

1. A nurse is preparing to assess a client who is new to the clinic. When beginning the collection of the client database, which of the following actions should the nurse prioritize?
  - A) Establishing a trusting relationship
  - B) Determining the client's strengths
  - C) Identifying potential health problems
  - D) Making clinical inferences
  
2. A nurse is interpreting and validating information from an older adult client who has been experiencing a functional decline. The nurse is in which phase of the interview?
  - A) Introductory
  - B) Working
  - C) Summary
  - D) Closing
  
3. A 71-year-old woman has been admitted to the hospital for a vaginal hysterectomy, and the nurse is collecting subjective data prior to surgery. Which statement by the nurse could be construed as judgmental?
  - A) "How often do your adult children typically visit you?"
  - B) "Your husband's death must have been very difficult for you."
  - C) "You must quit smoking because it affects others, not only you."
  - D) "How would you describe your feelings about getting older?"
  
4. A nurse is interviewing a 22-year-old client of the campus medical clinic. Which nonverbal behavior should the nurse adopt to best facilitate communication during this phase of assessment?
  - A) Standing while the client is seated
  - B) Using a moderate amount of eye contact
  - C) Sitting across the room from the client
  - D) Minimizing facial expressions
  
5. A nurse is providing feedback to a colleague after observing the colleague's interview of a newly admitted client. Which of the following would the nurse identify as an example of a closed-ended question or statement?
  - A) "Tell me about your relationship with your children?"
  - B) "Tell me what you eat in a normal day?"
  - C) "Are you allergic to any medications?"
  - D) "What is your typical day like?"

6. A client has presented to the emergency department and is having difficulty describing her vague sensation of physical discomfort and unease. How can the nurse best elicit meaningful assessment data about the nature of the client's complaint?
  - A) Ignore the complaint for now and return to it later in the assessment.
  - B) Provide a laundry list of descriptive words.
  - C) Restate the question using simpler terms.
  - D) Wait in silence until the client can determine the correct words.
  
7. A nurse is eliciting a client's health history and the client asks, "Can I take the herb ginkgo biloba with my other medications?" What action would be best if the nurse is unsure of the answer?
  - A) Promise to find out the information for the client.
  - B) Change the subject and return to this topic later.
  - C) Teach the client to only take prescribed medications.
  - D) Encourage the client to ask the pharmacist or primary care provider.
  
8. The nurse is preparing to assess the mental status of a 90-year-old client who is being admitted to the hospital from a long-term care facility. Which of the following should the nurse assess first?
  - A) The client's sensory abilities
  - B) The client's general intelligence
  - C) The presence of any phobias
  - D) The client's judgment and insight
  
9. A nurse provides care in a rural hospital that serves a community that has few minority residents. When interviewing a client from a minority culture, the nurse has enlisted the assistance of a "culture broker." How can this individual best facilitate the client's care?
  - A) By interpreting the client's language and culture
  - B) By evaluating the client's culturally based health practices
  - C) By teaching the client about health care
  - D) By making the client feel comfortable and safe
  
10. Upon entering an exam room, the client states, "Well! I was getting ready to leave. My schedule is very busy and I don't have time to waste waiting until you have the time to see me!" Which response by the nurse would be most appropriate?
  - A) "Our schedule is very busy also. We got to you as soon as we could."
  - B) "No one is forcing you to be here, and you are free to leave at any time."
  - C) "Would you like to report your complaints to someone with power?"
  - D) "You're certainly justified in being upset, but I am ready to begin your exam now."

11. A nurse has admitted a client to the medical unit and is describing the purpose for obtaining a comprehensive health history. Which of the following purposes should the nurse describe?
- A) "This helps us to complete your health record accurately."
  - B) "This helps us to establish a trusting interpersonal relationship."
  - C) "This helps us to evaluate the seriousness of your risk factors for disease."
  - D) "This helps us have an appropriate focus for the physical examination."
12. A clinic nurse has reviewed a new client's available health record and will now begin taking the client's health history. Which of the following questions should the nurse ask first when obtaining the health history?
- A) "Do you have adequate health insurance coverage?"
  - B) "Are you generally fairly healthy?"
  - C) "What is your major health concern at this time?"
  - D) "Did you bring all your medications with you?"
13. A client has presented for care with complaints of persistent lower back pain. When using the mnemonic COLDSPA, which question should the nurse use to evaluate the "P"?
- A) "What makes it worse?"
  - B) "When did it start?"
  - C) "How does it feel?"
  - D) "How would you rate your pain?"
14. A medical nurse has completed the review of systems component of the client's health history. Which assessment finding should the nurse document under the review of systems?
- A) "High school diploma plus 2 years of college"
  - B) "Caregiver reliable source of information"
  - C) "Menarche at age 13"
  - D) "Lungs clear to auscultation bilaterally"
15. A client has been admitted following an unexplained weight loss of 15 pounds over the past 3 months. How should the nurse best assess the subjective component of the client's nutritional status?
- A) Ask the client to explain MyPlate.
  - B) Obtain a 24-hour diet recall.
  - C) Ask about the contents of one typical meal.
  - D) Elicit the client's favorite foods.

16. A client's elevated body mass index (BMI) has prompted the nurse to assess the client's activity and exercise level. Which statement would indicate to the nurse that the client is getting the recommended amount of exercise?
- A) "I walk briskly on the treadmill once or twice a week."
  - B) "I play basketball with a team every Friday night without fail."
  - C) "I go to a step class for an hour three times a week."
  - D) "I swim for at least half an hour each Saturday morning."
17. During an assessment, the nurse determines that a client sees more than one primary care provider and has obtained prescriptions from each provider. Which method would be most appropriate to determine a client's current medication regimen?
- A) Ask the client to identify which medications taken every day.
  - B) Ask the client to bring all the medications and supplements to an interview.
  - C) Ask the caregiver whether the client is taking prescribed medications.
  - D) Ask the client about the use of any over-the-counter medications.
18. The nurse is preparing to assess an adult woman's activities related to health promotion and maintenance. Which question should the nurse ask to obtain the most objective and thorough assessment data?
- A) "Do you always wear your seatbelt when driving?"
  - B) "How much beer, wine, or alcohol do you drink?"
  - C) "Do you use condoms with each sexual encounter?"
  - D) "Could you describe how you perform self-breast exams?"
19. A nurse is creating a genogram of a client's family health history. The nurse should use which of the following symbols to denote the client's female relatives?
- A) Circle
  - B) Square
  - C) Triangle
  - D) Rectangle
20. A client has just been admitted to the postsurgical unit from postanesthetic recovery, and the nurse is in the introductory phase of the client interview. Which of the following activities should the nurse perform first?
- A) Collaborate with the client to identify problems.
  - B) Explain the purpose of the interview.
  - C) Determine the client's vital signs.
  - D) Obtain family health history data.

21. During the interview, the client states, "Is today the 12th? My wife died 2 months ago today." Which of the following responses would be most appropriate?
- A) "What was the cause of your wife's death?"
  - B) "How does that make you feel right now?"
  - C) "You probably must be sad."
  - D) "Are you feeling sad, depressed, angry, or upset?"
22. The nurse is using the mnemonic "COLDSPA" to assess a client's complaint of lower abdominal pain. The nurse asks the client to rate the pain on a scale of 0 to 10. The nurse is assessing which aspect of the complaint?
- A) Character
  - B) Onset
  - C) Severity
  - D) Pattern
23. The nurse is obtaining information about a client's past health history. Which client statement would best reflect this component of assessment?
- A) "My mom's still alive, but my dad died 10 years ago of heart failure."
  - B) "I have a brother with leukemia and a sister with hypertension."
  - C) "I had surgery 5 years ago to repair an inguinal hernia."
  - D) "I have been having some pain when I urinate for the last several days."
24. A nurse is teaching a recent nursing graduate about the significance of verbal and nonverbal communication during client care. The new graduate demonstrates an understanding of these techniques by citing what example of verbal communication?
- A) Maintaining an open attitude
  - B) Using silence appropriately
  - C) Providing a laundry list of descriptors when needed
  - D) Maintaining an open and encouraging facial expression
25. The admission of a new resident to a long-term care facility has necessitated a thorough health history. Place the following focuses in the correct sequence in which the nurse should perform them, beginning with the section obtained first.
- A) Family health history
  - B) Reason for seeking care
  - C) Biographic data
  - D) Review of body systems
  - E) History of present concern
  - F) Past health history

26. The nurse is completing a review of systems for a client. Which of the following information would the nurse document related to the client's musculoskeletal system? Select all that apply.
- A) Joint stiffness
  - B) Rhinorrhea
  - C) Shortness of breath
  - D) Chest pain
  - E) Muscle strength
  - F) Knee swelling
27. The nurse is completing an assessment of a 50-year-old female client who has sought care for recurrent migraines that have not responded to treatment. Following the review of systems, how should the nurse best document unremarkable results of the subjective portion of the gastrointestinal assessment?
- A) "Client's gastrointestinal health is within reference ranges for age."
  - B) "Client denies GI signs and symptoms."
  - C) "Gastrointestinal problems are absent."
  - D) "Client denies recent constipation, diarrhea, bowel incontinence, or abdominal pain."
28. A 60-year-old woman with a bunion will undergo surgery later today. The client tells the nurse in the surgical daycare admitting department, "I'm sure I've been asked these questions before. Can't we just focus on my foot and not all these other topics?" How should the nurse best explain the rationale for obtaining a health history?
- A) "In general, it's necessary for us to gather as much information about each client as possible."
  - B) "We want to make sure your nursing care matches your needs as closely as possible."
  - C) "The care team needs to cross-reference your diagnostic testing with the information that I'm asking you about."
  - D) "We don't want to make the mistake of focusing solely on the medical problem that brought you here."
29. During the nurse's assessment of the client's exercise and activity habits, the client laughs and then states, "Unless you're including channel surfing, I don't really do much of anything." How should the nurse best follow up this client's statement?
- A) Briefly describe some of the potential benefits of regular exercise.
  - B) Ask the client if he understands the risk factors for heart disease and diabetes.
  - C) Explain to the client that he should be performing aerobic exercise for 20 to 30 minutes at least three times a week.
  - D) Document the nursing diagnosis of Risk for Activity Intolerance related to sedentary lifestyle.

30. A nurse is obtaining subjective data from an adult client who is new to the clinic. The nurse has asked the client, "Where do you usually turn for help in a time of crisis?" What domain is this nurse assessing?
- A) The client's family relationships
  - B) The client's current level of social and relational stability
  - C) The client's critical thinking and problem-solving abilities
  - D) The client's stress management and coping strategies

## Answer Key

1. A
2. B
3. C
4. B
5. C
6. B
7. A
8. A
9. A
10. D
11. D
12. C
13. A
14. C
15. B
16. C
17. B
18. D
19. A
20. B
21. B
22. C
23. C
24. C
25. C, B, E, F, A, D
26. A, E, F
27. D
28. B
29. A
30. D