

"I could not arrive any sooner. What can I do for you?"

This response is nontherapeutic because the nurse is responding defensively.

"We had an emergency on the unit and that was a priority, but now I'm here."

This response is nontherapeutic because the nurse is responding defensively.

A home health nurse is completing an admission assessment of an older adult client who has their caregiver present. Which of the following findings should the nurse identify as potential indications of elder abuse?

The caregiver is the client's financial power of attorney.

The client is in a wheelchair with the wheels locked.

The client reports receiving a full bath twice each week.

The caregiver insists on remaining in the room. - Correct Answer:

The caregiver insists on remaining in the room.

A caregiver who refuses to leave the room during an admission assessment can be an indication of potential mistreatment of the client who is receiving care. The nurse should evaluate the client for additional signs of potential mistreatment throughout the admission assessment.

Incorrect Answer:

The caregiver is the client's financial power of attorney.

Having a caregiver who is the client's financial power of attorney allows the caregiver to perform necessary financial transactions on the client's behalf. This is not an indication of elder abuse.

The client is in a wheelchair with the wheels locked.

If the client uses a wheelchair, it is important to lock the wheels when the client is stationary to keep the client safe. Locking the wheels of a wheelchair is not an indication of elder abuse.

The client reports receiving a full bath twice each week.

Neglect is a form of abuse or mistreatment that is characterized by omission of necessary care.

Although hygiene is an important part of care for all clients, a full bath is not necessary every day for older adults due to the adverse effects it can have on fragile skin. Therefore, a full bath twice each week is sufficient for effective care and is not an indication of neglect or elder abuse.

A nurse in a clinic is caring for a middle adult client who states, "The doctor says that, since I am at an average risk for colon cancer, I should have a routine screening. What does that involve?" Which of the following responses should the nurse make?

"I'll get a blood sample from you and send it for a screening test."

"Beginning at age 60, you should have a colonoscopy."

"You should have a fecal occult blood test every year."

"The recommendation is to have a sigmoidoscopy every 10 years." - Correct Answer:

"You should have a fecal occult blood test every year."

Colorectal cancer screening for clients who are at average risk begins at age 45. One option for screening is a fecal occult blood test annually.

Rn Fundamentals Practice 2010 B Answers

Chris Brooker, Anne Waugh



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