## HP 480 - Nursing Health Promotion II

## **Exam Instructions**

A) 10 B) 9

C) 8

D) 7

Thank you for enrolling into HP 480 - Nursing Health Promotion II. This is your online examination. Please follow these instructions:

- Before attempting, carefully read the question text.
- Then choose the correct answer.
- Click on "Next" to go to the next question.
- Use the "Next" and "Previous" buttons to navigate between questions.
- Bookmark difficult questions to return to them later.
- Click the "Submit All" button to submit your exam for grading.
- Use the Question List in the upper left corner to view and jump to a certain question.
- Within 24-48 hours you will receive from us via a-mail a copy of your graded evamination

• Within 24-46 flours, you will receive from us via e-mail, a copy of your graded examination.		
If you have any questions, please contact us at: <a href="mailto:info@aihcp.org">info@aihcp.org</a>		
Full Name:		
Email:		
AH Number:		
<b>1.</b> The mother if an infant tells the nurse she initially thought that being a parent would be "fun". However, now that the baby has arrived she is very stressed by this new role of a parent. The best response for the nurse to make to this woman is:		
A) "New parents have unrealistic ideas."		
B) "Didn't your mother tell you how hard being a parent can be?"		
C) "It will get easier."		
D) "Tell me about what you expected from parenthood?"		
<b>2.</b> Immediately after birth a healthy infant is handed to the new father. This interaction between the baby and father is best described by which of the following terms?		
A) Attachment		
B) Engrossment		
C) Bonding		
D) Parenting		
<b>3.</b> On initial assessment the newborn has a pulse of 110, is crying vigorously with regular respirations, and moving all of its extremities. The infant's body is pink with cyanosis of the hands and feet. What Apgar score should the nurse assign to this child?		

- **4.** A women who is pregnant with her first child tells the nurse that she would like to have a cesarean section rather than a vaginal delivery so the baby's head will "look normal" after birth. How should the nurse respond to this client's request?
  - A) "The doctor will discuss your options for delivery with you."
  - B) "Unnecessary surgery may harm the baby."
  - C) "I will make a note of your request."
  - D) "The infant's head will usually take on a round shape shortly after birth."
- **5.** During the assessment of a postpartum patient the nurse observes the mother's response to her newborn and becomes alarmed about the behavior. Which of the following maternal behaviors would cause the nurse to be concerned about the baby's safety?
  - A) Cuddling the baby.
  - B) Holding the baby while crying.
  - C) Speaking softly to the baby.
  - D) Shouting for the baby to stop crying.
- **6.** A new mother brings her 5-month-old infant into the clinic for a routine examination. The mother expresses concern that her baby is "getting fat" when she learns the baby weighs 18 lbs. The baby weighed 9 lbs. 8 oz. at birth. What should the nurse explain to the mother about her concerns?
  - A) The baby is at the appropriate weight.
  - B) The baby is prone to obesity.
  - C) The baby will have an eating disorder
  - D) The baby is underweight.
- **7.** A new mother asks the nurse at what age her baby should receive immunizations. Which of the following immunization schedules would be appropriate for the nurse to provide this mother?
  - A) The baby needs injections every month for 6 months.
  - B) The baby needs injections at months 2, 4, and 6 and at approximately 18 months.
  - C) The baby needs injections at months 1, 3, and 5.
  - D) The baby's immunization schedule is based on growth, development, and general health.
- **8.** The parents of a 10-month-old baby are concerned about their child's response to being weaned from a bottle. What could the nurse instruct these parents about the weaning process?
  - A) The hardest feeding for the child to give up is the first one of the day.
  - B) Make sure the baby does not suck the thumb or use a pacifier while weaning.
  - C) Expect the baby to grow slower while weaning.
  - D) Do not force the baby to eat because weaning will help decrease the appetite.

- **9.** The student nurse on the post-partum unit is asked by her instructor to observe for attachment in the mother-baby dyad. The student nurse recalls that attachment:
  - A) Can only occur after the infant is several months old.
  - B) Is the emotional tie that forms between infants and their caregivers.
  - C) Cannot be observed directly.
  - D) Will not occur if the infant is premature.
- **10.** A new mother is concerned that her husband is spoiling their 3- month-old baby by picking up the child whenever he cries. What should the nurse tell this mother?
  - A) Tell the mother that she is correct. The child should learn to self-soothe.
  - B) Instruct the mother that she is responsible for the child's care and should follow her instinct.
  - C) Tell the new mother that responding to the child's cry helps to establish the child's sense of trust.
  - D) Suggest that the parent's attend a new parent group to resolve the issue.
- **11.** The nurse is working with the mother of a 2-year-old child who has started to have tantrums when being left at day care. The mother is concerned that she will lose her job as a result of tardiness associated with her child care situation. How should the nurse advise the mother?
  - A) "Ask your boss if you can come in a little later."
  - B) "The child may need to have a stay-at-home parent."
  - "This is normal behavior for a child in this age group. It will likely pass with firm consistent parenting."
  - D) "Leave the child with a relative or neighbor until the behavior is outgrown."
- **12.** The nurse is examining the ears of a 2-year-old child. How should the external ear best be positioned to insert the otoscope?
  - A) Pull the ear up and back
  - B) Pull the ear down and back
  - C) Pull the earlobe straight down
  - D) Do not manipulate the ear
- **13.** Which toy should the nurse suggest that grandparents purchase as a gift for an 18-month-old grandchild?
  - A) Tricycle
  - B) Play kitchen
  - C) Garden tools
  - D) Tambourine
- **14.** The nurse recommends to parents the use of bedtime rituals for their toddler because these activities:
  - A) Promote a sense of security.

C)	Encourage dependence.
D)	Offer options and choices.
nospi mothe	2-year-old child is admitted to the hospital for the treatment of leukemia. During this talization, the mother must return to their home located 350 miles away. The day after the er's departure the child demonstrates extreme sadness and disinterest in the environment. In which of the mourning process is this child?
A)	Protest
B)	Denial
C)	Apathy
D)	Despair
	ne mother of a 22-month-old toddler is concerned that mealtimes have become highly stressful the child will not eat. Which of the following could the nurse suggest to assist this mother's ern?
A)	Give the child high-fat, high-salt carbohydrate foods
B)	Provide finger foods so the child can choose.
C)	Insist the child eat everything on the plate.
D)	Only provide one food at a time.
drawi points	father and his 2-year-old son are waiting to be seen by the physician. The child completes a ng in the play room and shows the product to his father. The father is less than appreciative and sout errors the child made in the drawing. What can this father's behavior promote in the opment of his son?
A)	Positive self-worth
B)	Positive self-esteem
C)	Doubt
D)	Shame
eaten	mother frantically calls the well-baby clinic because she doesn't know if her 2-year-old child has any aspirin. The mother states she went into the bathroom and saw an open container of aspirin ablets lying on the floor. What should the nurse instruct this mother to do?
A)	Give the baby something to induce vomiting
B)	Give the baby something to drink.
C)	Give the baby something to eat.
D)	Call the poison control center.

B) Promote creativity.

- **19.** The nurse in the clinic is observing a toddler playing in the waiting room. The nurse notes the child speaks in one word sentences. What information does this provide the nurse about the development of this child?
  - A) The child is developmentally slow.
  - B) The child is probably around one-year-old
  - C) The child is bored.
  - D) The child is mentally challenged.
- **20.** The mother of a 26-month-old is asking about the child's blood pressure because high blood pressure runs in the family. What should the nurse explain to this mother about the child's blood pressure reading?
  - A) There is no such thing as hypertension in children.
  - B) All toddlers have high blood pressure.
  - C) If the bottom number of the reading is greater than 90 for three readings then the child could have high blood pressure.
  - D) Hypertension is effectively treated with medication.
- **21.** A nurse working in a pediatric clinic observes that 4-year-old female child is being consoled by father but rejects mother's attempts to calm her. The nurse concludes that this behavior is:
  - A) A definitive indication of physical abuse by the mother.
  - B) A sign of sexual abuse by the father.
  - C) Symptomatic of developmental delay.
  - D) Normal for a child of this age group.
- **22.** The parent of a 5-year-old is concerned that the child is obese. The child's weight is 22 kg. The nurse should explain to the parent the child is:
  - A) Underweight for age
  - B) Overweight, but not obese.
  - C) Normal weight for age.
  - D) Obese
- **23.** Nutrition education for parents of preschool children should emphasize:
  - A) Limiting between meal snacks.
  - B) Providing desserts only as a reward for finishing a meal.
  - C) Recognizing that times of not wanting to eat are normal behavior for preschoolers.
  - D) Offering large portions to provide adequate calories.

- **24.** A parent is concerned that a three-year-old child refuses to play with others, preferring to play alongside other children. The nurse should base the response to the parent's concern with one of the following facts:
  - A) Children of this age group usually enjoy games and activities involving groups.
  - B) Parallel play is a characteristic of this age group.
  - C) This play behavior may reflect a developmental delay.
  - D) The child is too young to play with other children.
- **25.** During the nutritional assessment of a preschooler, the mother explains the child only wants to eat raisins, cookies, and sugary-cereals. Which of the following could the nurse recommend to help improve the child's nutritional intake?
  - A) Withhold sweets and only use them for good behavior
  - B) Substitute milk, juice, fruit wedges, cheese, or peanut butter for the sugary snacks.
  - C) Nothing; the child's eating habits will improve with time.
  - D) Use the preferred sweet foods as a reward for eating all of the nutritional foods first.
- **26.** During a well-child visit in the clinic, the nurse observes a mother telling her child to sit in a chair and be quiet. When the child begins to protest, the mother states for the child to sit and behave. This parenting style would be considered:
  - A) Passive
  - B) Permissive
  - C) Neglectful
  - D) Authoritative
- **27.** During a health clinic visit, the mother of two children tells the nurse that the younger child seems to have lost interest in activities that the two of them previously participated in. Which of the following might be the reason for the younger child's change in behavior?
  - A) The younger child is still developing interests.
  - B) The older child is being mean to the younger child.
  - C) The younger child may feel defeated when trying to emulate the older child's behavior.
  - D) The children are having an argument.
- **28.** The nurse observes the parents of two preschool age children interact. The conversation is rushed and the wife is complaining that the husband doesn't do anything around the home or help with the child rearing activities. The husband is frustrated and asks the wife if there is anything he does right. Which of the following suggestions might be helpful to these parents?
  - A) Encourage the parents to separate from each other for a short while.
  - Encourage the parents to be more tolerant of each other and learn to accept failures, mistakes, and blunders.
  - C) Household tasks need to be delegated to the wife and out of home activities delegated to the husband.

- D) Limit contact with extended family members.
  29. The nurse observes a preschool age child ask his mother for money to buy a specific toy. The mother responds with a reference to the home activities that would help him earn the money for the purchase. The child agrees that the toy could wait until the correct amount of money can be earned. At which age would a preschooler most likely understand the role of money?
  A) 3
  B) 4
  C) 5
  D) Children do not understand money until the teen years
  30. The nurse is teaching recently hired day care providers about the play habits of children. The nurse informs care-givers about which of the following is characteristic of the play patterns for the 3- and 4-year-old child?
  - A) The 3-year-old puts toys away without supervision.
  - B) The 3-year-old enjoys a group of 5 or 6 peers.
  - C) The 4-year-old frequently has imaginary playmates.
  - D) The 4-year-old engages in solitary and parallel play most of the time
- **31.** The school nurse overhears two 11-year-olds discussing their families. One child states "My parents are so stupid. They don't know anything!" What is the best action for the nurse to take?
  - A) Notify the parent.
  - B) Ask the child about the statement
  - C) Ignore the comment.
  - D) Notify the child's counselor.
- **32.** A 9-year-old girl complaint of breast tenderness. On physical assessment, the nurse notes increased diameter of the areola. The nurse concludes that the child:
  - A) Is experiencing changes associated with prepuberty
  - B) Is experiencing precocious puberty.
  - C) Should be scheduled for a mammogram.
  - D) Should be counseled regarding birth control.
- **33.** A 6-year-old child frequently is fatigued during the school day and not doing well academically. How much sleep should the nurse suggest to the parents is needed by a child in this age group?
  - A) 8 hours
  - B) 9 hours
  - C) 11 hours
  - D) 17 hours

<b>34.</b> A 12-year-old child responds to the death of a grandparent by playing with younger siblings toys and displaying behaviors consistent with an earlier age group. The nurse is aware that the child is using the adaptive mechanism of:
A) Fantasy
B) Undoing
C) Regression
D) Projection
<b>35.</b> During a parent-teacher discussion, the parents of a 12-year-old female learn that their daughter performs extremely well in basketball and tennis. Upon returning home, the parents tell the child that she will begin private tennis lessons the following weekend. The daughter does not react positively. What could be the reason for the daughter's behavior?
A) She thinks that tennis is boring.
B) She does not really like sports.
C) Her parents are now forcing her to participate in sports
D) She is more interested in other activities.
<b>36.</b> During a parents-without-partners meeting a female attendant asks if there is anything in particular she should be concerned about with her 12-year-old son being left unattended in the home for a few hours after school each day. Which of the following suggestions would be helpful to her?
A) Instruct the child to never answer the phone when home alone.
B) Tell the child to watch television or listen to music so the home appears occupied.
C) Allow the child to bring friends home to keep him company.
D) Do not overwhelm the child by expecting housework and cooking chores to be done.
<b>37.</b> The parents of a school-age child have decided that their son will not attend public school but rather will be schooled in the home. In which area of school experience might this child not receive sufficient preparation?
A) Critical thinking
B) Problem solving
C) Socialization
D) Adult interaction
<b>38.</b> The fifth grade teacher of a school age child is concerned because the child never volunteers, seems to be afraid of making mistakes, and is always alone. Which of the following could these signs indicate?
A) Stress
B) Industry
C) Resiliency
D) Coping

- **39.** The school nurse is teaching parents of school-age children about the influence of media on children's behavior. When asked about television viewing, the nurse should instruct parents that television viewing can have which of the following negative effects on young children?
  - A) Promotes active learning.
  - B) Encourages creative play.
  - C) Promotes a physically active life-style.
  - D) Increases risk of aggressive behavior
- **40.** A parish nurse is counseling the parents of an adolescent. The parents express concern that the child is refusing to attend church services, which they believe is a crucial part of their family life. The nurse recognizes by refusing to participate in religious services, the child is probably:
  - A) Attempting to establish an identity by rejecting parental values.
  - B) Punishing the parents for their rigid limits.
  - C) Exhibiting behaviors of substance use by the child.
  - D) Attempting to tell the parents of a desire to join another church.
- **41.** A client tells the nurse since her children have left home, she and her husband are finding that they really do not know each other anymore. Which task of family development is this couple struggling with at this time?
  - A) Establish a sharing of responsibilities.
  - B) Reestablish a mutually satisfying marriage relationship.
  - C) Rework relationships with relatives, friends, and associates.
  - D) Formulate a workable philosophy of life.
- **42.** A 12-year-old boy expresses he is upset about not having grown much in the last year. Also, his female classmates are now taller than he is. The nurse should base the response to the child on the fact that:
  - A) Height is genetically determined.
  - B) He has likely reached his full adult height.
  - C) He will likely continue to grow for several more years.
  - D) Short stature in a male in this age group should be evaluated by a specialist.
- **43.** When discussing hypertension with a group of adolescents, the nurse should include which of the following relevant facts about this condition?
- 1. Hypertension is not usually a concern in adolescents.
- 2. High diastolic blood pressure is associated with smoking.
- 3. Stress is a factor in development of hypertension.
- 4. Exercise has no impact on blood pressure.
- 5. Caucasian females are most likely to be affected by hypertension.
  - A) 1,2,3
  - B) 3,4,5
  - C) 1,3,5

- D) 1,2,3,4,5
- **44.** The father of a 16-year-old female teenager is frustrated with his daughter's behavior. The father cannot understand why the teen questions the expectations he has set for her. The teen's response to the father's expectations is an example of her attempt to achieve what task of adolescent development?
  - A) Identity formation
  - B) Identity diffusion
  - C) Identity foreclosure
  - D) Identity moratorium
- **45.** The parents of a 16-year-old girl are concerned about the most effective way to give their daughter freedom to be with friends while maintaining boundaries and limits. The nurse can explain to the parents they can be most effective in limit setting if they:
  - A) Allow the adolescent to formulate solutions to her own problems.
  - B) Make a strong conscious effort to remember their period of adolescence.
  - C) Formulate a definite disciplinary code and adhere to it strictly at all time.
  - D) Continuously evaluate their daughter's development and ability to respond to new situations.
- **46.** An 18-year-old male is admitted to the hospital to be treated for cardiac related symptoms associated with cocaine use. Which of the following would be appropriate behavior by the nurse when caring for this client?
  - A) Provide care with the minimal amount of contact.
  - B) Refuse to care for the client.
  - C) Inspect the client's room for any stashed drugs.
  - D) Talk with the client to assess the reasons for drug use
- **47.** The mother of a teenage female is concerned that her 16-year-old daughter is purging after eating. The mother states the daughter is overly concerned about her body image and weight, eats sporadically, and after eating, immediately excuses herself to go to the bathroom. What suggestion would be helpful for the nurse to give to this mother?
  - A) Stress that this is likely just a phase that the daughter is going through
  - B) Encourage the mother to praise her appearance and notice any weight loss
  - C) Tell the mother to focus on excellence in scholastic performance rather than physical appearance.
  - D) Look for signs of weight fluctuation, weakness, headaches, fatigue, and scars on the hands.
- **48.** During a routine examination the nurse learns that a 15-year-old male adolescent is smoking cigarettes. Upon assessment, the nurse learns the boy does not enjoy smoking yet feels he must do so. The adolescent's response to smoking can be an indication of:
  - A) Peer pressure.
  - B) An attempt to be adult.
  - C) A method of weight control

- D) A way to avoid harassment
- **49.** A 16-year-old female comes into the clinic for a routine examination. During the assessment, the client asks the nurse for information about breast augmentation surgery. Which of the following would be an appropriate response for the nurse to make?
  - A) The surgery is expensive. How will you pay for it?
  - B) Do your parents know you are considering surgery? They would have to give consent because you are underage.
  - C) The breasts develop until at least age 18; maybe you should give yourself some more time before considering surgery.
  - D) Do you think you would look good after the surgery? Large breasts are not in style anymore.
- **50.** When explaining assessment findings to a young adult female, the nurse should include which of the following points when talking about gender differences in weight?
  - A) Females typically have about half as much body fat than males
  - B) Females typically have about twice as much body fat as males.
  - C) Females typically store fat in the abdomen.
  - D) Males typically store fat in the hips.
- **51.** The nurse in the college health office is counseling a female student. The student tells the nurse that her boyfriend is angry because she refuses to have intercourse during her menstrual period. Which of the following research findings can the nurse provide student?
  - A) Intercourse during menses can cause tissue damage and is contraindicated.
  - B) Intercourse during menses is not contraindicated, but sex drive is diminished.
  - C) Intercourse during menses is not contraindicated, but the student should do what she is
  - D) Intercourse during menses may cause increased cramping and discomfort.
- **52.** A 21-year-old healthy, moderately active male weighing 170 pounds at 5 feet 10 inches, asks the nurse about the appropriate daily calorie intake to maintain his current weight. Taking into account BMI, physical activity and digestion and absorption needs, which is the best response for the nurse to offer this student?
  - A) 1870 calories/day
  - B) 2618 calories/day
  - C) 2880 calories/day
  - D) 3500 calories/day
  - E) 2280 calories/day
- **53.** A young adult who recently started rotating between the day and night shift at his job came to the clinic nurse with symptoms that are consistent with depression. The nurse concluded the recent onset of depression is likely related to:
  - A) The client being overwhelmed by new adult responsibilities

- B) Genetic factors that increase risk of depression.
- C) Disruption in body rhythms of diurnal cycles.
- D) Substance abuse that the client is not admitting.
- **54.** The nurse is caring for a 27-year-old single male. The client tells the nurse that he is returning to college full time. The nurse understands the current generation of young adults may delay achievement of which of the following developmental tasks?
  - A) Establishment of a career
  - B) Developing a sense of trust
  - C) Formation of relationships with same sex friends
  - D) Life review process
- **55.** The mother of a middle school child asks the school nurse for advice regarding a home situation. The mother is concerned because an older child has returned home after finishing college and is having his girlfriend stay overnight. The mother is concerned about the effect of this behavior on the younger children in the home. The nurse bases her response to the mother on the fact that:
  - A) The needs of the younger children come first; the older child should move out.
  - B) Any request for alteration of behavior on the part of the older child will result in alienation.
  - C) It is important for parents and the older child to discuss the situation and the impact on younger siblings
  - D) The mother should just explain the situation to the younger child and not involve the older child.
- **56.** The nurse is admitting a young adult to the medical unit after a week long stay in the intensive care unit (ICU). The report from the ICU states that although stable, the client has been experiencing periods of confusion, disorientation and mood changes in the last 24 hours. The nurse plans the clients care to allow for:
  - A) Administration of anti-anxiety medications.
  - B) A psychiatric evaluation.
  - C) Uninterrupted night-time sleep in a low stimuli environment.
  - D) Every 2 hour vital signs with neurological assessments.
- **57.** During the completion of the health history, the nurse learns that a 38-year-old female has been in an abusive marriage for the last five years. The client states she believes her husband will change his behavior and therefore, will not leave him. What information can the nurse provide to this client about her desire to change her husband's behavior?
  - A) Nothing.
  - B) Tell her she deserves what she gets.
  - C) Help her to realize that the way she is being treated is normal.
  - D) Explain that long-standing abusive relationships often do not become abuse-free.
- **58.** A 32 year old male is admitted into the hospital for abdominal surgery. During the postoperative period, the nurse consistently finds the client difficult to arouse in the morning and that he needs

sleeping pills at bedtime to aid with rest and sleep. Upon closer assessment, the nurse learns the client always works the night shift at his job. Which of the following elements of care would be more applicable to this client's normal sleep-wake pattern?

- A) Hold breakfast.
- B) Wake the client and provide caffeine products.
- C) Discontinue all sleeping pills.
- D) Recommend that the client take a shower or bath in the late evening.
- **59.** During a nutritional assessment of a 35-year-old obese female, the nurse learns she consumes 15 servings of bread and 20 servings of fats per day. Which of the following serving amounts would be more appropriate for this client?
  - A) Bread servings not to exceed 11 per day; fat servings to be used sparingly.
  - B) Bread servings to be used sparingly; fat servings 2 to 3 per day.
  - C) Bread servings not to exceed 5 per day; fat servings 4 per day.
  - D) No minimum recommendations for fats; bread servings not to exceed 6 per day.
- **60.** Participants in a local women's group ask the nurse about the benefits and risks of hormone replacement therapy (HRT) to treat menopausal symptoms. Which of the following information should the nurse include in her response to the women's questions on this issue?
- 1. Increase in heart disease is associated with combination HRT.
- 2. Use of estrogen replacement only results in no increased risk of breast cancer.
- 3. Women with a history of breast cancer should use combination HRT only.
- 4. Women taking HRT may have false positive mammogram results.
- 5. HRT is no longer used as a treatment for menopausal symptoms.
  - A) 2,3,4
  - B) 1,2,4
  - C) 2,4,5
  - D) All of the above
- **61.** The nurse is reviewing a daily food journal of a 50 year-old male who is concerned with weight gain in recent years. The nurse evaluates calorie intake with the knowledge that:
  - A) BMI decreases with age.
  - B) Carbohydrate needs increase during middle age.
  - C) BMI increases throughout the life span
  - D) Physical activity is not longer a consideration in the middle years.
- **62.** A middle-aged female client is concerned about her risk for heart disease due to the recent death of a sibling to myocardial infarction. The client shows no significant risk factors and indicates she would like to make life style changes to reduce risk. Which of the following strategies should the nurse suggest to this client?
  - A) Take 325 mg of aspirin three times per day.
  - B) Maintain waist-to-hip ratio of 1:2.

C) Increase intake of whole grains and fruits.
D) Reduce intake of nuts and fatty fish.
<b>63.</b> A middle-aged client mentions to the nurse that he would like to return to college but is concerned that it is too late in life to complete a college degree. The nurse can advise this client that:
A) IQ tests scores decline in middle age, so college performance may be impacted.
B) Recall begins to decline in the twenties, so memorization might be difficult
C) Ability to learn is reduced by the time one reaches forty.
D) Success in college has little to do with age.
<b>64.</b> A middle-aged couple is attending counseling to assist in dealing with problems in their marriage. The husband has decided to buy a foreign sports car and go out with his single male friends at least once a week. The wife is concerned that this behavior will lead to a divorce. Which of the following might explain the husband's behavior?
A) He is disappointed with himself.
B) He is lacking communication with his spouse.
C) He is ready to retire from full-time employment
D) He is preoccupied with aging and losing vitality
<b>65.</b> A 42-year-old widowed daughter of an elderly couple is having difficulty spending any quality time with her parents. Which of the following might be the reason for this daughter's behavior?
A) Fear that she will be identified as the person to care for the parents as they age.

- A) peer
- B) parent figure

D) She is selfish.

B) She is feeling guilty.

C) She is a widow and can't see a married couple together.

- C) mentor
- D) superior
- **67.** A 48-year-old male, divorced for 5 years, decides to purchase a sports car. Immediately after, he plans an addition to his home to include a hot tub and wet bar. Within weeks he is actively involved with several women through the Internet. What type of behavior is this male demonstrating?
  - A) Identity crisis
  - B) Midlife crisis
  - C) Genertivity

- D) Menopause
- **68.** The nurse is talking with a 50-year-old female who is concerned about how life will change when her twin daughters leave for college in a few weeks and she and her husband will be "empty nesters". The nurse bases her discussion with the client on the knowledge that family-life patterns in middle age:
  - A) Change radically when children grow up and leave home.
  - B) Are much the same as in early adulthood.
  - C) Are easy to adjust to because friction with the children is minimized or eliminated.
  - D) Change in much the same way for men and women.
- **69.** During an ophthalmological examination a 55-year-old client learns he needs bifocals. What could be the reason for the bifocals?
  - A) The brain structure changes.
  - B) The shape of the lens changes at around age 40 to 50
  - C) There is a loss of eye muscle tissue.
  - D) There is not enough blood flow to the eye tissue.
- **70.** The nurse is assessing a female client in her early 60s. The woman tells the nurse "I feel like I'm still 25!" Which term associated with aging can the nurse use to describe what the client has verbalized?
  - A) Biological age
  - B) Social age
  - C) Psychological age
  - D) Cognitive age
- **71.** An elderly female is brought to the emergency department (ED) by her husband following a fall down 3 steps in her home. The nurse notes this is the second ED visit for an injury for this client in the last 2 months and further notes the client lost 10 pounds since her last admission. When questioned, the client states that "everything is fine. I just don't feel much like eating". What action should the nurse give this priority?
  - A) Refer the client to a home nursing agency for assessment of the living environment.
  - B) Request a consult by a dietician to address the weight loss issue.
  - C) Interview the client privately about her home situation and to assess for indications of abuse.
  - D) Suggest that the client enroll in a home meal program.
- **72.** A 60 year-old male client requests a sedative due to his inability to sleep through the night. Which of the following should the nurse include in the assessment of this client?
- 1. Evaluate the client's urinary pattern.
- 2. Discuss the client's dietary pattern.
- 3. Evaluate for food allergies or environmental irritants.
- 4. Evaluate for use of prescription and over-the-counter medications.
- Evaluate the client's exercise habits.
  - A) 2 and 4

- B) 1,3,4
- C) 2,3,4
- D) All of the above
- **73.** Which of the following should the nurse consider when planning an educational activity for senior citizens?
  - A) Visual aids and hand-out should be developed in large print.
  - B) Materials from textbooks and professional journals can be used without adaptation.
  - C) Incorporate written and psychomotor testing for evaluation purposes.
  - D) One long session is better than several short sessions.
- **74.** A 74-year-old male is angry and bitter towards his church organization. He sees the younger people of the parish taking over his previous responsibilities and feels that he is being cast aside. Which of the following might be beneficial to assist this client's feelings of spiritual impoverishment?
  - A) Nothing. Tell the client to accept change.
  - B) Ask the client if he could assist a younger person with a church-related responsibility.
  - C) Suggest he find another parish.
  - D) Offer to help the client find new activities to occupy his time.
- **75.** The nurse is assessing an 89-year-old male in the wellness clinic. During the assessment, the client shares his philosophy of life and how it has helped him to look forward to each day with a smile and the anticipation of a new discovery. Which personality trait is this client demonstrating that leads the nurse to believe that the client is successful in accomplishing the developmental task of this life stage?
  - A) self-esteem
  - B) energy
  - C) self-determination
  - D) optimism
- **76.** During the hospital discharge of an 81-year-old widowed female the nurse learns the client lives alone, cannot drive, and is concerned about keeping future doctor appointments and attending the outpatient center for physical therapy. What suggestion should the nurse consider making to assist this client that may not be necessary for a younger person?
  - A) Consider nursing home placement.
  - B) Using a transportation service.
  - C) Moving closer to the doctor and hospital
  - D) Find a doctor that makes house calls.

- **77.** A client who recently lost her father is concerned that her mother is becoming depressed. The client tells the nurse her mother refused family dinner invitations and is spending a great deal of time alone or with neighbors who are also widowed. The nurse bases her response to the clients concern on the knowledge that:
  - A) Older women are often depressed.
  - B) Family relationships must often be redefined in later years.
  - C) The mother likely does not want to be around her children any longer
  - D) The women may be grieving inappropriately.
- **78.** In order to assist the elderly client to meet developmental needs, the nurse should ensure that interventions are assisting the individuals to:
  - A) Sustain self-esteem.
  - B) Ensure participation in recreational activities.
  - C) Allow for withdrawal into his or her own world.
  - D) Realize that the elderly are actually children in reverse and should avoid reminiscing or repetitive statements.
- **79.** The parent of a preschool child asks the school nurse how to explain to the child about the impending death of an elderly grandparent. What should the nurse understand about a preschool child's perceptions of death?
  - A) Death is perceived as final.
  - B) Death is perceived as inevitable.
  - C) Death can be avoided by certain behaviors
  - D) Death is perceived as a temporary state
- **80.** While reviewing documentation in an elderly homecare client's chart, the nurse notes the individual has a terminal condition. The client's children have asked that the client not be told of the diagnosis or its grave prognosis. While planning for a meeting with the client's family, the nurse should be primarily concerned that:
  - A) The children's wishes are honored regarding care of the client.
  - B) The family will not be able to engage in rituals of life review with the client.
  - C) The client will find out the diagnosis by accident.
  - D) The nurse has an obligation to the client and should ignore the family's wishes.
- **81.** The nurse is caring for a client with cancer who has a prognosis of 3 months to live. The spouse is concerned because the client recently purchased airline tickets for a vacation that is scheduled eight months from now. The nurse explains to the spouse that the client is probably experiencing which stage of awareness?
  - A) denial
  - B) anger
  - C) psychological isolation

- D) bargaining
- **82.** The children of a man who is at home and dying state to the nurse they feel helpless because their father does not talk to them, watch television or read. They are unsure of how to interact with the client. How should the nurse respond to the family?
  - A) Review the client's medications for any that may be influencing the client's ability to interact with family.
  - B) Request a psychiatric evaluation to rule out depression.
  - C) Educate the family about the process of withdrawing at the end of life.
  - D) Encourage the children to only visit for short periods of time.
- **83.** A critically ill client asks the nurse to help him die. Which of the following would be an appropriate response for the nurse to give this client?
  - A) You feel that death is your only option?
  - B) How would you like to end your life?
  - C) You will die when the time is right.
  - D) Assisted suicide is illegal in this state
- **84.** The wife of a recently deceased male is contacting various individuals to inform them of her husband's death. She tells the nurse that she will drive to her parent's home to tell them in person instead of using the telephone. How should the nurse interpret this action on the part of the widow?
  - A) She needed to get out of the hospital.
  - B) She is looking for support from her family.
  - C) She is avoiding the reality of the loss.
  - D) She is having a pathological grief response
- **85.** While providing care to a terminally ill client, the nurse is asked questions about death. Which of the following would be beneficial to support the client's spiritual needs?
  - A) Do nothing. The client is not looking for answers.
  - B) Ask the client, "Do you feel ready to die?"
  - C) Ask the client, "Is there anything special you would like before dying?"
  - D) Reflect the questions back to the client to encourage exploration of feelings, thoughts, and beliefs.
- **86.** A terminally ill client has died at home in the presence of the family and the hospice nurse. Which of the following is an intervention a hospice nurse may perform to assist this family after the death of their loved one that might not be performed if the client died in an acute care facility?
  - A) Provide a room for the family to organize arrangements.
  - B) Send a card as an expression of sympathy.
  - C) Suggest ways for the family to move on with life.
  - D) Provide grief support and follow-up intervention.

- **87.** The 4-year-old son of a deceased male is asking questions about his father. Which of the following activities would be beneficial for this young child to participate in?
  - A) Nothing because he is too young to understand death.
  - B) Tell him his father has gone away, never to return.
  - C) Tell him his father is sleeping.
  - D) Explain that his father has died in a way that reflects the family's belief system and that he has the option of attending the funeral.
- **88.** After the death of a 46-year-old male client, the nurse approaches the family to discuss organ donation options. The family consents to this and the nurse begins the process of donating the organs. Which of the following would be most helpful to the grieving family during this difficult time
  - A) Calling the client a "donor".
  - B) Provide care to the deceased client in a careful and loving way.
  - C) Encourage the family to make a quick decision.
  - D) Tell them that there is no time to call other family members for advice
- 89. Hospice is designed for which of the following?
  - A) Enhance the client's autonomy
  - B) Foster communication between client and family
  - C) Help the client cope with the dying process
  - D) All of the above