#### MULTIPLE CHOICE

- The nurse admits a patient to the critical care unit following a motorcycle crash. Assessment
  findings by the nurse include blood pressure 100/50 mm Hg, heart rate 58 beats/min,
  respiratory rate 30 breaths/min, and temperature of 100.5°. The patient is lethargic, responds
  to voice but falls asleep readily when not stimulated. Which nursing action is most important
  to include in this patient's plan of care?
  - a. Frequent neurological assessments
  - Side to side position changes
  - c. Range of motion to extremities
  - d. Frequent oropharyngeal suctioning

ANS: A

Nurses complete neurological assessments based on ordered frequency and the severity of the patient's condition. The newly admitted patient has an altered neurological status so frequent neurological assessments are most important to include in the patient's plan of care. Side to side position changes, range of motion exercises, and frequent oral suctioning are nursing actions that may need to be a part of the patient's plan of care but in the setting of increased intracranial pressure should not be regularly performed unless indicated.

- DIF: Cognitive Level: Application REF: p. 365 | Nursing Care Plan
  OBJ: Describe the nursing and medical management of patients with increased intracranial pressure.
  TOP: Nursing Process Step: Planning
  MSC: NCLEX: Physiological Integrity: Basic Care and Comfort
- A patient with a head injury has an intracranial pressure (ICP) of 18 mm Hg. Her blood pressure is 144/90 mm Hg, and her mean arterial pressure (MAP) is 108 mm Hg. What is the cerebral perfusion pressure (CPP)?
  - a. 54 mm Hg
  - 5. 72 mm Hg
     c. 90 mm Hg
  - d. 126 mm Hg

1. 126 mm Hg

ANS: C CPP = MAP - ICP. In this case, CPP = 108 mm Hg - 18 mm Hg = 90 mm Hg. All other calculated responses are incorrect.

- DIF: Cognitive Level: Comprehension REF: pp. 360-361
  OBJ: Complete an assessment on a critically ill patient with nervous system injury.
  TOP: Nursing Process Step: Assessment
  MSC: NCLEX: Physiological Integrity: Physiological Adaptation
- 3. While caring for a patient with a traumatic brain injury, the nurse assesses an ICP of 20 mm Hg and a CPP of 85 mm Hg. What is the best interpretation by the nurse?
  - Both pressures are high.
  - Both pressures are low.
  - ICP is high; CPP is normal.

# **Nervous System Alterations Test Bank**

### **A. Christine Harris**

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Pathophysiology Barbara L. Bullock, Pearl Philbrook Rosendahl. 1988 Instructor's Manual with Test Bank to Accompany Child Development A. Christine Harris, 1985 Sensory-Motor Aspects of Nervous Systems Disorders: Insights From Biosensors and Smart Technology in the Dynamic Assessment of Disorders, Their Progression, and Treatment Outcomes Elizabeth B. Torres, Jonathan T. Delafield-Butt, Caroline Whyatt, 2020-07-28 Biomedical Index to PHS-supported Priorities in Critical Care Nursing - E-Book Linda D. Urden, Kathleen M. Stacy, Mary E. Lough, 2019-01-09 NEW Updated evidence based content reflects the latest meta analyses systematic reviews evidence based guidelines and national and international protocols NEW Enhanced multimedia resources include 15 links to sample skills from Elsevier Clinical Skills and 25 3D animations NEW and UNIQUE Focus on interprofessional patient problems helps you learn to speak a consistent interprofessional language of patient problems and learn to work successfully as a team NEW and UNIQUE Integration of IPEC Core Competencies for Interprofessional Collaborative Practice incorporates the four IPEC Competencies Values Ethics Teams and Teamwork Roles Responsibilities and Interprofessional Communication into textbook content and case studies NEW Thoroughly updated case studies reflect the current flavor of high acuity progressive and critical care settings and now include questions specifically related to QSEN competencies NEW Additional content on post ICU outcomes has been added to chapters as they relate to specific disorders NEW Updated information on sepsis guidelines has been added to Chapter 26 NEW More concise boxes with new table row shading enhance the book s focus on need to know information and improve usability Regents' Proceedings University of Michigan. Board of Regents, 1972 Research Awards Index ,1988 **Cumulated Index Medicus**, 1995 Auto Motor Journal Stanley Spooner, 1905 Priorities in Critical Care Nursing Linda D. Urden, Kathleen M. Stacy, Mary E. Lough, 2015-02-25 Ensure you are up to date on all the common and urgent issues in the critical care unit with Priorities in Critical Care Nursing 7th Edition With its succinct coverage of all core critical care nursing topics this evidence based text is the perfect resource for both practicing nurses and nursing students alike Using the latest most authoritative research this book will help you identify priorities to accurately and effectively manage patient care Content spans the areas of medication patient safety patient education nursing diagnosis and collaborative management and much more to equip you for success in all aspects of critical care nursing This new edition also features new case studies new QSEN focused call out boxes throughout the text a complete digital glossary and revised chapter summaries Evidence based approach offers the most accurate and timely patient care recommendations based on the latest and most authoritative research meta analyses and systematic reviews available UNIQUE Nursing Diagnosis Priorities boxes list the most urgent potential nursing diagnoses with a page reference to the corresponding Nursing Management Plan Nursing Management Plans provide a complete care plan for every Priority Diagnosis that includes the diagnosis definition defining characteristics outcome criteria nursing interventions and rationales Case studies with critical

thinking questions test your understanding of key concepts and their practical applications Concept maps help students understand common critical health conditions including acute coronary syndrome acute renal failure ischemic stroke and shock Collaborative Management boxes guide you through the management of a wide variety of disorders Patient Education boxes list the concepts that must be taught to the patient and the family before discharge from the ICU Priority Medication boxes offer a foundation in the pharmacology used most in critical care NEW QSEN Evidence Based Practice boxes use the PICOT framework to cover a timely topic and the research that underlies current patient care NEW TEACH for Nurses manual includes unique case studies outlines instructor resources student resources answer keys and more NEW PowerPoint slides with unfolding case studies have been updated to include interactive questions and sample handoff information in the ISBARR format for appropriate chapters NEW Cultural Competency boxes provide information on basic cultural topics including what cues to watch for and how to better provide culturally competent care NEW QSEN Teamwork and Collaboration boxes offer concise quidelines for effective handoffs assessments and communications between nurses and other hospital staff NEW QSEN Patient Safety Alert boxes highlight important guidelines and tips to ensure patient safety NEW QSEN Internet Resources boxes identify key organizations and websites for both general critical care practice and for each specific body system NEW Key points at the end of each chapter offer a quick study tool for students NEW More detailed objectives now include every disorder covered in the chapter NEW Digital glossary on the Evolve companion site help to increase students critical care nursing vocabulary Medical Times ,1843 **Neurological Research** National Institute of Neurological Diseases and Stroke, 1969 Scientific and Technical Aerospace Reports ,1983 National <u>Library of Medicine Current Catalog</u> National Library of Medicine (U.S.), VII Latin American Congress on Biomedical Engineering CLAIB 2016, Bucaramanga, Santander, Colombia, October 26th -28th, 2016 Isnardo Torres, John Bustamante, Daniel A. Sierra, 2017-04-05 This volume presents the proceedings of the CLAIB 2016 held in Bucaramanga Santander Colombia 26 27 28 October 2016 The proceedings presented by the Regional Council of Biomedical Engineering for Latin America CORAL offer research findings experiences and activities between institutions and universities to develop Bioengineering Biomedical Engineering and related sciences The conferences of the American Congress of Biomedical Engineering are sponsored by the International Federation for Medical and Biological Engineering IFMBE Society for Engineering in Biology and Medicine EMBS and the Pan American Health Organization PAHO among other organizations and international agencies to bring together scientists academics and biomedical engineers in Latin America and other continents in an environment conducive to exchange and professional growth Bibliography of Agriculture with Subject Index ,1985

*Cure Unknown* Pamela Weintraub,2008-06-10 A groundbreaking and controversial narrative investigation into the science history medical politics and patient experience of Lyme disease told by a science journalist whose entire family contracted the disease Pamela Weintraub paints a nuanced picture of the intense controversy and crippling uncertainty

surrounding Lyme disease and sheds light on one of the angriest medical disputes raging today She also reveals her personal odyssey through the land of Lyme after she her husband and their two sons became seriously ill with the disease beginning in the 1990s From the microbe causing the infection and the definition of the disease to the length and type of treatment and the kind of practitioner needed Lyme is a hotbed of contention With a CDC estimated 200 000 plus new cases of Lyme disease a year it has surpassed both AIDS and TB as the fastest spreading infectious disease in the U S Yet alarmingly in many cases because the disease often eludes blood tests and not all patients exhibit the classic bulls eye rash and swollen joints doctors are woefully unable or unwilling to diagnose Lyme When that happens once treatable infections become chronic inexorably disseminating to cause disabling conditions that may never be cured Weintraub reveals why the Lyme epidemic has been allowed to explode why patients are dismissed and what can be done to raise awareness in the medical community and find a cure The most comprehensive book ever written about the past present and future of Lyme disease this exposes the ticking clock of a raging epidemic Neurological Research Supported by the National Institute of Neurological Diseases and Stroke National Institute of Neurological Diseases and Stroke,1969 **Neurological Research Supported** by the National Institute of Neurological Diseases and Stroke National Institutes of Health (U.S.), 1969 British Medical Journal, 1886

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