which patient is a focused health history most appropriate?

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|---|---|
| a. | A new patient at the health clinic for an annual examination |