

HESI LEADERSHIP MANAGEMENT PROCTORED EXAM

1. community health nurse is providing an educational session at the senior center on how to promote sleep. Which practices should the nurse recommend? (*Select all that apply.*)
- a. Take a nap in the afternoon.
 - b. Sleep where you sleep best.
 - c. Use sedatives as a last resort.
 - d. Watch television right before sleep.
 - e. Decrease fluids 2 to 4 hours before sleep.
 - f. Get up if unable to fall asleep in 15 to 30 minutes.

ANS: B, C, E, F

The nurse should instruct the patient to sleep where he or she sleeps best, to use sedatives as a last resort, to decrease fluid intake to cut down on bathroom trips, and, if unable to sleep in 15 to 30 minutes, to get up out of bed. Naps should be eliminated if they are not part of the individual's routine schedule, and if naps are taken, they should be limited to 20 minutes or less a day. Television can stimulate and disrupt sleep patterns.

MATCHING

The nurse is caring for a group of patients who have sleeping disruptions.

Match the condition to the intervention the nurse will use.

- a. Use continuous positive airway pressure.
- b. Offer a small meal several hours before bedtime.
- c. Administer antidepressants.
- d. Administer modafinil (Provigil).
- e. Do not startle.
- f. Administer benzodiazepine-like drugs.

1.Cata

plex

2.Narc

olepsy

3.Inso

mnia

4.Hiat

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hernia

5.Slee

pwalki

ng

6.Obstructive sleep apnea

1.ANS:C2.ANS:D3.ANS:F4.ANS:B5.ANS:E6.ANS:A

Chapter 44: Pain Management
Potter et al.: Fundamentals of
Nursing, 9th Edition MULTIPLE
CHOICE

1.An oriented patient has recently had surgery. Which action is **best** for the nurse to take to assess this patient's pain?

- a. Assess the patient's body language.
- b. Ask the patient to rate the level of pain.
- c. Observe the cardiac monitor for increased heart rate.
- d. Have the patient describe the effect of pain on the ability to cope.

ANS: B

One of the most subjective and therefore most useful characteristics for reporting pain is its severity. Therefore, the best way to assess a patient's pain is to ask the patient to rate the pain. Nonverbal communication, such as body language, is not as effective in assessing pain, especially when the patient is oriented. Heart rate sometimes increases when a patient is in pain, but this is not a symptom that is specific to pain. Pain sometimes affects a patient's

ability to cope, but assessing the effect of pain on coping assesses the patient's ability to cope; it does not assess the patient's pain.

2. A nurse is caring for a patient who recently had abdominal surgery and is experiencing severe pain. The patient's blood pressure is 110/60 mm Hg,

and heart rate is 60 beats/min. Additionally, the patient does not appear to be in any distress. Which response by the nurse is **most** therapeutic?

“Your vitals do not show that you are having pain; can you describe

a. your pain?”

b. “OK, I will go get you some narcotic pain relievers immediately.”

c. “What would you like to try to alleviate your pain?”

d. “You do not look like you are in pain.”

ANS: C

Be sure the patient is a partner in making decisions about the best approaches for managing pain. A patient knows the most about his or her pain and is an important partner in selecting successful pain therapies. The nurse must believe that a patient is in pain whenever the patient reports that he or she is in pain, even if the patient does not appear to be in pain. The nurse must be careful to not judge the patient based on vital signs or nonverbal communication and must not assume that the patient is seeking narcotics. The patient is a partner in pain management, so going to get narcotics to treat the pain without consulting with the patient first is not appropriate.