

Chapter 1: Overview: Professional Practice Issues and Infusion Therapy

Multiple Choice

Identify the choice that best completes the statement or answers the question.

1. A nurse is attempting to insert a peripheral IV catheter for a patient diagnosed with gastroenteritis. The patient is not sure about this and is resisting the insertion. Based upon this situation, what are appropriate actions?
- A. Explain to the patient that this is what the doctor has prescribed.
 - B. Notify the physician about this patient's concerns.
 - C. Tell the patient that it will only hurt for a few seconds.
 - D. Provide the patient with more information about the catheter insertion.

ANS: D

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| | Feedback |
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| A. | Explaining that this is a doctor's order is not addressing why the patient is not sure about the insertion. |
| B. | Notifying the physician is not an appropriate action. |
| C. | Telling the patient it will only hurt a bit is not addressing why the patient is not sure about the insertion. |
| D. | Providing the patient with more information to make decisions is an appropriate action. This is an element of informed consent that is called the right of self-determination. |

2. A nurse who is caring for patients understands that he or she should provide care that meets at least the minimum standards of practice for nursing. Which phrase regarding standards of practice is most accurate?
- A. Standards of practice focus on the care provider and represent acceptable levels of practice.
 - B. Standards of practice focus on the recipient of care and describe the outcomes of care.
 - C. Standards of practice are written laws enacted by the legislature.
 - D. Standards of practice are the result of the performance of a function or process.

ANS: A

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| | Feedback |
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| A. | Standards of practice focus on the provider of care, define accountability, and provide a framework for evaluation of professional competency. |
| B. | Standards of practice criteria focus on the care provider, not the care recipient. |

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| C. | Standards of practice include evidence-based guidelines, policies, or protocols, not written laws. |
| D. | Standards of practice are reviewed in response to clinical questions and/or performance issues, but they are a result of the performance or process. |

3. A patient suffers a severe extravasation injury after infusion of calcium chloride through a peripheral IV catheter. Despite treatment of the injury, patient outcomes include permanent scarring and nerve damage. Which of the following must be met to substantiate a malpractice claim?

- A. The nurse noted blood return in a peripheral IV catheter line.
- B. The peripheral catheter was placed by a physician.
- C. The nurse followed the physician orders.
- D. The injury resulted from nursing negligence during the infusion.

ANS: D

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| | Feedback |
| A. | The presence of a blood return does not substantiate a malpractice claim. |
| B. | Who placed the catheter does not substantiate a malpractice claim. |
| C. | Following physician orders does not substantiate a malpractice claim. |
| D. | This is correct; it must be established that the injury was due to a breach of duty by the nurse; that is, the injury resulted from nursing negligence. |

4. Ethical issues often arise during the provision of health care. A patient with documented cognitive limitations and no available caregiver, who requires a peripherally inserted central catheter for several weeks of IV antibiotics, is refusing treatment. The nurse brings this issue to the nursing manager, suggesting referral to the ethics committee. This nurse is following which of the ANA ethical provisions?

- A. Assert the fundamental values and commitments of nurses.
- B. Identify nursing duties and responsibilities.
- C. Describe duties of the nurse beyond individual patient encounters.
- D. Maintaining integrity of the profession.

ANS: A

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| | Feedback |
| A. | This is the best answer; asserting fundamental values and commitments of nurses is addressed in Provisions 1–3 and includes advocacy and compassion; this nurse is advocating for this patient. |
| B. | This is not the best answer. Provisions 4–6 on nursing duties and responsibilities |

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| | include competence and professional growth. |
| C. | This is not correct because this patient situation is based upon an individual encounter. |
| D. | Maintaining integrity of the profession is a component of Provisions 7–9 (describe duties of the nurse beyond individual patient encounters). |

5. Which competency assessment method is acceptable for nursing competencies occurring once per year in a skilled nursing facility?

- A. Patient Evaluation
- B. Clinical Data
- C. Sentinel Event Report
- D. Skills Checklist

ANS: D

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| | Feedback |
| A. | Patient evaluation is a concern that may drive competency assessment, but is not a method of competency assessment. |
| B. | Clinical data (e.g., high infiltration rates) may drive the need for competency assessment, but is not a method of competency assessment. |
| C. | A sentinel event report may drive the need for competency assessment, but is not a method of competency assessment. |
| D. | Competency assessment methods include performance measures related to patient care, such as skills, knowledge, ability, and judgment; this includes objective, measurable assessment of the actual performance in the form of checklists. |

6. Which of the following was identified as a value of certification in a study of nurses who gained certification?

- A. Protecting the public
- B. Validating knowledge
- C. Reflecting measurable goals
- D. Holding nurses accountable

ANS: B

Pages: 10–11

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| | Feedback |
| A. | Certification is a mark of excellence, validates nursing knowledge and skills, and protects the public, but was not cited in the nursing study. |

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| B. | Nurses reported validating knowledge as a value of certification. |
| C. | Nurses did not cite reflection of measurable goals as a value of certification. |
| D. | Nurses did not cite accountability as a value of certification. |

7. Which problem-solving approach to clinical practice is the nurse applying when determining patient preference and values for successful clinical outcomes?

- A. Effective health-care practice
- B. Evidence-based practice (EBP)
- C. Answering a burning clinical question
- D. The nurse's own clinical expertise

ANS: B

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| | Feedback |
| A. | Effective health-care practice is an essential characteristic of evidence-based practice. |
| B. | EBP is a problem-solving approach to clinical practice and administrative issues that integrates patient preferences and values. |
| C. | EBP is a systematic search for and critical appraisal of the most relevant evidence to answer a burning clinical question. |
| D. | EBP is a problem-solving approach that integrates the nurse's own clinical expertise. |

8. Seven days ago a nurse inserted a PICC into the right arm of a patient diagnosed with cancer. When the nurse checks the site today, which aspect of the nursing process is being followed?

- A. Assessment for signs/symptoms of complications
- B. Implementing Aseptic Non Touch Technique (ANTT)
- C. Planning for complication prevention
- D. Evaluation for the continued plan of care

ANS: A

Page: 11

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| | Feedback |
| A. | Assessment consists of pertinent data relative to the patient's condition, which includes identification of any signs/symptoms of infection. |
| B. | Implementing ANTT is the implementation or action plan of the nursing process. |
| C. | Planning involves prescription of strategies/techniques to prevent complications. |

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| D. | Evaluation is a component of the nursing process, but this is not the correct answer. |
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9. Which program mandated by the Affordable Care Act requires measurement of central line–associated bloodstream infection (CLABSI) rates in hospitals?

- A. VBP
- B. HHRP
- C. HAC
- D. HHVBP

ANS: C

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| | Feedback |
| A. | Value-based purchasing (VBP) is a pay-for-performance program mandated by the Affordable Care Act (ACA). |
| B. | Hospital readmissions reduction program (HRRP) is a pay-for-performance program mandated by the ACA. |
| C. | Hospital-acquired conditions (HAC) is a pay-for-performance program mandated by the ACA. CLABSIs are an example of a hospital-acquired condition that must be reported. |
| D. | Home health value-based purchasing (HHVBP) is a model pay-for-performance program implemented for home health. |

10. When asked to serve as the nursing expert witness in a case, the role of the nursing expert includes which of the following?

- A. Examining evidence and giving advice
- B. Providing guidance in jury selection
- C. Meeting with the defendants
- D. Establishing standards of care

ANS: A

Pages: 26–27

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| | Feedback |
| A. | Serving as an expert witness involves examining evidence, reviewing nursing literature, giving depositions, and testifying in court. |
| B. | Providing guidance in jury selection is not a function of an expert witness. |
| C. | Expert witnesses do not meet with the defendants. |

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| D. | Establishing standards of care is not a function of an expert witness. |
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Multiple Response

Identify one or more choices that best complete the statement or answer the question.

1. A nurse is caring for two patients in an outpatient clinic who are on medications that require a risk evaluation and mitigation strategy (REMS). The nurse's involvement in medications requiring a REMS may include: (Select all that apply.)
 - A. Assessing patient understanding of information provided
 - B. Reinforcing patient education
 - C. Assessing and monitoring for adverse events
 - D. Administering the medication
 - E. Assessing the appropriateness of a REMS drug

ANS: A, B, C, D

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| | Feedback |
| A. | Nurses need to assess the patient's understanding about the medication. |
| B. | Nurses reinforce patient education about REMS drugs. |
| C. | Nurses assess for adverse events related to the REMS drug. |
| D. | Nurses may administer REMS drugs in some instances. |
| E. | The provider, not the nurse, will assess the appropriateness of a REMS drug and initiate the prescription. |

2. A new infusion clinic is being started. In concert with application of the Vessel Health and Preservation (VHP) Model, which of the following components of preserving vessel health should be addressed in the new clinic? (Select all that apply.)
 - A. Audits of patient outcomes
 - B. Verification of the needed number of catheter lumens
 - C. Inclusion of appropriate nursing diagnoses
 - D. Adherence to ANTT
 - E. Use of a securement dressing

ANS: A, B, D, E

Page: 3

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| | Feedback |
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| A. | Auditing of patient outcomes is included in the evaluation quadrant of the VHP model. |
| B. | Verifying the needed number of lumens is included in the assessment/selection quadrant of the VHP model. |
| C. | Nursing diagnoses are not part of the VHP model. |
| D. | Adherence to ANTT is included in the management quadrant of the VHP model. |
| E. | Use of a securement dressing is included in the insertion quadrant of the VHP model. |

3. A nurse is assigned to review the INS Standards of Practice for peripheral IV insertion and examines the levels of evidence that support the recommendations. Which of the following are examples of Level I evidence according to the INS rating for the strength of the body of evidence? (Select all that apply.)

- A. Systematic literature review
- B. Two randomized controlled trials
- C. Meta-analysis
- D. A quality improvement study
- E. Anatomy and physiology

ANS: A, C

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| | Feedback |
| A. | A systematic literature review is an example of Level I evidence. |
| B. | Level I evidence according to the INS rating includes at least three randomized controlled trials. |
| C. | A meta-analysis review is an example of Level I evidence. |
| D. | A quality improvement study is an example of Level V evidence. |
| E. | Anatomy and physiology is not Level I evidence; it is a separate evidence rating. |

4. A nurse with good IV skills wants to apply for a position on the hospital's vascular access team. What are the advantages to a specialized team of infusion experts according to the INS standards? (Select all that apply.)

- A. Greater success rate with first-attempt peripheral IV insertions
- B. Reduced cost
- C. Higher salaries
- D. Fewer IV complications
- E. Less need for central vascular access devices

ANS: A, B, D, E

Page: 10

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| | Feedback |
| A. | The INS standards include studies that support a greater success rate with first-attempt peripheral IV insertions. |
| B. | The INS standards support a greater success rate with first-attempt peripheral IV insertions. |
| C. | The INS standards do not identify higher salaries as an advantage. |
| D. | The INS standards support fewer IV-related complications. |
| E. | The INS standards support less escalation from a peripheral to a central vascular access device. |

5. A serious adverse event involving a hospitalized patient has resulted in a lawsuit. The nurse educator has been assigned to put together an educational program addressing the incident and also providing education about how nurses can reduce their risk for malpractice. What topics should be included in this presentation? (Select all that apply.)

- A. Performing care within the nurse's scope of practice
- B. Assessing and monitoring for changes in the patient's condition
- C. Understanding how to use electronic infusion pumps
- D. Employing infection prevention strategies
- E. Obtaining liability insurance

ANS: A, B, C, D

Pages: 27–28

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| | Feedback |
| A. | Performing care within the scope of practice; maintaining clinical competency; assessing, monitoring, and documenting care; proper use of equipment; and infection prevention are all examples of strategies to reduce the risk for malpractice. |
| B. | Performing care within the scope of practice; maintaining clinical competency; assessing, monitoring, and documenting care; proper use of equipment; and infection prevention are all examples of strategies to reduce the risk for malpractice. |
| C. | Performing care within the scope of practice; maintaining clinical competency; assessing, monitoring, and documenting care; proper use of equipment; and infection prevention are all examples of strategies to reduce the risk for malpractice. |
| D. | Performing care within the scope of practice; maintaining clinical competency; assessing, monitoring, and documenting care; proper use of equipment; and infection prevention are all examples of strategies to reduce the risk for malpractice. |

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| E. | Obtaining liability insurance may protect the nurse financially, but it is not a strategy to reduce the risk for malpractice. |
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6. An experienced nurse would like to promote evidence-based practices on the unit by putting together a voluntary informal committee. What are some ideas the nurse might suggest for advancing nursing knowledge in this committee? (Select all that apply.)
- A. Develop a journal club
 - B. Pilot a new product using a research framework
 - C. Look at opportunities to join a research team
 - D. Compare current policies and procedures to the evidence
 - E. Evaluate patient satisfaction data

ANS: A, B, C, D

Page: 6

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| | Feedback |
| A. | A journal club is a way to advance knowledge and understanding of research. |
| B. | Piloting a new product with a research framework is a way to advance knowledge and understanding of research. |
| C. | Looking at opportunities to join a research team is a way to advance knowledge and understanding of research. |
| D. | Comparing current policies and procedures to evidence is a way to advance knowledge and understanding of research. |
| E. | Evaluation of patient satisfaction data would not be a way to advance knowledge and understanding of research; this would be addressed as part of a quality improvement program. |

7. The nursing supervisor of a new infusion clinic is responsible for a risk management program. Which of the following are examples of risk management strategies? (Select all that apply.)
- A. Informed consent
 - B. Analysis of sentinel events
 - C. Evaluation of all patient data and surveys
 - D. Comprehensive and thorough documentation
 - E. Hiring only advanced practice nurses

ANS: A, B, D

Page: 16

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| | Feedback |
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| A. | Some examples of risk management strategies that may reduce the risk of liability to the organization or to the clinician include informed consent, analysis of unusual occurrence reports, systemic (root cause) analysis of serious adverse (sentinel) events, comprehensive and thorough documentation, and safe infusion medication administration. |
| B. | Some examples of risk management strategies that may reduce the risk of liability to the organization or to the clinician include informed consent, analysis of unusual occurrence reports, systemic (root cause) analysis of serious adverse (sentinel) events, comprehensive and thorough documentation, and safe infusion medication administration. |
| C. | Evaluation of all patient data and surveys is a process of patient experience data, not risk management strategies. |
| D. | Some examples of risk management strategies that may reduce the risk of liability to the organization or to the clinician include informed consent, analysis of unusual occurrence reports, systemic (root cause) analysis of serious adverse (sentinel) events, comprehensive and thorough documentation, and safe infusion medication administration. |
| E. | Hiring only advanced practice nurses is not a risk management strategy. |

8. The quality improvement (QI) team wants to improve the management of peripheral IV infusion therapy. The team has been given data that shows a significant increase in the use of IV-related supplies and believes supplies are being wasted. Which of the following QI methods or tools might be selected for this project? (Select all that apply.)

- A. Six Sigma methodology
- B. Lean methodology
- C. Audit and feedback
- D. Plan–Do–Study–Act

ANS: B, C, D

Pages: 15–16

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| | Feedback |
| A. | Six Sigma focuses on reducing error rates. |
| B. | Lean methodology focuses on reduction of waste, which might include repeated IV attempts, wasted time, and supplies. |
| C. | Audit and feedback could be used to observe how procedures are done and how supplies are used. |
| D. | Plan–Do–Study–Act could be used once the problem has been identified and a plan has been developed to test changes in practice. |

9. Based upon a model for safe infusion therapy, which of the following aspects of care should be addressed during the planning and provision of home infusion therapy to achieve positive outcomes? (Select all that apply.)
- A. Competent care planning and patient assessment
 - B. Interprofessional communication and collaboration
 - C. Appropriate parenteral nutrition and IV medication
 - D. Ability to write home infusion therapy policy and procedures
 - E. Effective patient/caregiver education

ANS: A, B, E

Pages: 29–30

| | Feedback |
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| A. | The home care nurse must be competent in assessment and planning care. |
| B. | Interprofessional communication is important in improving outcomes and in home care provider satisfaction. |
| C. | Appropriate parenteral nutrition and IV medication are important, but they are not aspects of care in the model for safe infusion therapy. |
| D. | The ability to write home infusion therapy policy and procedures is important, but it is not an aspect of care in the model for safe infusion therapy. |
| E. | Effective patient/caregiver education is important in improving outcomes. |

10. A nurse is assigned to place a short peripheral catheter in a patient. Which of the following should be documented in the health record? (Select all that apply.)
- A. Type, length, and gauge of the catheter
 - B. Midarm circumference
 - C. Number of peripheral attempts
 - D. Patient education about the procedure
 - E. Site preparation

ANS: A, C, D, E

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| | Feedback |
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| A. | The type, length, and gauge of the catheter are always documented. |
| B. | Midarm circumference is not required for a short peripheral catheter placement. |
| C. | Number of attempts is documented. |
| D. | Patient education and understanding of the education are documented. |
| E. | Site preparation, such as the antiseptic agent used, is documented. |