Developing Therapeutic Relationships — Nutritious Nursing

1. What are goals of therapeutic relationships? Select all that apply:
2. Support clients and families to understand the client’s experience
3. Make the client less likely to press call button frequently
4. Provide support to help clients and families make health care decisions
5. Assist clients to cope and find meaning in their illness
6. Connect clients/families with other members of the team
7. Empower clients with knowledge and tools they need to navigate and negotiate their care
8. What is client centered care? (CCC) Select all that apply.
9. An approach to practice established through the formation of therapeutic relationships
10. Fosters relationships between all care providers
11. Focuses on the care providers’ needs
12. Focuses on individual preference, values, beliefs, and needs
13. Which of the following is not a guiding principle of CCC?
14. Presence
15. Purpose
16. Positive regard
17. Sympathy
18. You and your patient decide that showers on Tuesdays, Thursdays and Sundays are best. What is this demonstrating?
19. Voluntary consent
20. Being an advocate
21. Mutuality
22. Validation
23. You ask your 75 year old patient what he thinks of the procedure you are about to perform. What are you demonstrating?
24. Voluntary consent
25. Being an advocate
26. Mutuality
27. Validation
28. You are discussing with your client their plan of treatment and reviewing the care plan you created. Which phase of therapeutic relationships are you currently in?
29. Preinteraction phase
30. Orientation phase
31. Identification phase
32. Mutuality phase
33. Which of the following are phases in the therapeutic relationships? Select all that apply.
34. Preinteraction phase
35. Orientation phase
36. Identification phase
37. Evaluation phase
38. Exploitation phase
39. Resolution phase
40. Mutuality phase
41. You walk in your patient’s room and meet them for the first time. You learn that they would like their code to be DNR instead of a full code. Which step of the nursing process are you in?
42. Assessment
43. Diagnosis
44. Planning
45. Intervention
46. Which of the following planning goals is correct and will most likely be obtainable?
47. Client will lose 10 pounds in 3 months.
48. Client will lose 10 pounds in 3 months by eating well-balanced meals.
49. Client will walk a 5k each week.
50. Client will walk 10 minutes twice a day
51. Which of the following is not a way of incorporating validation into the nursing process?
52. Validating interpretation of collected data
53. Identifying actual or potential problems and validating the nursing diagnoses with the client
54. Determining expected and desired outcomes
55. Deciding on nursing strategies
56. Implementing nursing actions with assistance from client and encouraging client participation
57. Evaluating the outcomes in consultation with client
58. All of these incorporate validation
59. Why are therapeutic relationships important? Select all that apply.
60. Contributes to growth and development of clients and nurses
61. Gained trust
62. Faster recovery
63. Less collaboration needed
64. Which of the following would not be considered an approach to the nursing process?
65. Evaluate outcomes only with other staff
66. Exploring your beliefs
67. Upholding client responsibility for their health
68. Openly discuss issues and collaborate
69. Your client is Erika, a stubborn but very intelligent person. She refuses to cooperate with your care plan. What should you do?
70. Switch assigned clients with another nurse
71. Ask another nurse to talk to Ida
72. Give her an article to read about your proposed care
73. Trick her into signing consent
74. When Erika refuses your proposed care plan, how should you confront her? Select all that apply.
75. Anticipate her reaction
76. Ensure the environment is private and non-judgemental
77. Focus on the person, not the behavior
78. Support the client’s right to self determination
79. You work on a children’s GI unit in the hospital. Your patient is 6 years old and is being fed via NG tube. What would be an appropriate example of self-disclosure?
80. “I had a NG tube last month because I was super sick. I was unable to eat for weeks and I had to call my boyfriend to come and bring me to the hospital. It was awful!”
81. “I had an NG tube last month. It wasn’t the most pleasant experience, but I can assure you it won’t last more than a few hours. Do you have any questions?”
82. “It’s going to make you gag a little going down, and it’s going to make your nose bleed. Trust me, I had an NG last month so I know what it’s like.”
83. “I had an NG tube last month. It was a horrible experience but I was able to gain several pounds, can you tell?”
84. Which of the following is not true regarding human development?
85. People’s worldview changes as they age and grow
86. People’s self-concept stays the same throughout the life span
87. How people interact with the world shapes our psychology and self-concept
88. Each development stage consists of a crisis and a resolution
89. Alex is 4 weeks old. He cries when he is hungry. What crisis has been met?
90. Trust vs. Mistrust
91. Autonomy vs. shame/doubt
92. Self-identification vs. loss
93. Honesty vs. dishonesty
94. Alex is now 2 years old. He learns that he can control and negotiate his behaviors, especially when it comes to running around the house naked. What is true about this stage? Select all that apply.
95. It is autonomy vs. shame/doubt
96. He learns to try new things
97. He develops purpose
98. He develops willpower
99. Alex got a tricycle for Christmas. He learns to try new things but isn’t very good at pedaling or steering. What stage is he in, according to Erikson?
100. Industry vs. inferiority
101. Identity vs. role confusion
102. Initiative vs. guilt
103. Mastery vs. purpose
104. Alex is now 6 and goes to school. Since he is in the industry vs. inferiority stage, what should you be sure to do as a parent? Select all that apply.
105. Give tasks that he can reasonably do
106. Give external validation
107. Allow him to try different roles to decide which fits best
108. Give internal validation
109. Alex is a teenager and decides he no longer likes his long, curly hair. He instead cuts it short and styles it straight. What stage is he in?
110. Clothing vs. Behavior
111. Fit vs. Misfit
112. Independence vs. Dependence
113. Identity vs. Role confusion
114. Which of the following is false about caring for hospitalized children?
115. Communication requires patience, imagination, and creative applications
116. Children’s ability to understand is influenced by their cognitive and developmental level
117. Nurses need to develop an understanding of how the child feels in their perspective
118. Children do not respond well to caregivers to take extra time to relate to them
119. Michael was hospitalized due to a high fever. He is normally potty trained, but he has been having accidents in the bed. What is this called?
120. Negative response
121. Regression
122. Acting out
123. Feeding disturbances
124. Which of the following are factors that influence communicating with children? Select all that apply.
125. Cognitive development
126. Language development
127. Stress
128. Loss of control and routine
129. Which statement best describes Erikson and Piaget’s development stages? Select all that apply.
130. Erikson focuses on cognitive development
131. Piaget focuses on psychosocial
132. Erikson focuses on psychosocial
133. Piaget focuses on cognitive development
134. Your patient is a 2 month old boy, who has been very upset and distraught for the past few hours. How should you interact with him?
135. Touch them, talk to them, hold them close
136. Reassure that his hospitalization is not punishment
137. Incorporate structured grammar and logical thinking so he understands better
138. Allow him to use his magical thinking to understand the situation
139. When starting an IV on a 3 year old boy, what should you say?
140. “It’s okay, it won’t hurt, I promise!”
141. “If you would hold still, it wouldn’t hurt.”
142. “You are such a good boy, you’re doing such a great job.”
143. “If you’re a good boy, I won’t have to do it again.”
144. Your patient is an 8 year old girl who broke her arm. What do you know about her cognitive development?
145. She uses magical thinking to understand life processes
146. She is beginning to understand symbolics
147. She might think that her broken arm is punishment for not cleaning her room
148. She has very concrete logic and operations
149. Your 8 month old patient cries whenever you hold him or come near to him, but he needs his cough suppressant PO. How should you administer it?
150. Swaddle him so he feels safe and calm
151. Use the parents to give care
152. Use mostly verbal communication
153. Instruct the mother to hold his arms down so you can administer medication
154. Which of the following are tactics to more easily give care to a 3-5 year old? Select all that apply.
155. Avoid long delays before painful procedures
156. Complete procedures quickly and offer simple explanation
157. Only perform painful procedures in the child’s personal hospital room
158. Allow the child to play on an iPad while you perform a procedure
159. Your 30 year old patient informs you that he does not have any strong relationships with friends or family. What do you know about his psychosocial development?
160. He has not met the intimacy vs. isolation stage
161. He has achieved fidelity
162. He has built a strong support system
163. He is in the generativity vs. stagnation phase
164. Which of the following is false about the middle age psychosocial stage?
165. It is referred to as generativity vs. stagnation
166. They develop a concern for others and a sense of caring
167. They learn to balance work, family, life and themselves
168. It involves giving and receiving love in order to build strong support systems
169. What is true about family? Select all that apply.
170. It is dynamic and changes frequently
171. It is two or more people joined by marriage, birth/adoption and live together
172. It does not transmit customs and values to children
173. It serves as a buffer between its members and societal demands
174. Your patient is a baby with a mom, dad, step mom and step dad. What kind of family does the child have?
175. Nuclear family
176. Blended family
177. Binuclear family
178. Extended family
179. Which of the following is not a role of the parent?
180. Leadership
181. Warmth
182. Control
183. Mutual partnership
184. Mom and Dad have set rules for their child, but are also very warm and comforting. Which parenting style do they reflect?
185. Authoritative
186. Authoritarian
187. Permissive
188. Indifferent
189. Which of the following describe why family theory is important? Select all that apply.
190. Understanding how families function
191. Environment-family interchange
192. The family’s response to health and illness
193. Consistent dynamics of family over time
194. Which of the following is false about Bowen’s Family Systems Theory?
195. During times of crisis, families function as an interactive emotional unit
196. Members develop automatic communication patterns
197. Once anxiety heightens within the system, dysfunctional communication patterns can emerge
198. Negative emotional energy that fuels dysfunctional communication will fade after emotions settle
199. If you are considered to be intact rather than inmeshed, how do you interact with your family?
200. You respond in a similar style as your mother
201. You distance yourself emotionally
202. You can define yourself apart from the family
203. You are unable to relate to your family members
204. Your patient is a 30 year old woman. Her husband and 5 and 7 year old children are at the hospital with her. What do you know about her, according to Duvall?
205. She is in stage I: beginning family, newly weds
206. She is in stage II: childbearing family
207. She is in stage IV: family with school age children
208. She is in stage VII: Middle-age parents
209. Your patient comes in to the hospital, in labor and ready to deliver her baby. What kind of stress is this, according to Frain and Lavee?
210. Routine Stressor
211. Non-routine stressor – positive
212. Non-routine stressor – negative
213. None of the above
214. You need to deliver bad news to a family. Which of the following interventions would not be appropriate?
215. Withholding important information that might be too upsetting
216. Having a physician lead the conversation
217. Use the SBAR tool to orient them to the situation and background
218. Using language they understand and staying with them
219. Your grandma loves to teach you lessons based on her experiences. What can you conclude about her psychosocial development?
220. She Is wise
221. She reviews her contributions with satisfaction
222. She is in despair
223. She has integrity
224. What is true about older adults?
225. 85% have more than one chronic conditions
226. 85% have more than two chronic conditions
227. Many adults have the chronic condition of frailty
228. Older adults are unable to retain high levels of physical function
229. Which of the following is not a right of older adults?
230. Live in safe and appropriate living conditions
231. Can participate in all aspects of their health care
232. They are not feasible to make their own decisions
233. They have equal access to health care and services
234. What is successful aging?
235. Decreased quality of life
236. Relinquishing the central components of self-definition
237. Poor opportunities for health, participation and security
238. Adapting to age related changes flexibly
239. Which of the following are barriers to caring for the aging population? Select all that apply.
240. Increased number of providers accepting medicare clients
241. Navigating the complexity of the medical system
242. Limitations of chronic health care services
243. Ageism
244. Your client is hard of hearing. What would be the best intervention?
245. Use a very loud voice
246. Make sure the client can see your mouth
247. Allow for background noise
248. Sit near poor ear
249. Your nursing home has a Sundown program for those who have dementia. What is this program preventing/alleviating?
250. Poor memory
251. Slurred speech
252. Reversed sleep schedule
253. Behaviors, anxiety and demanding behaviors occurring later in the day
254. What is the best nursing care to give to a patient with dementia?
255. Focus on difficult behavior
256. Restrain
257. Persist when the client is tired
258. Identify emotions behind client’s words
259. Why is incorporating communication deficits into nursing care important? Select all that apply.
260. Improved health and health care
261. The patient’s right to make decisions
262. To maximize the clients ability to successfully communicating with the health care system
263. Optimal quality of life
264. Your patient does not speak fluent English. If you do not provide an interpreter, what legal mandate are you violating?
265. Rehabilitation Act
266. American with Disabilities Act
267. Title VI of the Civil Rights Act
268. Language Barriers Act of 1964
269. Meagan is giving you report on your assigned patient. She states that he is a 77-year-old man with presbycusis. How should you alter your care?
270. Exaggerate your words
271. Use Braille
272. Extend your arm and allow the client to take your arm
273. Use facial expressions, hand signals and gestures
274. Meagan is giving you report on your assigned patient. She states that he is a 77-year-old man with presbyopia. How should you alter your care?
275. Exaggerate your words
276. Check that they have their newest eyewear prescription
277. Use facial expressions, hand signals and gestures
278. Use small, cursive print items
279. Your patient is a small autistic child with receptive aphasia. What do you know about them so far? Select all that apply.
280. They are completely unable to speak
281. They have trouble processing what they hear
282. They have problems reading, writing, and following directions
283. They cannot organize their words into meaningful phrases
284. Your 87 year old resident had a stroke last month and has global aphasia. How should you go about conversing with them?
285. Ask open ended questions
286. Use a speech generating device
287. Use frequent, prolonged conversations
288. Talk about several things at a time
289. Which of the following describes loss? Select all that apply.
290. An absence of something
291. People who experience loss lose their sense of wholeness
292. Death is the final loss
293. Death is the only loss
294. Your patient is actively dying. What symptoms would you NOT report to the oncoming nurse?
295. Increased pain
296. Cheyne-Stokes respirations
297. Decreased pharyngeal secretions
298. Hallucinations
299. Your patient is actively dying and is in/out of consciousness. What would be effective things to communicate to the client’s family? Select all that apply.
300. “Be sure to talk to her frequently, even though she’s unconscious.”
301. “I will not give her morphine because it decreases the need for air.”
302. “I will do everything I can to make sure she’s comfortable. If there’s anything I can do or adjust, let me know.”
303. “I know this is a frightening time. Would you like to talk about what your fears are? Would you like me to get the chaplain?”
304. Bringing in Hospice for a dying patient would be an example of which type of nursing care?
305. Palliative Care
306. Collaborative Care
307. Supportive Care
308. Quality of Death Care
309. Which of the following variables does not affect the grieving process?
310. Cultural beliefs
311. Nature of relationship
312. Spiritual background
313. All of these affect the grieving process
314. After Amy’s grandma died suddenly, she experienced waves of symptoms, like shortness of breath, emptiness in stomach, weakness and intense pain. These symptoms would occur, then she would return back to normal. What pattern of grieving is she experiencing? Select all that apply.
315. Anticipatory Grief
316. Somatic Distress
317. Acute Grief
318. Traumatic Grief
319. Your resident is actively dying and is consciously aware of her condition/state. Her feelings are dramatic and ambivalent. Which of the following best describes this situation?
320. Anticipatory Grief
321. Remissive coping mechanism
322. Chronic sorrow
323. Traumatic Grief
324. What is the correct order of the five stages of grief?
325. Shock, Anger, Depression, Acceptance, Bargaining
326. Denial, Anger, Bargaining, Depression, Acceptance
327. Shock, Denial, Anger, Depression, Acceptance
328. Acceptance, Depression, Bargaining, Anger, Denial
329. Which of the following describe Lindemann’s Grief Work theory? Select all that apply.
330. Grief may occur immediately or delayed
331. Pathologic grief occurs when symptoms are exaggerated or absent
332. There are three components of support: open, empathetic communication, honesty, and tolerance of emotional expression
333. The goal is to move through grief and back into life again
334. Susan goes through the grieving process of her grandma. At first, she doesn’t believe her grandma Is dying, but once she arrives at the hospital she realizes how grim the situation is. After the funeral, she learns how to adapt back into normal life without her grandma. According to Engel, what phases is she working through?
335. Shock, Anger, then Acceptance
336. Denial, awareness, then Depression
337. Adaptation, awareness, then shock
338. Shock, awareness, then adaptation
339. What would be the best questions to ask when assessing the dying client’s family? Select all that apply.
340. “Are you fearful of her dying?”
341. “Do you have any cultural or spiritual beliefs that need to be part of your care?”
342. “How do you feel about visitors? How much information would you like them to receive?”
343. “Would you like to speak to a physician?”