# Hesi health assessment questions and answers

Health Assess Interv & Eval (Stephen F. Austin State University)

# **HESI Health Assessment Questions and Answers**

1) The nurse hears bilateral louder, longer, and lower tones when percussing over the lungs of a

4-year old child. What should the nurse do next?

a) Palpate over the area for increased pain and tenderness.

b) Ask the child to take shallow breaths and percuss over the area again.

c) Refer the child immediately because of an increased amount of air in the lungs.

#### d) Consider this a normal finding for a child this age and proceed with the examination.

2) A patient has suddenly developed shortness of breath and appears to be in significant respiratory distress. After putting a call in to the physician and placing the patient on oxygen, which of these is the best action for the nurse to take when assessing the patient further?a) Count the patient's respirations.

#### b) Percuss the thorax bilaterally, noting any differences in percussion tones.

c) Call for a chest x-ray and wait for the results before beginning an assessment.

d) Inspect the thorax for any new masses and bleeding associated with respirations.

3) The nurse is teaching a class on basic assessment skills. Which of these statements is true regarding the stethoscope and its use?

a) The slope of the earpieces should point posteriorly (toward the occiput).

#### b) The stethoscope does not magnify sound but does block out extraneous room noise.

c) The fit and quality of the stethoscope are not as important as its ability to magnify sound.

d) The ideal tubing length should be 22 inches to dampen distortion of sound.

4) The nurse is preparing to use a stethoscope for auscultation. Which statement is true regarding the diaphragm of the stethoscope?

# a) The diaphragm is used to listen for high-pitched sounds.

b) The diaphragm is used to listen for low-pitched sounds.

c) The diaphragm should be held lightly against the person's skin to block out low-pitched sounds.

d) The diaphragm should be held lightly against the person's skin to listen for extra heart sounds and murmurs.

5) Before auscultating the abdomen for the presence of bowel sounds on a patient, the nurse should:

a) Warm the end piece of the stethoscope by placing it in warm water

b) Leave the gown on so that the patient does not get chilled during the examination

c) Make sure that the bell side of the stethoscope is turned to the -on position

d) Check the temperature of the room and offer blankets to the patient if he or she feels cold

6) The nurse will use which technique of assessment to determine the presence of crepitus, swelling, and pulsations?

a) Palpation

b) Inspection

c) Percussion

d) Auscultation

7) The nurse is preparing to use an otoscope for an examination. Which statement is true regarding the otoscope?

a) The otoscope is often used to direct light onto the sinuses.

b) The otoscope uses a short, broad speculum to help visualize the ear.

c) The otoscope is used to examine the structures of the internal ear.

# d) The otoscope directs light into the ear canal and onto the tympanic membrane.

8) An examiner is using an ophthalmoscope to examine a patient's eyes. The patient has astigmatism and is nearsighted. The use of which of these techniques would indicate that the examination is being performed correctly?

a) Using the large full circle of light when assessing pupils that are not dilated

- b) Rotating the lens selector dial to the black numbers to compensate for astigmatism
- c) Using the grid on the lens aperture dial to visualize the external structures of the eye

# d) Rotating the lens selector dial to bring the object into focus

9) The nurse is unable to palpate the right radial pulse on a patient. The best action would be to:

- a) Auscultate over the area with a fetoscope
- b) Use a goniometer to measure the pulsations

### c) Use a Doppler device to check for pulsations over the area

d) Check for the presence of pulsations with a stethoscope

10) The nurse is preparing to perform a physical assessment. The correct action by the nurse is reflected by which statement?

a) The nurse performs the examination from the left side of the bed.

b) The nurse examines tender or painful areas first to help relieve the patient's anxiety.

c) The nurse follows the same examination sequence regardless of the patient's age or condition.

# d) The nurse organizes the assessment so that the patient does not change positions too often.

11) A man is at the clinic for a physical examination. He states that he is —very anxious about the physical examination. What steps can the nurse take to make him more comfortable?

# a) Appear unhurried and confident when examining him.

**b**) Stay in the room when he undresses in case he needs assistance.

c) Ask him to change into an examining gown and take off his undergarments.

**d**) Defer measuring vital signs until the end of the examination, which allows him time to become comfortable.

12) When performing a physical examination, safety must be considered to protect the examiner and the patient against the spread of infection. Which of these statements describes the most appropriate action the nurse should take when performing a physical examination?a) There is no need to wash one's hands after removing gloves, as long as the gloves are still intact.

# b) Wash hands before and after every physical patient encounter.

c) Wash hands between the examination of each body system to prevent the spread of bacteria from one part of the body to another.

d) Wear gloves throughout the entire examination to demonstrate to the patient concern regarding the spread of infectious diseases.

13) The nurse is examining a patient's lower leg and notices a draining ulceration. Which of these actions is most appropriate in this situation?

a) Wash hands and contact the physician.

b) Continue to examine the ulceration and then wash hands.

#### c) Wash hands, put on gloves, and continue with the examination of the ulceration.

d) Wash hands, proceed with rest of the physical examination, and then continue with the examination of the leg ulceration.

14) During the examination, it is often appropriate to offer some brief teaching about the patient's body or the examiner's findings. Which of these statements by the nurse is most appropriate?

a) -Your atrial dysrhythmias are under control.

b) -You have pitting edema and mild varicosities.

# () "Your pulse is 80 beats per minute. This is within the normal range."

15) The nurse keeps in mind that the most important reason to share information and offer brief teaching while performing the physical examination is to help:

a) The examiner feel more comfortable and gain control of the situation

# b) Build rapport and increase the patient's confidence in the examiner

c) The patient understand his or her disease process and treatment modalities

d) The patient identify questions about his or her disease and potential areas of patient education

16) The nurse is examining an infant and prepares to elicit the Moro reflex at which time during the examination?

a) When the infant is sleeping

# b) At the end of the examination

- c) Before auscultation of the thorax
- d) Halfway through the examination

17) When preparing to perform a physical examination on an infant, the nurse should:

# a) Have the parent remove all clothing except the diaper on a boy

- b) Instruct the parent to feed the infant immediately before the examination
- c) Encourage the infant to suck on a pacifier during the abdominal examination
- d) Ask the parent to briefly leave the room when assessing the infant's vital signs

18) A 6-month-old infant has been brought to the well-child clinic for a check-up. She is

currently sleeping. What should the nurse do first when beginning the examination?

# a) Auscultate the lungs and heart while the infant is still sleeping.

b) Examine the infant's hips because this procedure is uncomfortable.

c) Begin with the assessment of the eye and continue with the remainder of the examination in a head-to-toe approach.

**d**) Wake the infant before beginning any portion of the examination to obtain the most accurate assessment of body systems.

19) A 2-year-old child has been brought to the clinic for a well-child check-up. The best way for the nurse to begin the assessment is reflected by which statement?

a) Ask the parent to place the child on the examining table.

b) Have the parent remove all of the child's clothing before the examination.

#### c) Allow the child to keep a security object such as a toy or blanket during the examination.

d) Initially focus interactions on the child, essentially –ignoring || the parent, until the child's trust has been obtained.

20) The nurse is examining a 2-year-old child and asks, —May I listen to your heart now? Which critique of the nurse's technique is most accurate?

a) Asking questions enhances the child's autonomy.

b) Asking the child for permission helps to develop a sense of trust.

c) This is an appropriate statement because children at this age like to have choices.

d) Children at this age like to say "No." The examiner should not offer a choice when there is none

21) A woman brings her husband to the clinic for an examination. She is particularly worried because after a recent fall, he seems to have lost a great deal of his memory of recent events. Which statement reflects the nurse's best course of action?

# a) The nurse should plan to perform a complete mental status examination.

**b**) The nurse should refer him to a psychometrician.

c) The nurse should plan to integrate the mental status examination into the history and physical examination.

**d**) The nurse should reassure his wife that memory loss after a physical shock is normal and will subside soon.

22) The nurse is conducting a patient interview. Which statement made by the patient should the nurse explore more fully during the interview? The patient states that he:

a) -Sleeps like a baby

b) Has no health problems

ℓ) –Never did too good in school

It Currently is not taking any medication

23) A patient is admitted to the unit after an automobile accident. The nurse begins the mental status examination and finds that the patient's speech is dysarthric and that she is lethargic. The nurse's best approach regarding this examination is to:

a) Plan to defer the rest of the mental status examination

b) Skip the language portion of the examination and go on to assess mood and affect

c) Do an in-depth speech evaluation and defer the mental status examination to another time

d) Go ahead and assess for suicidal thoughts because dysarthria is often accompanied by severe depression

24) A 19-year-old woman comes to the clinic at the insistence of her brother. She is wearing black combat boots and a black lace nightgown over the top of her other clothes. Her hair is dyed pink with black streaks throughout. She has several pierced holes in her nares and ears and is wearing an earring through her eyebrow and heavy black makeup. The nurse concludes:

a) She probably doesn't have any problems at all.

b) She is just trying to shock people and her dress should be ignored.

c) She has manic syndrome because of her abnormal dress and grooming.

# d) That more information should be gathered to decide whether her dress is appropriate.

25) A patient has been in the intensive care unit for 10 days. He has just been moved to the medical surgical unit, and the admitting nurse is planning to perform a mental status examination on him. During the tests of cognitive function the nurse would expect that he:

a) May display some disruption in thought content

b) Will state, -I am so relieved to be out of intensive carel

#### c) Will be oriented to place and person but may not be certain of the date

d) May show evidence of some clouding of his level of consciousness

26) During a mental status examination, the nurse wants to assess a patient's affect. The nurse should ask the patient which question?

# a) "How do you feel today?"

**b**) – Would you please repeat the following words?

c) -Have these medications had any effect on your pain?

d) -Has this pain affected your ability to get dressed by yourself?