

## Chapter 2: Concepts of Health, Illness, Stress, and Health Promotion

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### MULTIPLE CHOICE

1. An understanding of health or illness by a nurse recognizes that
  1. health is the absence of illness, and illness is the presence of chronic disease.
  2. culture, education, and socioeconomic status influence one's definition of health or illness.
  3. illness is a biologic malfunction, and health is biologic soundness.
  4. lifestyle factors are the major determinant of health or illness.

ANS: 2

The nurse needs to be knowledgeable about how views of health and illness can differ from one person to another. Culture, education, and socioeconomic status each can have a significant influence on a person's view of health and illness.

DIF: Cognitive Level: Knowledge

REF: Page 13

OBJ: Theory #2

TOP: Views of Health and Illness

KEY: Nursing Process Step: Assessment

MSC: NCLEX: N/A

2. A patient who is admitted to the hospital with a diagnosis of type 2 diabetes mellitus and influenza is described as having
  1. two chronic illnesses.
  2. two acute illnesses.
  3. one chronic and one acute illness.
  4. one acute and one infectious illness.

ANS: 3

The nurse needs to be able to differentiate between chronic and acute types of illnesses. Type 2 diabetes mellitus is a chronic disease, whereas influenza is an acute illness.

DIF: Cognitive Level: Knowledge

REF: Page 14

OBJ: Theory #2

TOP: Health Promotion and Illness

KEY: Nursing Process Step: N/A

MSC: NCLEX: N/A

3. An idiopathic disease is one that
  1. is caused by inherited characteristics.
  2. develops suddenly, related to new viruses.
  3. results from injury during labor or delivery.
  4. has an unknown cause.

ANS: 4

Idiopathic disease is defined as disease whose cause is unknown.

DIF: Cognitive Level: Knowledge

REF: Page 14

OBJ: Theory #1

TOP: Types of Illness

KEY: Nursing Process Step: N/A

MSC: NCLEX: N/A

4. An example of a person with a terminal illness is

1. a 76 year old admitted to a nursing home with Alzheimer's disease who is pacing the halls and trying to "go home."
2. a 43 year old with Lou Gehrig's disease (amyotrophic lateral sclerosis) who is unable to swallow and has refused artificial nutrition or hydration.
3. a 2-year-old child who burned her esophagus by drinking drain cleaner and is being fed through a tube into her stomach.
4. a 52 year old diagnosed with lung cancer who had part of one lung removed and was on a ventilator for 2 days after surgery.

ANS: 2

A terminal illness is defined as one in which a person will live only a few months, weeks, or days. A person who refuses food and hydration will generally not live more than a few days.

DIF: Cognitive Level: Comprehension      REF: Page 14      OBJ: Theory #2  
 NAT: Stages of Illness      TOP: Stages of Illness  
 KEY: Nursing Process Step: N/A      MSC: NCLEX: N/A

5. When a person is described as being self-actualized, it means
  1. she has reached a level of achieving her full potential.
  2. no one helped that person reach her goals; she did it alone.
  3. the person has a clear understanding of her past experience.
  4. the person enjoys a healthy lifestyle that is free of illness or disease.

ANS: 1

According to Maslow's hierarchy, self-actualization means to reach one's full potential.

DIF: Cognitive Level: Comprehension      REF: Page 15      OBJ: Theory #6  
 TOP: Views of Health and Illness      KEY: Nursing Process Step: N/A  
 MSC: NCLEX: N/A

6. A current view of health and illness can be compared to a
  1. wheel, where health and illness continuously alternate as the person travels through life, uphill or downhill, bumpy or smooth.
  2. continuum, with peak wellness and death at opposite ends; the person moves back and forth in a dynamic state of change.
  3. ladder; from birth to death the individual moves down a ladder to eventual death, with illness or disease resulting from missing a rung or two.
  4. state of mind; if a person believes herself healthy, she achieves health. If she believes herself ill, she becomes ill.

ANS: 2

Each person is located on a gradual scale between high wellness and death. The continuum ranges from obvious disease to absence of detectable disease. The nurse needs to be knowledgeable about this view of health and illness.

DIF: Cognitive Level: Knowledge      REF: Page 15      OBJ: Theory #2  
 TOP: Views of Health and Illness      KEY: Nursing Process Step: N/A  
 MSC: NCLEX: N/A

7. A patient has been advised by her physician to take medication for her high cholesterol and to change her eating habits when she goes home. She tells the nurse that she will not take the medication or follow the diet plan. The nurse's best first response is to
1. emphasize to the patient how important it is to follow the doctor's advice, because the doctor knows best how to treat a patient with this kind of disease.
  2. determine whether there are cultural, socioeconomic, or religious values that cause conflicts for the patient and that prevent her from following the doctor's advice.
  3. explain that she will only get sicker and she may die of heart disease if she does not follow the doctor's orders.
  4. tell the patient that you will speak to the doctor about possible alternatives of treatment because the patient is not going to cooperate with the medical regimen.

ANS: 2

The patient may have cultural, socioeconomic, or religious values that cause conflicts that prevent her from following the doctor's instructions. To assist the patient, the nurse needs to determine why the patient is not willing or able to comply with the doctor's instructions.

DIF: Cognitive Level: Application      REF: Pages 15-16      OBJ: Theory #5  
TOP: Concepts of Health and Illness, Cultural Influences  
KEY: Nursing Process Step: Assessment      MSC: NCLEX: N/A

8. If a nurse is to practice holistic caring for the sick and promote wellness, he should
1. recognize that a change in one aspect of the person's life can alter the whole of that person's life.
  2. take responsibility for health care decisions for his patients based on expert knowledge and experience.
  3. promote state-of-the-art technology and refrain from supporting patients in the choice of nontraditional methods of health care.
  4. teach his patients to accept a religious faith that will support them in the treatment of their medical problems.

ANS: 1

Holistic care encompasses physical, mental, emotional, social, and spiritual aspects of the person. A change in one affects the others. Self-determination is supported in holistic care.

DIF: Cognitive Level: Comprehension      REF: Page 18      OBJ: Theory #6  
TOP: Holistic Approach to Caring      KEY: Nursing Process Step: Assessment  
MSC: NCLEX: N/A

9. According to Maslow's hierarchy, a patient who has physiologic needs will benefit most by meeting those needs when the nurse provides
1. signs of affection and intimacy.
  2. independence and spiritual care.
  3. social interaction and human caring.
  4. food and fluids.

ANS: 4

Food and fluids meet the physiologic need for nutrition and hydration. Items 1, 2, and 3 pertain to higher level needs.

DIF: Cognitive Level: Application      REF: Page 19      OBJ: Theory #7  
TOP: Maslow's Hierarchy of Needs      KEY: Nursing Process Step: Implementation  
MSC: NCLEX: Physiological Integrity

10. A person's awareness of a need and its importance to that person are
1. factors that the nurse must assess to prioritize care, because they may be different from person to person.
  2. ordered according to Maslow's hierarchy, with lower level needs being least compelling.
  3. based on a hierarchy in which higher level needs are more prominent and demand attention before lower level needs.
  4. usually not known to the patient and must be determined by the nurse.

ANS: 1

A person's perception of her needs must be assessed by the nurse to meet the needs of each individual patient. Needs are viewed differently from one person to the next.

DIF: Cognitive Level: Knowledge      REF: Page 21      OBJ: Theory #7  
TOP: Maslow's Hierarchy of Needs      KEY: Nursing Process Step: Assessment  
MSC: NCLEX: Physiological Integrity

11. A nurse teaches a patient how to give herself insulin and monitor her blood glucose levels so that she can perform these activities after discharge. This is an example of meeting a patient's need for
1. nutrition, by ensuring that the diet will be followed.
  2. security, by providing psychological comfort.
  3. self-esteem, by promoting independence and learning.
  4. self-actualization, by seeking knowledge and truth.

ANS: 3

Teaching activities to a patient that she must do after discharge enhances independence and promotes self-esteem.

DIF: Cognitive Level: Application      REF: Page 20      OBJ: Theory #7  
TOP: Maslow's Hierarchy of Needs      KEY: Nursing Process Step: Implementation  
MSC: NCLEX: Physiological Integrity

12. Homeostasis can be described as
1. the unchanging steady condition of humans in a changing external environment.
  2. a tendency of biologic systems toward stability of the internal environment by continuously adjusting to survive.
  3. biologic wellness that comes from the ability of the body to change and respond to physical changes in the environment.
  4. a response to stress that results from a person's choice of coping mechanisms to deal with the stress.

ANS: 2

Homeostasis results from the constant adjustment of the internal environment in response to change; it is mental, emotional, and biologic, as well as conscious and unconscious.

DIF: Cognitive Level: Comprehension REF: Page 21 OBJ: Theory #8  
TOP: Homeostasis KEY: Nursing Process Step: Assessment MSC: NCLEX: N/A

13. A patient is admitted for diagnostic tests. She is frightened of hospital procedures and is nervous about the possible outcome of the tests. She states that her mouth is dry and her heart is pounding. Her blood pressure is 168/78 mm Hg (her usual blood pressure is 140/80 mm Hg), pulse is 112 beats/min, and respirations are 22 breaths/min. The nurse will recognize that these signs and symptoms are
1. indicative of serious, acute health problems and should be reported to the physician immediately.
  2. most likely related to the disease that she is admitted to the hospital for.
  3. effects of the parasympathetic nervous system and can be ignored.
  4. effects of the sympathetic nervous system that can negatively affect the patient's health.

ANS: 4

Fear stimulates the sympathetic nervous system to produce the symptoms identified in the question. If prolonged, they negatively affect a person's health.

DIF: Cognitive Level: Application REF: Page 22; 23; Table 2-2  
OBJ: Theory #10 TOP: Adaptation KEY: Nursing Process Step: Assessment  
MSC: NCLEX: Physiological Integrity

14. According to the Selye general adaptation syndrome, a person who has experienced excessive and prolonged stress is likely to
1. develop an illness or disease such as allergy, arthritis, or asthma.
  2. become resistant to biologic methods of treatment.
  3. seek treatment for imagined illnesses and nonexistent symptoms.
  4. be admitted to the hospital during the alarm stage.

ANS: 1

Many diseases are known to be caused or exacerbated by prolonged stress. Those diseases are not imagined and do not occur in the alarm stage. Stress-induced illnesses respond to biologic methods of treatment.

DIF: Cognitive Level: Comprehension REF: Page 23 OBJ: Theory #10  
TOP: Adaptation KEY: Nursing Process Step: Assessment  
MSC: NCLEX: Physiological Integrity

15. A stressor is usually experienced by a person
1. as a negative event or stimulus that affects homeostasis in maladaptive ways.
  2. in different ways based on previous experience and personality traits.
  3. as an opportunity for growth and learning.
  4. in similar ways if age and education are similar.

ANS: 2

Stressors are not perceived the same way by different people or even by the same person at different times. The experience of a stressor depends on previous experience and personality, as well as factors such as physical or emotional conditions, age, and education.

DIF: Cognitive Level: Comprehension    REF: Page 24    OBJ: Theory #9  
TOP: General Adaptation Syndrome    KEY: Nursing Process Step: Assessment  
MSC: NCLEX: N/A

16. In 1946, the World Health Organization redefined health as the
1. absence of disease or infirmity.
  2. state of complete physical, mental, and social well-being.
  3. presence of disease or infirmity.
  4. state of incomplete physical, mental, and social well-being.

ANS: 2

In 1946, the World Health Organization redefined health as "the state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity."

DIF: Cognitive Level: Knowledge    REF: Page 14    OBJ: Theory #1  
TOP: Views of Health and Illness    KEY: Nursing Process Step: N/A  
MSC: NCLEX: N/A

17. Peripheral vascular disease resulting from diabetes is an example of a(n)
1. idiopathic illness.
  2. primary illness.
  3. secondary illness.
  4. terminal illness.

ANS: 3

The nurse needs to be able to differentiate between varying types of illness. Peripheral vascular disease resulting from diabetes is a secondary illness, which is defined as resulting from or caused by a primary illness. In this situation, diabetes is the primary illness.

DIF: Cognitive Level: Comprehension    REF: Page 14    OBJ: Theory #1  
TOP: Views of Health and Illness    KEY: Nursing Process Step: N/A  
MSC: NCLEX: N/A

18. Illness occurs in stages, including the transition stage, which is characterized by which of the following?
1. Convalescence
  2. Recovery
  3. Sick role
  4. Onset

ANS: 4

Illness occurs in stages; there is a transition stage (onset), an acceptance stage (sick role), and a convalescence stage (recovery).

DIF: Cognitive Level: Knowledge    REF: Page 14    OBJ: Theory #1  
TOP: Stages of Illness    KEY: Nursing Process Step: N/A  
MSC: NCLEX: N/A

19. Illness occurs in stages, including the acceptance stage, which is characterized by which of the following?

1. Onset
2. Sick role
3. Recovery
4. Transition

ANS: 2

Illness occurs in stages; there is a transition stage (onset), an acceptance stage (sick role), and a convalescence stage (recovery).

DIF: Cognitive Level: Knowledge  
TOP: Stages of Illness  
MSC: NCLEX: N/A

REF: Page 14      OBJ: Theory #1  
KEY: Nursing Process Step: N/A

20. Illness occurs in stages, including the convalescence stage, which is characterized by which of the following?
1. Recovery
  2. Onset
  3. Sick role
  4. Transition

ANS: 1

Illness occurs in stages; there is a transition stage (onset), an acceptance stage (sick role), and a convalescence stage (recovery).

DIF: Cognitive Level: Knowledge  
TOP: Stages of Illness  
MSC: NCLEX: N/A

REF: Page 14      OBJ: Theory #1  
KEY: Nursing Process Step: N/A

21. Sickle cell anemia is an example of a biologic trait found primarily in people from which nation of origin?
1. Asian
  2. African
  3. American Indian
  4. Hispanic

ANS: 2

Sickle cell anemia is a biologic variation found predominantly in people of African descent.

DIF: Cognitive Level: Knowledge      REF: Page 17; Table 2-1  
OBJ: Theory #5      TOP: Cultural Influences  
KEY: Nursing Process Step: N/A      MSC: NCLEX: N/A

22. According to Maslow's hierarchy of needs, the first physiologic need is for
1. adequate cardiovascular function.
  2. oxygen.
  3. adequate nutrition.
  4. elimination.

ANS: 2

The first physiologic need is for oxygen and is immediately followed by the need for adequate cardiovascular function to supply the tissues with blood. The needs for adequate nutrition and for elimination come next.

DIF: Cognitive Level: Application  
TOP: Maslow's Hierarchy of Needs  
MSC: NCLEX: N/A

REF: Page 19      OBJ: Theory #6  
KEY: Nursing Process Step: Assessment

23. According to Maslow's hierarchy of needs, the second physiologic need is for
1. adequate cardiovascular function.
  2. adequate nutrition.
  3. elimination.
  4. oxygen.

ANS: 1

The first physiologic need is for oxygen and is immediately followed by the need for adequate cardiovascular function to supply the tissues with blood. The needs for adequate nutrition and for elimination come next.

DIF: Cognitive Level: Application  
TOP: Maslow's Hierarchy of Needs  
MSC: NCLEX: N/A

REF: Page 19      OBJ: Theory #6  
KEY: Nursing Process Step: Assessment

24. When the brain perceives a situation as threatening, the sympathetic nervous system reacts by stimulating which of the following physiologic functions?
1. Constriction of the pupils
  2. Constriction of the bronchial tubes
  3. Decreased heart rate
  4. Dilation of the pupils

ANS: 4

Activation of the sympathetic nervous system causes the pupils and bronchial tubes to dilate. It also causes the heart rate to increase.

DIF: Cognitive Level: Application  
OBJ: Theory #8      TOP: Sympathetic Nervous System  
KEY: Nursing Process Step: Assessment

REF: Page 23; Table 2-2  
MSC: NCLEX: Physiological Integrity

25. When the brain perceives a situation as threatening, the sympathetic nervous system reacts by stimulating which of the following physiologic functions?
1. Increased heart rate
  2. Constriction of the bronchial tubes
  3. Decreased heart rate
  4. Constriction of the pupils

ANS: 1

Activation of the sympathetic nervous system causes the pupils and bronchial tubes to dilate. It also causes the heart rate to increase.

DIF: Cognitive Level: Application

REF: Page 23; Table 2-2



OBJ: Theory #8 TOP: Sympathetic nervous system  
KEY: Nursing Process Step: Assessment MSC: NCLEX: Physiological Integrity

26. A nurse is caring for a patient who states, "I do not have a problem with alcohol. I never drink before 5:00 PM. My liver problems are not caused by my drinking history." The patient's statement is characteristic of which defense mechanism?
1. Sublimation
  2. Projection
  3. Denial
  4. Displacement

ANS: 3

Denial is a defense mechanism that is considered to be a more serious form of repression in which a person lives as though an unwanted piece of information or reality does not exist. There is a persistent refusal to be swayed by the evidence.

DIF: Cognitive Level: Application REF: Page 26; Table 2-3  
OBJ: Theory #8 TOP: Defense Mechanisms  
KEY: Nursing Process Step: Assessment MSC: NCLEX: Psychosocial Integrity

27. A nurse is caring for a child who has just been scolded by her mother. The child proceeds to hit her doll with a hairbrush. The child's actions are characteristic of which defense mechanism?
1. Denial
  2. Displacement
  3. Rationalization
  4. Repression

ANS: 2

Displacement is a defense mechanism that characterizes discharging intense feelings for one person onto another object or person who is less threatening, thereby satisfying an impulse with a substitute object.

DIF: Cognitive Level: Application REF: Page 26; Table 2-3  
OBJ: Theory #8 TOP: Defense Mechanisms  
KEY: Nursing Process Step: Assessment MSC: NCLEX: Psychosocial Integrity

28. A nurse encourages a patient to maintain an ideal body weight. This health promotion behavior is an example of which type of prevention?
1. Secondary prevention
  2. Tertiary prevention
  3. Latent prevention
  4. Primary prevention

ANS: 4

Primary prevention avoids or delays occurrence of a specific disease or disorder. Secondary prevention consists of following guidelines for screening for diseases that are easily treated if found early or for detecting return of a disease. Tertiary prevention consists of rehabilitation measures after the disease or disorder has stabilized. Latent prevention does not exist.

DIF: Cognitive Level: Application REF: Page 27; Health Promotion Points 2-1  
OBJ: Theory #11 TOP: Health Promotion  
KEY: Nursing Process Step: Implementation  
MSC: NCLEX: Health Promotion and Maintenance

29. A nurse encourages a patient to perform a monthly breast self-examination. This health promotion behavior is an example of which type of prevention?
1. Secondary prevention
  2. Primary prevention
  3. Tertiary prevention
  4. Latent prevention

ANS: 1

Primary prevention avoids or delays occurrence of a specific disease or disorder. Secondary prevention consists of following guidelines for screening for diseases that are easily treated if found early or for detecting return of a disease. Tertiary prevention consists of rehabilitation measures after the disease or disorder has stabilized. Latent prevention does not exist.

DIF: Cognitive Level: Application REF: Page 27; Health Promotion Points 2-1  
OBJ: Theory #11 TOP: Health Promotion  
KEY: Nursing Process Step: Implementation  
MSC: NCLEX: Health Promotion and Maintenance

30. A nurse recommends a cardiac rehabilitation program to a patient. This health promotion behavior is an example of which type of prevention?
1. Secondary prevention
  2. Tertiary prevention
  3. Primary prevention
  4. Latent prevention

ANS: 2

Primary prevention avoids or delays occurrence of a specific disease or disorder. Secondary prevention consists of following guidelines for screening for diseases that are easily treated if found early or for detecting return of a disease. Tertiary prevention consists of rehabilitation measures after the disease or disorder has stabilized. Latent prevention does not exist.

DIF: Cognitive Level: Application REF: Page 27; Health Promotion Points 2-1  
OBJ: Theory #11 TOP: Health Promotion  
KEY: Nursing Process Step: Implementation  
MSC: NCLEX: Health Promotion and Maintenance

## COMPLETION

31. In 1974, the Federal Employees' Compensation Act began reimbursement to federal employees for the treatment of \_\_\_\_\_, because it became recognized as a legitimate medical cost.

ANS:

mental illness

The nurse needs knowledge regarding mental illness views, as well as health coverage and reimbursement.

DIF: Cognitive Level: Knowledge

REF: Page 14

OBJ: Theory #1

TOP: Views of Health and Illness

KEY: Nursing Process Step: N/A

MSC: NCLEX: N/A

32. To maintain a degree of health and well-being, a person must adapt to changes in the external environment. \_\_\_\_\_ is a tendency of biologic systems to maintain stability of the internal environment by adjusting to changes needed for survival.

ANS:

Homeostasis

The nurse needs to be able to define and understand homeostasis to address the needs of patients.

DIF: Cognitive Level: Knowledge

REF: Page 21

OBJ: Theory #8

TOP: Homeostasis KEY: Nursing Process Step: N/A

MSC: NCLEX: N/A

## MULTIPLE RESPONSE

33. Which of the following best describes behaviors of the transition stage of illness? (*Select all that apply.*)
1. Onset of vague symptoms
  2. A person may deny feeling ill
  3. A person self-medicates
  4. A person withdraws from roles and responsibilities
  5. Recovery from illness begins
  6. A person is focused on the illness and ignores positive feelings

ANS: 1, 2, 3

The nurse needs to be able to identify the stages of illness to identify the patients' needs and to prioritize care.

DIF: Cognitive Level: Comprehension

REF: Page 14

OBJ: Theory #1

TOP: Stages of Illness

KEY: Nursing Process Step: Assessment

MSC: NCLEX: N/A

34. Which of the following define the holistic approach to caring for the sick and promoting wellness? (*Select all that apply.*)
1. The nurse's focus is specific to the disease or injury.
  2. The person is viewed by the nurse as a unified whole with unique integration of body, mind, and spirit.
  3. The nurse realizes that each person has a responsibility for his or her own health.
  4. Health care providers are required to intervene on behalf of all persons to ensure that health goals are met.

5. Providers combine traditional methods of health care with relaxation techniques for pain management.
6. A change in one aspect of a person's life by health care providers may or may not alter the person as a whole.

ANS: 2, 3, 5

The nurse needs to have a clear understanding of the central beliefs of the holistic approach to caring for the sick and to promoting wellness.

DIF: Cognitive Level: Comprehension      REF: Page 18      OBJ: Theory #6  
TOP: Holistic Approach      KEY: Nursing Process Step: Implementation  
MSC: NCLEX: N/A

35. Which of the following are responses during the *alarm stage* of the general adaptation syndrome as defined by Hans Selye? (*Select all that apply.*)
1. There is a slight increase in body temperature.
  2. There is a substantial increase in energy.
  3. There is a decreased appetite.
  4. The body's defense is triggered by hormones released.
  5. The body's adaptation abilities temporarily overreact.
  6. Signs of illness are not perceived by the individual during this time.

ANS: 1, 3, 4

The nurse needs to be knowledgeable about the stages of the general adaptation syndrome as defined by Hans Selye. It is valuable information to prioritize the care and to address the needs of patients.

DIF: Cognitive Level: Knowledge      REF: Page 23      OBJ: Theory #10  
TOP: General Adaptation Syndrome      KEY: Nursing Process Step: Assessment  
MSC: NCLEX: N/A