

1. The nurse is working with a patient to identify health goals and interventions to achieve the goals. In which phase of the nursing process are the nurse and patient participating?
  - A) Assessment
  - B) Diagnosis
  - C) Planning
  - D) Evaluation
  
2. The nurse is changing a patient's plan of care because identified goals have not been achieved. The nurse is working within which phase of the nursing process?
  - A) Assessment
  - B) Planning
  - C) Implementation
  - D) Evaluation
  
3. During an assessment, the nurse asks a patient with low back pain what has been used to try to alleviate the pain. The nurse is asking questions to determine which category of the mnemonic OLD CART?
  - A) Treatments
  - B) Duration
  - C) Location
  - D) Onset
  
4. The nurse is completing an assessment of a patient with cardiac and respiratory problems. Which data would the nurse categorize as subjective?
  - A) Blood pressure 168/94 mm Hg
  - B) Respiratory rate 28 and shallow
  - C) Heart rate 94 and irregular
  - D) Palpitations every morning
  
5. After completing an assessment, the nurse is generating the patient's problem list. Which problem would have the highest priority for the patient?
  - A) Shoulder pain
  - B) Insomnia
  - C) Anxiety about work
  - D) Lack of appetite

6. The nurse has identified that a patient has 24 health issues to be included on the problem list. What can the nurse do to help focus on the patient's most acute health care needs first?
- A) Place the problems in alphabetical order.
  - B) Separate the list into active and inactive problems.
  - C) List the problems according to body system.
  - D) Ask the patient which problem is the highest priority.
7. The nurse is determining diagnoses that would be appropriate for a patient with heart failure. Which diagnosis would have the highest priority for the patient?
- A) Activity intolerance related to shortness of breath and fatigue
  - B) Ineffective health maintenance related to last mammogram being 2 years ago
  - C) Knowledge deficit related to lack of information regarding low-sodium diet
  - D) Anxiety related to hospitalization and inability to attend to home and work needs
8. The nurse is developing nursing diagnosis for a patient. Which health concerns would be appropriate for the nurse to identify as health maintenance problems? (Select all that apply.)
- A) Prescribed medication to treat prostate cancer
  - B) Instruction needed on newly prescribed renal diet
  - C) Importance of having pneumococcal pneumonia vaccination
  - D) Exercises for range of motion and mobility due to arthritis
  - E) Schedule for hemodialysis to start three times each week
9. The nurse has completed a plan of care for a patient having a total knee replacement. What should the nurse do prior to implementing this plan of care?
- A) Discuss the plan of care with the nurse manager.
  - B) Share the assessment and plan with the admitting health care provider.
  - C) Ask the patient for opinions and willingness to proceed with the interventions.
  - D) Identify which quality improvement activities will be included in the plan of care.
10. After reassessing a patient with a foot wound, the nurse identifies a new health problem of reduced breath sounds in both lung bases. What should the nurse do with this information? (Select all that apply.)
- A) Notify the nurse manager.
  - B) Formulate a nursing diagnosis.
  - C) Add interventions to the care plan.
  - D) Add the new problem to the problem list.
  - E) Nothing because this is an expected finding.

## **Answer Key**

1. C
2. D
3. A
4. D
5. A
6. B
7. A
8. B, C, D
9. C
10. B, C, D