Understanding the Essentials of Critical Care Nursing, 3e **(Perrin)**
Chapter 1   What Is Critical Care?

1) The nurse reviews assessment data on a group of patients. Which patient should the nurse identify as experiencing a critical illness?
1. Chronic airflow limitation with VS: BP 110/72, P 110, R 16
2. Acute bronchospasm with VS: BP 100/60, P 124, R 32
3. Motor vehicle crash with VS: BP 124/74, P 74, R 18
4. Chronic renal failure on hemodialysis with no urine output with VS: BP 98/50, P 108, R 12
Answer: 2
Explanation: 1. The blood pressure and respiratory rate are considered within normal limits. The heart rate is slightly elevated. Based upon these vital signs, this patient is not critically ill.
2. Acute bronchospasm can present a life-threatening situation, which can jeopardize a patient's survival. The patient's pulse and respiratory rate are elevated, which could indicate a critical illness.
3. According to the vital signs, this patient is not critically ill despite being in a motor vehicle crash.
4. The patient receiving hemodialysis for chronic renal failure is not considered critically ill unless another disease process or health issue develops. The patient's vital signs are consistent with someone with chronic renal failure.
Cognitive Level: Analyzing
Client Need: Physiological Integrity
Client Need Sub: Physiological Adaptation
Nurs./Integ. Concepts: Nursing Process: Assessment
Learning Outcome: 1-1: Analyze the key components of safe, effective care in the critical care environment.

2) Which patient should the nurse expect to be transferred to a critical care unit? Select all that apply.

Note: Credit will be given only if all correct choices and no incorrect choices are selected.

1. Experiences an acetaminophen overdose
2. Diagnosed with an acute mental illness
3. Receiving treatment for chronic renal failure
4. New onset of acute decompensated heart failure
5. Treatment for bacteremia from an infected foot wound

Answer: 1, 4, 5

Explanation: 1. Critical care units are cost-efficient units for caring for patients with specific organ system failure. Patients with acetaminophen overdose often suffer liver failure as a consequence.

2. A patient with acute mental illness would not receive care in a critical care unit. This health problem would be considered noncritical.

3. Even though critical care units are cost-efficient units for caring for patients with specific organ system failure, chronic renal failure is not a disease process necessitating the critical care environment.

4. The patient with acute decompensated heart failure would receive care in a critical care unit. This patient has a specific organ that has failed.

5. Bacteremia can affect many organs and can lead to multisystem organ failure. This patient would receive care in a critical care unit.

Cognitive Level: Analyzing

Client Need: Physiological Integrity

Client Need Sub: Physiological Adaptation

Nurs./Integ. Concepts: Nursing Process: Assessment

Learning Outcome: 1-1: Analyze the key components of safe, effective care in the critical care environment.

3) The nurse employed in a hospital in a small rural town would expect to provide which level of care in the critical care unit?
1. Level I
2. Level II
3. Level III
4. It is unlikely that the hospital would have a critical care unit.
Answer: 3
Explanation: 1. This level of care is most likely provided within teaching hospitals and not in a rural facility.
2. This level is able to provide comprehensive critical care for most disorders, but the unit may not be able to care for specific types of patients. It is unlikely that this level of care would be available in a small rural facility.
3. Level III facilities provide initial stabilization of critically ill patients but limited ability to provide comprehensive critical care. A limited number of patients who require routine care may remain in the facility, but written policies should be in place determining which patients require transfer and where they ought to be transferred. This level of care is most likely provided in a small rural facility.
4. Most hospitals have some level of critical care area.
Cognitive Level: Applying
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Planning
Learning Outcome: 1-1: Analyze the key components of safe, effective care in the critical care environment.

4) With which individuals should the nurse expect to provide patient care in an "open" ICU?
1. Multidisciplinary team with physicians who are also responsible for patients on other units
2. Multidisciplinary team that includes a physician employed by the hospital
3. Physician in charge of patient care who is a specialist in critical care
4. Primary care physician who must consult a critical care specialist
Answer: 1
Explanation: 1. In an open ICU, nurses, pharmacists, and respiratory therapists are ICU based, but the physicians directing patient care may have other obligations. These physicians may or may not choose to consult an intensivist to assist with the management of their ICU patients.
2. This does not describe an open ICU.
3. This does not describe an open ICU.
4. This does not describe an open ICU.
Cognitive Level: Analyzing
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Planning
Learning Outcome: 1-3: Examine the multidisciplinary nature of care within the critical care environment.

5) What should the nurse who provides care to patients in a critical care unit realize the role of technology is on the amount of errors?
1. It relies heavily on human decision making.
2. Devices are programmed to function without double checks.
3. It makes the workload seem overwhelming to health care providers.
4. There is uniform equipment throughout each facility.
Answer: 2
Explanation: 1. This is not identified as increasing the likelihood of errors in the critical care unit.
2. Technology changes the tasks people do by shifting the workload and eliminating human decision making.
3. This is not identified as increasing the likelihood of errors in the critical care unit.
4. This is not identified as increasing the likelihood of errors in the critical care unit.
Cognitive Level: Analyzing
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Assessment
Learning Outcome: 1-2: Explain the essential attributes of the role of critical care nurse.

6) What should the nurse identify as an example of an installed forcing function or a system-level firewall to prevent errors when providing patient care?
1. Prior to administration of insulin, two nurses check the dose.
2. Prior to obtaining a medication, height, weight, and allergies are recorded.
3. All medications are checked by two nurses prior to administration.
4. Undiluted potassium chloride is not available on critical care units.
Answer: 4
Explanation: 1. This is not an example of an installed forcing function or a system-level firewall.
2. This is not an example of an installed forcing function or a system-level firewall.
3. This is not an example of an installed forcing function or a system-level firewall.
4. This is an example of an installed forcing function or a system-level firewall.
Cognitive Level: Applying
Client Need: Physiological Integrity
Client Need Sub: Reduction of Risk Potential
Nurs./Integ. Concepts: Nursing Process: Assessment
Learning Outcome: 1-1: Analyze the key components of safe, effective care in the critical care environment.

7) The nurse realizes that the increased use of technology in critical care units has resulted in which consequence for patient care?
1. Decreased risk of errors in patient care
2. Decreased therapeutic nurse-patient communication
3. Improved overall patient satisfaction with care
4. Improved patient safety across the entire spectrum
Answer: 2
Explanation: 1. This has not been demonstrated as an outcome resulting from an increased use of technology in critical care units.
2. This has been demonstrated as an outcome resulting from an increased use of technology in critical care units.
3. This has not been demonstrated as an outcome resulting from an increased use of technology in critical care units.
4. This has not been demonstrated as an outcome resulting from an increased use of technology in critical care units.
Cognitive Level: Analyzing
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Evaluation
Learning Outcome: 1-2: Explain the essential attributes of the role of critical care nurse.

8) The nurse in the critical care area is completing a preoperative checklist before sending a patient for surgery. This nurse's activity is an example of which recommendation issued by the Institute of Medicine?
1. Utilizing constraints
2. Simplifying key processes
3. Avoiding reliance on vigilance
4. Standardizing key processes
Answer: 3
Explanation: 1. Completing a preoperative checklist is not an example of utilizing constraints.
2. Completing a preoperative checklist is not an example of simplifying key processes.
3. Completing a preoperative checklist is an example of avoiding reliance on vigilance.
4. Completing a preoperative checklist is not an example of standardizing key processes.
Cognitive Level: Analyzing
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Assessment
Learning Outcome: 1-1: Analyze the key components of safe, effective care in the critical care environment.

9) Which actions should the nurse complete after realizing that an incorrect dose of medication has been administered to a patient? Select all that apply.
Note: Credit will be given only if all correct choices and no incorrect choices are selected.
1. Notify the patient and family.
2. Notify the physician.
3. Document the error.
4. Prepare for an analysis of the error.
5. Keep the notification of the error silent.
Answer: 1, 2, 3, 4
Explanation: 1. In a critical care unit that has embraced a culture of safety, practitioners have a responsibility to their patients to make their errors known, have them corrected, and share them with the patient and family.
2. In a critical care unit that has embraced a culture of safety, practitioners have a responsibility to their patients to make their errors known, have them corrected, and share them with other practitioners.
3. In a critical care unit that has embraced a culture of safety and practice, improvement is a goal rather than a punishment. The reporting of errors results in the examination of the factors that contributed to the error and changes practice patterns.
4. In a critical care unit that has embraced a culture of safety and practice, improvement is a goal rather than a punishment. The reporting of errors results in the examination of the factors that contributed to the error and changes practice patterns.
5. Withholding information about a medication error is not creating a culture of safety.
Cognitive Level: Applying
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Implementation
Learning Outcome: 1-2: Explain the essential attributes of the role of critical care nurse.

10) The nurse working within the AACN Synergy Model realizes that optimal patient outcomes are realized when:
1. Highly qualified nurses care for patients in highly technical settings.
2. Nurses agree to work overtime to cover unit staffing needs.
3. Staff nurse competency is matched with patient needs.
4. Patient care is delivered within a "closed unit" model.
Answer: 3
Explanation: 1. The AACN Synergy Model does not state that nurses need to be highly qualified to care for patients in highly technical settings.
2. The AACN Synergy Model does not state that nurses agree to work overtime to cover unit staffing needs.
3. The underlying assumption of the Synergy Model is that optimal patient outcomes occur when the needs of the patient and family are matched with the competencies of the nurse.
4. The AACN Synergy Model does not state the type of care area in which patient care is to be delivered.
Cognitive Level: Analyzing
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Planning
Learning Outcome: 1-2: Explain the essential attributes of the role of critical care nurse.

11) Which actions by the critical care nurse demonstrate an understanding of patient advocacy? Select all that apply.
Note: Credit will be given only if all correct choices and no incorrect choices are selected.
1. Maintaining attendance at the bedside with the patient during a physician visit
2. Assisting and supporting the patient and family as they reveal their needs
3. Alerting the physician to concerns about client placement after hospitalization
4. Encouraging and supporting a patient's spouse in preparing for a family meeting
5. Seeing the big picture when planning patient care
Answer: 1, 2, 3, 4
Explanation: 1. The nurse realizes that the patient may be vulnerable and need support to obtain what is needed from the health care system.
2. The nurse realizes that the patient may be vulnerable and need support to obtain what is needed from the health care system.
3. The nurse realizes that the patient may be vulnerable and need support to obtain what is needed from the health care system.
4. The nurse realizes that the patient may be vulnerable and need support to obtain what is needed from the health care system.
5. This is not demonstrating patient advocacy.
Cognitive Level: Applying
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Implementation
Learning Outcome: 1-2: Explain the essential attributes of the role of critical care nurse.

12) A nurse is preparing to communicate an issue about patient care to a physician using the SBAR technique. Which phrase is an appropriate initial statement?
1. "I am concerned about…"
2. "The patient's immediate history is…"
3. "I think the problem is…"
4. "I would like you to…"
Answer: 1
Explanation: 1. This is an appropriate initial statement using the SBAR technique.
2. This is not an appropriate initial statement using the SBAR technique.
3. This is not an appropriate initial statement using the SBAR technique.
4. This is not an appropriate initial statement using the SBAR technique.
Cognitive Level: Applying
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Planning
Learning Outcome: 1-3: Examine the multidisciplinary nature of care within the critical care environment.

13) Which statement should the nurse include for "A-Assessment" in the SBAR technique for communication?
1. "I think the problem is…"
2. "The patient's vital signs are…"
3. "The patient's treatments are…"
4. "I would like you to…"
Answer: 1
Explanation: 1. This is an appropriate statement for assessment using the SBAR technique for communication.
2. This is not an appropriate statement for assessment using the SBAR technique for communication.
3. This is not an appropriate statement for assessment using the SBAR technique for communication.
4. This is not an appropriate statement for assessment using the SBAR technique for communication.
Cognitive Level: Applying
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Implementation
Learning Outcome: 1-3: Examine the multidisciplinary nature of care within the critical care environment.

14) Which statement should the nurse use when concluding SBAR communication about a patient issue?
1. "The patient's immediate history is…"
2. "The patient's physical findings are…"
3. "I am requesting that you…"
4. "I have assessed the patient personally."
Answer: 3
Explanation: 1. This statement would not be used when concluding SBAR communication.
2. This statement would not be used when concluding SBAR communication.
3. This statement would be used when concluding SBAR communication.
4. This statement would not be used when concluding SBAR communication.
Cognitive Level: Applying
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Implementation
Learning Outcome: 1-3: Examine the multidisciplinary nature of care within the critical care environment.

15) The nurse collaborates with other members of the health care team to effect optimal outcomes in patient care. Which characteristics of emotional maturity is the nurse using? Select all that apply.
Note: Credit will be given only if all correct choices and no incorrect choices are selected.
1. Maintaining current skills
2. Being a lifelong learner
3. Actively identifying best practices
4. Overlooking one's own shortcomings
5. Willing to take responsibility for failures
Answer: 1, 2, 3, 5
Explanation: 1. This is an attribute of emotional maturity in nursing.
2. This is an attribute of emotional maturity in nursing.
3. This is an attribute of emotional maturity in nursing.
4. This is not an attribute of emotional maturity in nursing.
5. This is an attribute of emotional maturity in nursing.
Cognitive Level: Applying
Client Need: Psychosocial Integrity
Nurs./Integ. Concepts: Nursing Process: Implementation
Learning Outcome: 1-2: Explain the essential attributes of the role of critical care nurse.

16) Which informal power bases should the nurse use in the health care setting? Select all that apply.
Note: Credit will be given only if all correct choices and no incorrect choices are selected.
1. Expertise
2. Goodwill
3. Information
4. Observation
5. Collaboration
Answer: 1, 2, 3
Explanation: 1. Expertise is an informal power base.
2. Goodwill is an informal power base.
3. Information is an informal power base.
4. Observation, although important, is not an informal power base.
5. Collaboration is not an informal power base.
Cognitive Level: Applying
Client Need: Psychosocial Integrity
Nurs./Integ. Concepts: Nursing Process: Implementation
Learning Outcome: 1-2: Explain the essential attributes of the role of critical care nurse.

17) Which action ensures that a patient has consented to care?
1. Provide a consent form to sign to receive medications.
2. Ask the patient to sign a consent form to have dressings changed.
3. Discuss a consent form to sign to be turned in bed.
4. Explain how a dressing is to be changed.
Answer: 4
Explanation: 1. Consent is usually implied rather than written for routine procedures like most medication administration.
2. Consent is usually implied rather than written for routine procedures like dressing changes.
3. Consent is usually implied rather than written for routine procedures like turning.
4. If the nurse does not ask the patient for consent, the nurse should explain the procedure.
Cognitive Level: Applying
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Implementation
Learning Outcome: 1-4: Explain the ethical and legal issues in critical care.

18) For what can the nurse be held liable if forcibly inserting a nasogastric tube against a patient's wishes?
1. Negligence
2. Malpractice
3. Damages
4. Battery
Answer: 4
Explanation: 1. Forcibly inserting a nasogastric tube against a patient's wishes is not negligence.
2. Forcibly inserting a nasogastric tube against a patient's wishes is not malpractice.
3. It cannot be determined if forcibly inserting a nasogastric tube against a patient's wishes will result in damages.
4. When the nurse treats or touches a patient without consent, it is battery.
Cognitive Level: Analyzing
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Implementation
Learning Outcome: 1-4: Explain the ethical and legal issues in critical care.

19) For which patient would decision-making capacity likely be impaired? Select all that apply.
Note: Credit will be given only if all correct choices and no incorrect choices are selected.
1. Being medicated for severe pain
2. Does not understand the medical condition
3. Diagnosed with septic shock
4. Is depressed
5. Asks questions about identified treatments
Answer: 1, 2, 3, 4
Explanation: 1. The patient must be capable of rational thought and be able to recognize what the prospective treatment involves.
2. Understanding the health condition is one component of informed consent.
3. It is common for health care providers and family members to question the decision-making ability of critically ill patients. Many critically ill patients lack the capacity to give informed consent.
4. Patients who are depressed may not be capable of thinking clearly.
5. Asking questions about identified treatments is not a characteristic of a patient with impaired decision-making ability.
Cognitive Level: Analyzing
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Assessment
Learning Outcome: 1-4: Explain the ethical and legal issues in critical care.

20) Which condition is most likely to occur when a patient is restrained?
1. Pulling out an endotracheal tube
2. Pulling out an intravenous line
3. Disconnecting ventilator tubing
4. Developing a nosocomial infection
Answer: 4
Explanation: 1. The use of a restraint will not cause the patient to pull out an endotracheal tube.
2. The use of a restraint will not cause the patient to pull out an intravenous line.
3. The use of a restraint will not cause the patient to disconnect ventilator tubing.
4. When people are restrained, they are more likely to develop nosocomial infections.
Cognitive Level: Analyzing
Client Need: Safe, Effective Care Environment
Client Need Sub: Safety and Infection Control
Nurs./Integ. Concepts: Nursing Process: Planning
Learning Outcome: 1-4: Explain the ethical and legal issues in critical care.

21) What must the patient demonstrate for a nurse to be found guilty of negligence?
1. Was assaulted
2. Incurred damages
3. Suffered a wrongful death
4. Was not consulted before being touched
Answer: 2
Explanation: 1. Assault does not need to be demonstrated to prove negligence.
2. In order to prove negligence, damages must have occurred to the patient.
3. Suffering a wrongful death does not need to be demonstrated to prove negligence.
4. Consultation before being touched does not need to be demonstrated to prove negligence.
Cognitive Level: Analyzing
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Assessment
Learning Outcome: 1-4: Explain the ethical and legal issues in critical care.

22) What is associated with moral distress in critical care nurses? Select all that apply.
Note: Credit will be given only if all correct choices and no incorrect choices are selected.
1. Having no voice in clinical decision making
2. Providing aggressive care to patients who cannot benefit
3. Realizing that nurses maintain power in bedside decision making
4. Knowing the right thing to do but not being able to do it
5. Leaving employment as a critical care nurse
Answer: 1, 2, 4, 5
Explanation: 1. Nurses consistently state that when they do not have a voice in the decision making, they feel powerless, which contributes to moral distress.
2. Nurses consistently state that when they cannot find meaning in the patients' or families' suffering this contributes to moral distress.
3. This will not contribute to moral distress.
4. Moral distress is when a nurse knows the right thing to do, yet institutional constraints such as lack of resources or personal authority would prevent the nurse from doing it.
5. As many as half of critical care nurses may have left a unit due to moral distress.
Cognitive Level: Analyzing
Client Need: Psychosocial Integrity
Nurs./Integ. Concepts: Nursing Process: Evaluation
Learning Outcome: 1-5: Differentiate among the major factors that affect the well-being of critical care nurses.

23) What might occur when a nurse employs conscientious refusal to participate? Select all that apply.
Note: Credit will be given only if all correct choices and no incorrect choices are selected.
1. Dismissal from a nursing position
2. Employer sanctions
3. Support from nursing administrators
4. Protection from the state boards of nursing
5. Support by the patient
Answer: 1, 2
Explanation: 1. The repercussions for the nurse of employing conscientious refusal may include dismissal from the current nursing position.
2. The nurse must also consider the amount of support that will be received from the administration of the institution.
3. Institutions vary from being supportive of conscientious refusal and changing their institutional policies to support it, to being legally required by some states to allow nurses to utilize it, to being able to dismiss the nurse who utilizes it.
4. Institutions vary from being supportive of conscientious refusal and changing their institutional policies to support it, to being legally required by some states to allow nurses to utilize it, to being able to dismiss the nurse who utilizes it.
5. If the patient and family have developed a relationship with the nurse, they may wish the nurse to remain with them beyond the decision-making phase to see the planned action accomplished and to help them cope with the consequences of their decision.
Cognitive Level: Analyzing
Client Need: Psychosocial Integrity
Nurs./Integ. Concepts: Nursing Process: Implementation
Learning Outcome: 1-4: Explain the ethical and legal issues in critical care.

24) Which symptoms indicate a nurse is experiencing compassion fatigue? Select all that apply.
Note: Credit will be given only if all correct choices and no incorrect choices are selected.
1. Difficulty separating work from personal life
2. Excessively high tolerance for frustration
3. Having a completely laissez-faire attitude
4. Decreased functioning in nonprofessional situations
5. Dreads working with certain types of patients
Answer: 1, 4, 5
Explanation: 1. This is a symptom of compassion fatigue.
2. This is not a symptom of compassion fatigue.
3. This is not a symptom of compassion fatigue.
4. This is a symptom of compassion fatigue.
5. This is a symptom of compassion fatigue.
Cognitive Level: Analyzing
Client Need: Psychosocial Integrity
Nurs./Integ. Concepts: Nursing Process: Assessment
Learning Outcome: 1-5: Differentiate among the major factors that affect the well-being of critical care nurses.

25) The nurse is providing care to patients in a Level II general critical care unit. For which types of patient problems will this nurse most likely provide care? Select all that apply.
Note: Credit will be given only if all correct choices and no incorrect choices are selected.
1. Exacerbation of heart failure
2. Wound infection
3. Burns over 50% of total body surface
4. Kidney transplant
5. Reattachment of a traumatic amputation of the left leg
Answer: 1, 2
Explanation: 1. A Level II critical care area is where comprehensive care for most disorders will be provided. Exacerbation of heart failure would not be considered specialized care.
2. A Level II critical care area is where comprehensive care for most disorders will be provided. A wound infection would not be considered specialized care.
3. A Level II critical care area is where comprehensive care for most disorders will be provided. The unit may not be able to care for specific types of patients, and transfer arrangements to Level I facilities must be in place for patients with the specific disorders for which the unit does not provide care, such as a burn unit.
4. A Level II critical care area is where comprehensive care for most disorders will be provided. The unit may not be able to care for specific types of patients, and transfer arrangements to Level I facilities must be in place for patients with the specific disorders for which the unit does not provide care, such as a transplant unit.
5. A Level II critical care area is where comprehensive care for most disorders will be provided. The unit may not be able to care for specific types of patients, and transfer arrangements to Level I facilities must be in place for patients with the specific disorders for which the unit does not provide care, such as a trauma unit.
Cognitive Level: Analyzing
Client Need: Safe, Effective Care Environment
Client Need Sub: Safety and Infection Control
Nurs./Integ. Concepts: Nursing Process: Assessment
Learning Outcome: 1-1: Analyze the key components of safe, effective care in the critical care environment.

26) A patient is admitted to an "open" intensive care unit. In addition to the nurse, which health care providers will assist in the care of this patient? Select all that apply.

Note: Credit will be given only if all correct choices and no incorrect choices are selected.

1. Pharmacist
2. Respiratory therapist
3. Attending physician
4. Dietician
5. Social worker

Answer: 1, 2, 3

Explanation: 1. In an open ICU, pharmacists are ICU based.

2. In an open ICU, respiratory therapists are ICU based.

3. In an open ICU, the physicians directing patient care may have other obligations. These physicians may or may not choose to consult an intensivist to assist with the management of their ICU patients.

4. Dieticians are not identified as patient care staff in an open intensive care unit.

5. The social worker is not identified as patient care staff in an open intensive care unit.

Cognitive Level: Analyzing

Client Need: Safe, Effective Care Environment

Client Need Sub: Management of Care

Nurs./Integ. Concepts: Nursing Process: Planning

Learning Outcome: 1-3: Examine the multidisciplinary nature of care within the critical care environment.

27) The critical care nurse is identifying patients at risk for safety and medical errors. Which patients should the nurse identify as being at risk for these issues? Select all that apply.
Note: Credit will be given only if all correct choices and no incorrect choices are selected.
1. Patient in isolation with MRSA
2. Patient who does not understand English
3. Patient with end stage renal disease and a respiratory rate of 8 per minute
4. Patient recovering from pacemaker insertion
5. Patient with pulmonary edema
Answer: 1, 2, 3
Explanation: 1. The most vulnerable of unstable ICU patients who are at highest risk for medical error include patients in isolation.
2. The most vulnerable of unstable ICU patients who are at highest risk for medical error include patients with limited English proficiency.
3. The most vulnerable of unstable ICU patients who are at highest risk for medical error include patients at end of life.
4. The patient recovering from pacemaker insertion is not identified as being a member of a vulnerable population.
5. The patient being treated for pulmonary edema is not identified as being a member of a vulnerable population.
Cognitive Level: Analyzing
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Assessment
Learning Outcome: 1-1: Analyze the key components of safe, effective care in the critical care environment.

28) The nurse manager of a critical care unit is explaining the AACN Synergy Model to the critical care nurses. What should the manager include as basic parts of this model? Select all that apply.
Note: Credit will be given only if all correct choices and no incorrect choices are selected.
1. Based on the patients' characteristics
2. Based on the competencies of the nurses
3. Patient outcomes will be measured
4. The nurses' assessment of patient outcomes will be measured
5. Reduction of cost to provide critical care services to patients
Answer: 1, 2, 3, 4
Explanation: 1. This model is based on the patients' characteristics.
2. This model is based on the nurses' competencies.
3. This model is based on outcomes derived from the patient.
4. This model is based on outcomes derived from the nurse.
5. Cost reduction strategies are not a part of the AACN Synergy Model.
Cognitive Level: Applying
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Implementation
Learning Outcome: 1-2: Explain the essential attributes of the role of critical care nurse.

29) While completing a self-evaluation, the critical care nurse compares personal practice to the competencies identified by the AACN Synergy Model. Which behaviors are consistent with those in the Synergy Model? Select all that apply.
Note: Credit will be given only if all correct choices and no incorrect choices are selected.
1. Seeks out research studies to update protocols
2. Approaches patient care by looking at the "big picture"
3. Ensures family members are comfortable when visiting critical care patients
4. Encourages patient families to discuss issues with the physician
5. Telling the next shift that a patient needs help with understanding instructions
Answer: 1, 2, 3, 4
Explanation: 1. This behavior demonstrates the competency of clinical inquiry.
2. This behavior demonstrates the competency of clinical judgment.
3. This behavior demonstrates the competency of caring.
4. This behavior demonstrates the competency of advocacy.
5. This behavior does not demonstrate an AANC competency for nurses in a critical care area.
Cognitive Level: Analyzing
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Assessment
Learning Outcome: 1-2: Explain the essential attributes of the role of critical care nurse.

30) What would be appropriate reasons for an intensive care unit intensivist to call a huddle? Select all that apply.
Note: Credit will be given only if all correct choices and no incorrect choices are selected.
1. Make care providers aware of a change in a patient's situation.
2. Communicate a critical issue about a patient.
3. Make an assignment change.
4. Discuss concerns about a patient's status or care.
5. Plan care for the shift.
Answer: 1, 2, 3, 4
Explanation: 1. Huddles are used so that team members may regain situation awareness.
2. Huddles are used so that team members may discuss critical issues.
3. Huddles are used so that team members may assign resources.
4. Huddles are used so that team members may express concerns.
5. Huddles are not used to plan care for the shift.
Cognitive Level: Analyzing
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Planning
Learning Outcome: 1-3: Examine the multidisciplinary nature of care within the critical care environment.

31) The nurse manager, concerned that several staff nurses are experiencing moral distress, is planning to implement the 4 A's to Rise Above Moral Distress. Which steps will the manager take? Select all that apply.
Note: Credit will be given only if all correct choices and no incorrect choices are selected.
1. Ask
2. Affirm
3. Assess
4. Act
5. Assert
Answer: 1, 2, 3, 4
Explanation: 1. Ask is a step in the 4 A's to Rise Above Moral Distress tool.
2. Affirm is a step in the 4 A's to Rise Above Moral Distress tool.
3. Assess is a step in the 4 A's to Rise Above Moral Distress tool.
4. Act is a step in the 4 A's to Rise Above Moral Distress tool.
5. Assert is not a step in the 4 A's to Rise Above Moral Distress tool.
Cognitive Level: Applying
Client Need: Psychosocial Integrity
Nurs./Integ. Concepts: Nursing Process: Planning
Learning Outcome: 1-5: Differentiate among the major factors that affect the well-being of critical care nurses.

32) The critical care nurse is experiencing psychologic symptoms of compassion fatigue. What strategies should the nurse use to enhance psychological well-being? Select all that apply.
Note: Credit will be given only if all correct choices and no incorrect choices are selected.
1. Make time for recreational activities.
2. Practice yoga for relaxation.
3. Plan to take a walk in the park at least once a week.
4. Monitor food and beverage intake.
5. Darken the room and limit activities before sleep.
Answer: 1, 2, 3
Explanation: 1. Sustaining a balance between work and play enhances psychological well-being.
2. Developing an effective relaxation method enhances psychological well-being.
3. Maintaining contact with nature enhances psychological well-being.
4. Monitoring food and beverage intake is a strategy to enhance physical well-being.
5. Utilizing healthy methods to induce sleep is a strategy to enhance physical well-being.
Cognitive Level: Applying
Client Need: Psychosocial Integrity
Nurs./Integ. Concepts: Nursing Process: Implementation
Learning Outcome: 1-5: Differentiate among the major factors that affect the well-being of critical care nurses.

33) The nurse manager is planning the staffing budget for the next fiscal year. What action should the manager take to ensure that staffing is adequate?
1. Study the results of the organization's staffing evaluation.
2. Meet with other nurse managers to compare staffing needs.
3. Remember that nurses should not work more than 72 hours each week.
4. Review staff competency needs with the director of human resources.
Answer: 1
Explanation: 1. The nurse manager should use the AACN report that addresses staffing. This report recommends that staffing decisions be evaluated and the data used to develop more effective staffing models.
2. The AACN report does not suggest meeting with other nurse managers to compare staffing needs. The nurses should participate in all phases of the staffing process.
3. The Institute of Medicine recommends that nurses work no more than 60 hours in a week.
4. Staff competency needs should be reviewed with the nurses.
Cognitive Level: Applying
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Implementation
Learning Outcome: 1-1: Analyze the key components of safe, effective care in the critical care environment.

34) The critical care nurse discusses a patient's change in status with the health care provider, pharmacist, and physical therapist. Which QSEN competency is this nurse demonstrating?
1. Patient-centered care
2. Quality improvement
3. Evidence-based practice
4. Teamwork and collaboration
Answer: 4
Explanation: 1. Patient-centered care recognizes the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for the patient's preferences, values, and needs.
2. Quality improvement is the use of data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems.
3. Evidence-based practice is the integration of best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.
4. Teamwork and collaboration is the ability to function effectively within nursing and interprofessional teams, fostering open communication, mutual respect, and shared decision making to achieve quality patient care.
Cognitive Level: Applying
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Implementation
Learning Outcome: 1-2: Explain the essential attributes of the role of critical care nurse.

35) The nurse plans to question a health care provider's choice of medication for a critically ill patient. Which statement demonstrates assertive communication?
1. "At times I think it would be wise to update the prescribing references that are used."
2. "I learned that this medication might not be effective with this health problem. Would you explain choosing it?"
3. "This patient is getting worse, and it is because someone prescribed an antiquated medication to treat the problem."
4. "I realize I am only a nurse, but I can read and I learned that this medication is a poor choice to treat this medical problem."
Answer: 2
Explanation: 1. This statement is aggressive and accuses the health care provider of not using current resources when providing care.
2. This statement is assertive. The nurse uses the word "I" and asks for the health care provider to explain the medication choice.
3. This statement is aggressive and accuses the health care provider of using antiquated medications.
4. This statement is apologetic and aggressive and undermines the nurse's position.
Cognitive Level: Analyzing
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Evaluation
Learning Outcome: 1-3: Examine the multidisciplinary nature of care within the critical care environment.

36) The adult daughter of a client with end-stage kidney disease informs the health care provider that all interventions are to be provided even though the client is heard telling the spouse that "enough is enough." What should be done first when analyzing this situation?
1. Identify significant information.
2. Determine the decision maker for the client.
3. Estimate the resources needed for care.
4. Calculate the expense of providing care to the client.
Answer: 1
Explanation: 1. This situation is an ethical dilemma because the question "What should be done?" can be asked. The adult daughter wants one course of action and the client wants another. When an ethical dilemma exists, the first essential step is the identification of significant information.
2. Identification of the decision maker might occur during the identification of significant information. However, determining this individual is not the first step when an ethical dilemma occurs.
3. Estimating the resources needed for care is not a step when working through an ethical dilemma.
4. The expense of providing care is not a step when working through an ethical dilemma.
Cognitive Level: Applying
Client Need: Safe, Effective Care Environment
Client Need Sub: Management of Care
Nurs./Integ. Concepts: Nursing Process: Assessment
Learning Outcome: 1-4: Explain the ethical and legal issues in critical care.

37) The nurse manager reviews the standards of self-care for caregivers during a staff meeting. Which staff nurse comment indicates that teaching about the standards has been effective?
1. "I will consider yoga classes."
2. "I will play tennis with my sister at least twice a week."
3. "I do love to read, but at times I review the events of the day and I'm distracted."
4. "Going to the zoo with my nephew might be a good idea if I'm not needed for overtime."
Answer: 2
Explanation: 1. Considering an activity to support self-care is not sufficient.
2. Committing to a physical activity indicates understanding about the standards of self-care.
3. Realizing that the events of the day are a distraction is a positive step; however, not committing to an activity to let go of work does not indicate understanding about the standards of self-care.
4. Realizing that an activity to let go of work and enjoy relaxation is a positive step; however, not making a plan because of the possibility of being needed for overtime does not indicate understanding about the standards of self-care.
Cognitive Level: Analyzing
Client Need: Psychosocial Integrity
Nurs./Integ. Concepts: Nursing Process: Evaluation
Learning Outcome: 1-5: Differentiate among the major factors that affect the well-being of critical care nurses.