

☒ eExam Question Bank

Coursecode:

Choose Coursecode

☐ Delete Selected Questions

Show 150 entries

Search:

<input type="checkbox"/>	Question Type	Question	A	B	C	D	Answer	Remark
<input type="checkbox"/>	FBQ	Behaviors indicative of <input type="text"/> __include facial grimace, moaning, crying or screaming, guarding or immobilization of a body part, tossing and turning, and rhythmic movements.	pain	pain				<input type="button" value="eExam"/>
<input type="checkbox"/>	FBQ	"Do you have any medical history?" is an example of a <input type="text"/> __question	closed-ended	closed-ended				<input type="button" value="eExam"/>
<input type="checkbox"/>	FBQ	When viewed laterally, the angle between the skin and the nail base should be approximately <input type="text"/> degrees.	160	160				<input type="button" value="eExam"/>
<input type="checkbox"/>	FBQ	The nails should have a <input type="text"/> __undertone and lie flat or form a convex curve on the nail bed	pink	pink				<input type="button" value="eExam"/>
<input type="checkbox"/>	FBQ	The process used for the assessment of hyper-resonance over inflated lung tissue in a patient with emphysema is <input type="text"/>	auscultation.	auscultation.				<input type="button" value="eExam"/>
<input type="checkbox"/>	FBQ	Using eleven functional health patterns, the processes of ingestion, digestion, absorption, and metabolism are assessed in <input type="text"/>	Nutritional-Metabolic Pattern	Nutritional-Metabolic Pattern				<input type="button" value="eExam"/>
<input type="checkbox"/>	FBQ	Types of assessment that are used to obtain information about a client are comprehensive, focused, and <input type="text"/>	emergency	emergency				<input type="button" value="eExam"/>

<input type="checkbox"/>								
<input type="checkbox"/>	FBQ	The purpose of the nursing assessment is to make a <input type="text"/> __about a client's health status.	clinical judgment	nursing diagnosis				eExam
<input type="checkbox"/>	FBQ	Data that can be observed by one person and verified by another person observing the same patient are known as <input type="text"/>	objective data	objective data				eExam
<input type="checkbox"/>	FBQ	When assessing the client's abdomen. <input type="text"/> should be done first	inspection.	inspection.				eExam
<input type="checkbox"/>	FBQ	The bell of the stethoscope is used for <input type="text"/> __sounds	low-pitched	low-pitched				eExam
<input type="checkbox"/>	FBQ	The pulmonic area is the second intercostals space (ICS) to the <input type="text"/>	left of the sternum	left of the sternum				eExam
<input type="checkbox"/>	FBQ	The aortic area is the second intercostals space (ICS) to the <input type="text"/>	right of the sternum	right of the sternum				eExam
<input type="checkbox"/>	FBQ	Percussion has limited usefulness in the <input type="text"/> __because X rays and other diagnostic tests provide the same information in a much more accurate manner	cardiovascular assessment	cardiovascular assessment				eExam
<input type="checkbox"/>	FBQ	In Asian cultures, breast self-examination may be considered a form of <input type="text"/>	masturbation	masturbation				eExam
<input type="checkbox"/>	FBQ	Physical assessment of the ear consists of auditory screening, inspection and palpation of the external ear and <input type="text"/>	otoscopic assessment.	otoscopic assessment.				eExam
<input type="checkbox"/>	FBQ	Assessment of the eyes should be carried out in an orderly fashion, moving from the extraocular structures to the <input type="text"/>	intraocular structures.	intraocular structures.				eExam
<input type="checkbox"/>	FBQ	<input type="text"/> __is used to determine exact ROM in joints with limited ROM.	Goniometer	Goniometer				eExam

<input type="checkbox"/>								
<input type="checkbox"/>	FBQ	Physical assessment of the neurologic system proceeds in a <input type="text"/> __-and distal to proximal pattern	cephalocaudal	cephalocaudal				eExam
<input type="checkbox"/>	FBQ	Physical assessment of the neurologic system begins with assessment of the client's <input type="text"/>	mental status	mental status				eExam
<input type="checkbox"/>	FBQ	Schamroth techniques are used to assess <input type="text"/>	clubbing.	clubbing.				eExam
<input type="checkbox"/>	FBQ	Localized hot, red, swollen painful areas indicate the presence of <input type="text"/> and possible infection.	inflammation	inflammation				eExam
<input type="checkbox"/>	FBQ	<input type="text"/> __is produced when bacterial waste products mix with perspiration on the skin surface.	Body odor	Body odor				eExam
<input type="checkbox"/>	FBQ	Gray hair can occur as a result of decreased melanin, <input type="text"/> or aging.	genetics	genetics				eExam
<input type="checkbox"/>	FBQ	Hair color is determined by the amount of <input type="text"/>	melanin	melanin				eExam
<input type="checkbox"/>	FBQ	The <input type="text"/> __is sensitive to touch and temperature	skin	skin				eExam
<input type="checkbox"/>	FBQ	In physical assessment of the integumentary system, the techniques of inspection and <input type="text"/> __will be used	palpation	palpation				eExam
<input type="checkbox"/>	FBQ	Health records and the results of laboratory tests are important <input type="text"/> __sources of data collection during health assessment	secondary	secondary				eExam
<input type="checkbox"/>	FBQ	Listening to sounds produced by the body to assess normal conditions and deviations from normal is done through <input type="text"/>	Auscultation.	Auscultation.				eExam

<input type="checkbox"/>								
<input type="checkbox"/>	FBQ	<input type="text"/> of the stethoscope is more sensitive to high-pitched sounds.	The diaphragm	The diaphragm				eExam
<input type="checkbox"/>	FBQ	Auscultation is usually performed with a <input type="text"/>	stethoscope	stethoscope				eExam
<input type="checkbox"/>	FBQ	The usual percussion sound in the right lower quadrant of the abdomen is <input type="text"/>	tympany	tympany				eExam
<input type="checkbox"/>	FBQ	<input type="text"/> is an assessment technique involving the production of sound to obtain formation about the underlying area	Percussion	Percussion				eExam
<input type="checkbox"/>	FBQ	The tips of the fingers can be used to palpate <input type="text"/>	lymph nodes	lymph nodes				eExam
<input type="checkbox"/>	FBQ	The dorsa (back) of the hands and fingers can be used to assess <input type="text"/>	temperatures	temperatures				eExam
<input type="checkbox"/>	FBQ	Palpation is the examination of the body through the use of <input type="text"/>	touch	hands				eExam
<input type="checkbox"/>	FBQ	<input type="text"/> is the visual examination of a part or region of the body to assess normal conditions and deviations from normal	Inspection	Inspection				eExam
<input type="checkbox"/>	FBQ	Performing palpation and percussion of the abdomen before auscultation can alter <input type="text"/>	bowel sounds and produce false findings	bowel sounds and produce false findings				eExam
<input type="checkbox"/>	FBQ	Objective data is obtained through <input type="text"/> to determine the patient's physical status, limitations, and assets.	physical examination	physical examination				eExam
<input type="checkbox"/>	FBQ	Functional health patterns format includes an initial collection of important health information followed by assessment of <input type="text"/> areas of health status or function	11	Eleven				eExam

<input type="checkbox"/>								
<input type="checkbox"/>	FBQ	Functional health patterns format for taking Nursing history was developed by <input type="text"/>	Gordon	Gordon				eExam
<input type="checkbox"/>	FBQ	The part of the body that is more sensitive to vibrations is <input type="text"/>	Palmar surface	Palmar surface				eExam
<input type="checkbox"/>	FBQ	The 'gold standard' for assessing the existence of pain is <input type="text"/>	Client self-report	Patient self-report				eExam
<input type="checkbox"/>	FBQ	The step of the nursing process that includes data collection by health history, physical examination, and interview is <input type="text"/>	Assessment	Assessment				eExam
<input type="checkbox"/>	FBQ	<input type="text"/> is used for head-to-toe assessment.	Comprehensive Assessment	Comprehensive Assessment				eExam
<input type="checkbox"/>	FBQ	<input type="text"/> __ is defined as "an unpleasant sensory and emotional experience associated with actual or potential tissue damage or described in terms of such damage"	Pain	Pain				eExam
<input type="checkbox"/>	FBQ	<input type="text"/> includes an assessment related to a specific problem	Focused Assessment	Focused Assessment				eExam
<input type="checkbox"/>	FBQ	Detailed assessment that focuses on one or more body systems, including those not directly involved in presenting problem or admission diagnosis is <input type="text"/>	Comprehensive Assessment	Comprehensive Assessment				eExam
<input type="checkbox"/>	FBQ	<input type="text"/> determine if a patient has responded to nursing care sufficiently enough to be recommended for discharge	Evaluations	Evaluations				eExam
<input type="checkbox"/>	FBQ	Blood pressure, pulse rate, blood counts, and age are examples of <input type="text"/>	Variable data	Variable data				eExam
<input type="checkbox"/>	FBQ	<input type="text"/> __ is information that does not change over time such as race, sex, or blood type	Constant data	Constant data				eExam

<input type="checkbox"/>								
<input type="checkbox"/>	FBQ	<input type="text"/> is observed or measured by the professional nurse	Objective data	Objective data				eExam
<input type="checkbox"/>	FBQ	<input type="text"/> is hand-on examination of the client	Physical assessment	Physical examination				eExam
<input type="checkbox"/>	FBQ	Perception of pain, nausea, dizziness, itching sensations, or feeling nervous are examples of <input type="text"/>	Subjective data	Subjective data				eExam
<input type="checkbox"/>	FBQ	<input type="text"/> is information that the client experiences and communicates to the nurse	Subjective data	Subjective data				eExam
<input type="checkbox"/>	FBQ	The primary source from which data is collected is <input type="text"/>	The client	The patient				eExam
<input type="checkbox"/>	FBQ	Assessment is <input type="text"/> __ step of nursing process	1	First				eExam
<input type="checkbox"/>	FBQ	Subjective data is gathered during <input type="text"/>	Interview	Interview				eExam
<input type="checkbox"/>	FBQ	The nursing health assessment is used to support the identification of a <input type="text"/>	Nursing diagnosis	Nursing diagnosis				eExam
<input type="checkbox"/>	FBQ	<input type="text"/> is a systematic data collection	Health assessment	Nursing Health assessment				eExam
<input type="checkbox"/>	MCQ	Which of the following coping strategies is not use with the person in pain_____?	Yoga	Aversion Therapy	Distraction	Relaxation techniques	B	eExam
<input type="checkbox"/>	MCQ	When assessing a client with pain, the nurse:_____	Reviews the client's description of the pain and other factors that may influence pain	Thinks about long-term goals	Tell the client that the pain helps the client to become stronger	Encourage fluids before the pain assessment	A	eExam
<input type="checkbox"/>	MCQ	Which of the following statement is true with regards to pain assessment_____?	Subjective nature of pain makes pain assessment and management challenges for every clinician	It helps to identify the strengths of the clients in promoting health.	It contribute to a database that identifies the client's current and past health status and	It provide a baseline against which future changes can be evaluated	A	eExam

<input type="checkbox"/>								
<input type="checkbox"/>	MCQ	Which of the following statement is not true about Emergency Assessment_____?	It is limited to assessing life-threatening conditions	It is conducted to ensure survival	Detailed assessment that focuses on one or more body systems	A brief systematic assessment is performed to identify any/all injuries/problems	C	eExam
<input type="checkbox"/>	MCQ	Which of the following statements is true regarding a comprehensive or complete health assessment_____?	Use only one component so as to not confuse the patient	Usually begins with obtaining a thorough health history and physical exam	Use the components the patient chooses.	Use all components every time you interview a patient	B	eExam
<input type="checkbox"/>	MCQ	All of the following actions can help make taking a history on a sensitive subject easier EXCEPT:_____	observing experienced clinicians ask these type of questions	attending a lecture or seminar on these sensitive subjects to learn more about them.	using euphemisms and metaphors to ask embarrassing questions	asking some opening question to these subjects as practice	C	eExam
<input type="checkbox"/>	MCQ	Which of the following is TRUE with regards to documentation_____?	Start from complex to simple	Detailed explanation not necessary	Use standard and accepted abbreviations, symbols, and terminology	None of the above	C	eExam
<input type="checkbox"/>	MCQ	Which of the following establishes the foundation for good patient care_____?	Eliciting a good history	Asking open-ended questions	Using common sense	Using active listening	A	eExam
<input type="checkbox"/>	MCQ	Which of the following actions can you take to establish rapport with a patient early in the interview_____?	Do not allow her to discuss her chief complaint freely	Ask as many questions as possible to get her attention	Respond to her condition with empathy	Be as stiff and emotionless as possible	C	eExam
<input type="checkbox"/>	MCQ	Data collection involves:_____	Gathering information in relation to the persons' state of ongoing health	Assessing the cost of health care.	Measuring outcomes.	Counting the number of illnesses a person has.	A	eExam
<input type="checkbox"/>	MCQ	Assessment is_____step of nursing process	First	Second	Third	Four	A	eExam
<input type="checkbox"/>	MCQ	Objective data might include:_____	nausea	itching sensations	An evaluation of blood pressure	All of the above	C	eExam
<input type="checkbox"/>	MCQ	Subjective data might include:_____	Chest pain	measurement of weight	An evaluation of blood pressure	None of the above	A	eExam
<input type="checkbox"/>	MCQ	A client interview consists of three phases. The nurse recognizes that those phases are:_____	Introduction, assessment, conclusion	Orientation, documentation, database	Introduction, controlling, selection	Orientation, working, termination	D	eExam
<input type="checkbox"/>	MCQ	During the nursing assessment, Information gathered should be communicated to other health care professionals in order to facilitate_____	Collaborative management of clients and for continuity of care	Financial implication of care	Family role and relationship	Evaluation of the client's health status	A	eExam

<input type="checkbox"/>								
<input type="checkbox"/>	MCQ	Which of the following statements is the best definition of health Assessment_____?	Talking to family or friends to get information about an individual	Providing baseline data for care of individuals	Collection of data about a client for the purpose of determining the client's current and ongoing health status	listening carefully to the individual that is being care for	C	eExam
<input type="checkbox"/>	MCQ	The health and physical assessment is a nursing tool to achieve the following aims except: _____	to assess client health needs in partnership with the family	to enable the client to identify the services he/she needs	to planning all of the client's care to be done at one time so long intervals of rest can be scheduled	to gain information for assessing need at a community level	C	eExam
<input type="checkbox"/>	MCQ	The reason for health needs assessment includes the following except:_____	to identify local health issues and needs	to use scarce resources most effectively and equitably	to work with others so they can help to meet health needs	to enables the individual to temporarily cope with illness	D	eExam
<input type="checkbox"/>	MCQ	The result of the assessment can be one of the following:_____	Contribute to a database that identifies the client's current and past health status	Completely prevents Cross-contamination	Focus only on nursing care	Only identify client's needs	A	eExam
<input type="checkbox"/>	MCQ	Which of the following statements is TRUE regarding health assessment_____?	It helps to identify the strengths of the clients in promoting health	Health assessment also helps to identify client's needs, clinical problems or nursing diagnoses	Health assessment evaluate responses of the person to health problems and intervention	All of these statements are true	D	eExam
<input type="checkbox"/>	MCQ	This part of the body is more sensitive to vibrations_____	Pads of fingertips	Back of hand	Palmar surface	Dome of the diaphragm	C	eExam
<input type="checkbox"/>	MCQ	The following different parts of the hand are more sensitive for specific assessments during palpation except:_____	Pads of fingertips	Back of hand	Palm of hand	None of the above	D	eExam
<input type="checkbox"/>	MCQ	John Joseph was scheduled for a physical assessment. When percussing the client's right lower quadrant of the abdomen, the nurse would expect to find which assessment data as a normal sign over his abdomen_____?	Dullness	Resonance	Hyperresonance	Tympany	D	eExam

<input type="checkbox"/>								
<input type="checkbox"/>	MCQ	Physical assessment is being performed to a client by Nurse Tolu. During the abdominal examination, Tolu should perform the four physical examination techniques in which sequence_____?	Auscultation immediately after inspection and then percussion and palpation	Percussion, followed by inspection, auscultation, and palpation	Palpation of tender areas first and then inspection, percussion, and auscultation	Inspection and then palpation, percussion, and auscultation	A	eExam
<input type="checkbox"/>	MCQ	The nurse is preparing to conduct a health history. Which of these statements best describes the purpose of a health history_____?	To identify human response patterns	To provide a data base of subjective information about the patient's past and present medical conditions and treatments	To formulate functional health problem	To cluster information	B	eExam
<input type="checkbox"/>	MCQ	The nursing history provide information to assist the nurse primarily in_____	diagnosing a medical problem	investigating patient symptoms	classifying subjective and objective data	supporting identification of nursing diagnoses	D	eExam
<input type="checkbox"/>	MCQ	The 'gold standard' for assessing the existence of pain is:_____	Grimacing on movement	Client self-report	Increased heart rate and palpitation	Anxiety level	B	eExam
<input type="checkbox"/>	MCQ	After assessing a client in pain, the nurse_____	Document exact description given by the client	Choses from the list of pain descriptors what best reflects the client's description	Ask the family to describe how they view the client pain	Document how he or she best sees the client's pain	A	eExam
<input type="checkbox"/>	MCQ	A student asks the nurse what is the best way to assess a client's pain. Which response by the nurse is best_____?	Numeric pain scale	Behavioral assessment	Objective observation	Client's self-report	D	eExam
<input type="checkbox"/>	MCQ	After completing an initial assessment on a patient, the nurse has charted that his respirations are eupneic and his pulse is 58. This type of data would be:_____	objective	Subjective	Covert	Symptomatic	A	eExam
<input type="checkbox"/>	MCQ	A patient tells the nurse that he is very nervous, that he is nauseated, and that he "feels hot." This type of data would be:_____	Database	Objective	subjective.	Observation	C	eExam
<input type="checkbox"/>	MCQ	What is the step of the nursing process that includes data collection by health history, physical examination, and interview_____?	Implementation	Assessment	Planning	Evaluation	B	eExam

<input type="checkbox"/>								
<input type="checkbox"/>	MCQ	The nurse is performing a physical assessment on a newly admitted patient. An example of objective information obtained during the physical assessment includes the:_____	2 ´ 5 cm scar present on the right lower forearm	A patient complains of pain in his left arm.	A patient worries about her children during her hospital stay	None of the above	A	eExam
<input type="checkbox"/>	MCQ	During which of the following phases of the nurse–patient interview does the nurse gather all the information needed to form the subjective database?	Preparatory phase	Introduction	Working phase	Termination	C	eExam
<input type="checkbox"/>	MCQ	The nurse asks, “I would like to ask you some questions about your health and your usual daily activities so that we can better plan your stay here.” This question is found at the _____ phase of the interview process.	Working phase	Termination	Preparatory phase	opening or introduction	D	eExam
<input type="checkbox"/>	MCQ	During an interview, the nurse states, “You mentioned shortness of breath. Tell me more about that.” Which verbal skill is used with this statement_____?	Open-ended question	Subjective question	Validation question	Close-ended question	A	eExam
<input type="checkbox"/>	MCQ	The nurse is nearing the end of an interview. Which statement is appropriate at this time_____?	“Ask Client to wake up and try to answer her questions.”	“Is there anything else you would like to mention?”	“Ask Client’s partner to come in and answer her questions.”	“Wait until the next day to obtain the answers to her questions”.	B	eExam
<input type="checkbox"/>	MCQ	During the interview portion of data collection, the nurse collects _____ data.	Covert data	Symptomatic data	Objective data	Subjective data	D	eExam
<input type="checkbox"/>	MCQ	Which of the following sources of patient data is usually the primary and best source_____?	Patient	Support people	Patient records	Reports of diagnostic studies	A	eExam
<input type="checkbox"/>	MCQ	Data that can be observed by one person and verified by another person observing the same patient are known as:_____	Subjective data	Covert data	Symptomatic data	Objective data	D	eExam
<input type="checkbox"/>	MCQ	Assessment of the eyes includes the following except:_____	Determine visual acuity	Otosopic assessment	Evaluation of extraocular muscle function	Assessment of the anterior segment structures	B	eExam
<input type="checkbox"/>	MCQ	Which of the following is an example of a closed-ended question_____?	“Where is your discomfort?”	“What were you doing when the pain began?”	“Do you have any medical history?”	What is your medical history?”	C	eExam
<input type="checkbox"/>	MCQ	When inspecting the face for facial symmetry, what would you have the patient do_____?	Have the patient sit in a comfortable position facing you	Grin	Stick out tongue	None of the above	A	eExam

<input type="checkbox"/>								
<input type="checkbox"/>	MCQ	At the beginning of the exam you would perform a general survey. What would you assess at this time_____?	Height	Weight	Pain	Safety	D	eExam
<input type="checkbox"/>	MCQ	As a nursing student you learn that mastering all the components of the comprehensive history provides what?	Confidence	Professionalism	Proficiency	Insight	C	eExam
<input type="checkbox"/>	MCQ	You are the office nurse admitting a new patient to the clinic. You have gained your patient's trust, gathered a detailed history, and finished your portion of the physical examination. What is your next step in caring for this patient_____?	Formulate nursing diagnoses	Order the appropriate laboratory tests	Identify the patient's problems	Notify the physician of your findings	C	eExam
<input type="checkbox"/>	MCQ	When documenting clinical data, what might you write in the physical assessment_____?	Thyroid isthmus barely palpable, lobes not felt	Apical impulse indistinct and tapping	Thorax symmetric without equal excursion	Extraocular movements full and equal on exam	A	eExam
<input type="checkbox"/>	MCQ	Using both verbal and nonverbal clues given by the patient, what is the nurse constantly doing_____?	Diagnosing	Intervening where necessary	Formulating a discharge plan	Assessing	D	eExam
<input type="checkbox"/>	MCQ	The student nurse learns that examining the skin can do what_____?	Reveal over hydration	Allow early identification of noncancerous lesions	Rule out physical abuse	Allow early identification of risk factors for dehydration	A	eExam
<input type="checkbox"/>	MCQ	Your lab instructor explains that physical examination relies on what classic nursing technique_____?	Assessment	Percussion	Organization	Communication	B	eExam
<input type="checkbox"/>	MCQ	How does a nurse facilitate the nursing health assessment_____?	Maintaining privacy	Asking the appropriate questions	Formulating a nursing diagnosis	Creating a nursing care plan	B	eExam
<input type="checkbox"/>	MCQ	What is the foundation of nursing practice_____?	Planning	Assessment	Evaluation	Intervention	B	eExam
<input type="checkbox"/>	MCQ	What are nurses able to detect through the health assessment_____?	Areas that need continuous care	Areas that need in-hospital care	Areas that need referral to a specialist	Areas in need of health adjustments	D	eExam
<input type="checkbox"/>	MCQ	When performing a head-to-toe assessment, we normally begin with a neurologic assessment . What is the next_____?	Hair, head and neck including eyes, ear, nose and mouth	Chest, back, arm, abdomen	Perineal area, legs and feet	Eyes and ears alone	A	eExam
<input type="checkbox"/>	MCQ	Before the beginning of a physical examination, to make the patient more comfortable, what should be done first_____?	Give patient a warm blanket	Ask if patient wants a glass of water	Offer patient to empty his/her bladder	Provide a small meal	C	eExam

<input type="checkbox"/>								
<input type="checkbox"/>	MCQ	The difference between a "head to toe" assessment and a "focused assessment" _____	Head to toe is completed when the patient is admitted; focused concentrates on a particular part of a body	Head to toe is systemic while focused concentrates on regional parts	Head to toe is done on every shift while focused is done when the person is admitted	Both RNs and LPNs should do head to toe assessments as well as focused assessments	B	eExam
<input type="checkbox"/>	MCQ	Tywin has come to the nursing clinic for a comprehensive health assessment. Which statement would be the best way to end the history interview _____?	What brought you to the clinic today	Would you describe your overall health as good	Do you understand what is happening	Is there anything else you would like to tell me	D	eExam
<input type="checkbox"/>	MCQ	John Joseph was scheduled for a physical assessment. When percussing the client's chest, the nurse would expect to find which assessment data as a normal sign over his lungs _____	Dullness	Resonance	Hyperresonance	Tympany	B	eExam
<input type="checkbox"/>	MCQ	The nurse is doing a pain assessment on the client who has chronic back pain. Which assessment is of greatest value _____?	Observe the client for grimaces, flinching, and other signs of pain	Monitor the client's blood pressure.	Ask the client to rate his pain on a scale of 1 to 10	Monitor the client's pulse and respirations	C	eExam
<input type="checkbox"/>	MCQ	The nurse is assessing the client's abdomen. Which should the nurse do first _____?	Auscultate	Percuss	Inspect	Palpate	C	eExam

Showing 1 to 120 of 120 entries

[Previous](#)
[1](#)
[Next](#)