

## Chapter 01: Overview of Gerontologic Nursing

### Meiner: Gerontologic Nursing, 6th Edition

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#### MULTIPLE CHOICE

1. In 2010, the revised *Standards and Scope of Gerontological Nursing Practice* was published. The nurse would use these standards to
  - a. promote the practice of gerontologic nursing within the acute care setting.
  - b. define the concepts and dimensions of gerontologic nursing practice.
  - c. elevate the practice of gerontologic nursing.
  - d. incorporate the concepts of health promotion, health maintenance, disease prevention, and self-care

ANS: D

The current publishing of the *Standards and Scope of Gerontological Nursing Practice* in 2010 incorporates the input of gerontologic nurses from across the United States and includes comprehensive concepts and dimensions important to those practicing gerontologic nursing. It was not intended to promote gerontologic nursing practice within acute care settings, define concepts or dimensions of gerontologic nursing practice, or elevate the practice of gerontologic nursing.

DIF: Remembering

OBJ: 1-1

TOP: N/A

MSC: Safe and Effective Care Environment

2. When attempting to minimize the effect of ageism on the practice of nursing older adults, a nurse needs to first
  - a. recognize that nurses must act as advocates for aging patients.
  - b. accept that this population represents a substantial portion of those requiring nursing care.
  - c. self-reflect and formulate one's personal view of aging and the older patient.
  - d. recognize ageism as a form of bigotry shared by many Americans.

ANS: C

Ageism is an ever-increasing prejudicial view of the effects of the aging process and of the older population as a whole. With nurses being members of a society holding such views, it is critical that the individual nurse self-reflects on personal feelings and determines whether such feelings will affect the nursing care that he or she provides to the aging patient. Acting as an advocate is an important nursing role in all settings. Simply accepting a fact does not help end ageism, nor does recognizing ageism as a form of bigotry.

DIF: Applying

OBJ: 1-6

TOP: Integrated Process:

Teaching-Learning

MSC: Safe and Effective Care Environment

3. The nurse planning care for an older adult who has recently been diagnosed with rheumatoid arthritis views the priority criterion for continued independence to be the patient's
  - a. age.

- b. financial status.
- c. gender.
- d. functional status.

ANS: D

Maintaining the functional status of older adults (especially those with chronic health conditions) may avert the onset of physical frailty and cognitive impairment, two conditions that increase the likelihood of institutionalization.

DIF: Remembering

OBJ: 1-4

TOP: Nursing Process: Planning

MSC: Physiologic Integrity

4. A nurse working with the older adult population is most likely to assess a need for a financial social service's referral for which person?
- a. White male
  - b. Black female
  - c. Hispanic male
  - d. Asian American female

ANS: B

The poverty rate among older women is substantially higher than that seen among men. The poverty rates for people of color is higher than that of whites.

DIF: Remembering

OBJ: 1-4

TOP: Nursing Process: Assessment  
Environment

MSC: Safe and Effective Care

5. A nurse is preparing to complete a health assessment and history on an older patient. Which statement reflects an understanding of the general health status of this population?
- a. "I'll need to document the medications the patient is currently prescribed."
  - b. "I would like to understand how supportive the patient's family members are."
  - c. "Most older patients are being treated for a variety of chronic health care issues."
  - d. "It will be interesting to see whether this patient sees herself as being healthy."

ANS: D

It is a misconception that old age is synonymous with disease and illness. In fact, older adults already tend to view their personal health positively despite the presence of chronic illness, disease, and impairment. The nurse should always determine the patient's sense of wellness and independence when conducting a health and history assessment. An assessment of medication use and family support is important for any patient. Many older adults do have chronic health conditions, but their perception is more important than a single number.

DIF: Applying

OBJ: 1-4

TOP: Nursing Process: Assessment

MSC: Health Promotion and Maintenance

6. The nurse is caring for an older adult who has been admitted to an acute care hospital for treatment of a fractured femur. The family expresses concern about their father's pending transfer to a subacute care facility. What response by the nurse is best?

- a. "Acute care facilities lack the long-term physical therapy your dad requires."
- b. "Your dad will be much happier in a more serene, private environment."
- c. "The subacute facility will focus on helping your dad to maintain his independence."
- d. "Insurance, including Medicare, will cover only a limited amount of time here."

ANS: C

The transfer of the patient to a subacute facility is based on the need to maintain the patient's level of function and independence, a task the acute care facility is not prepared to address once the patient is physiologically stable. The acute care facility may or may not be able to provide long-term therapy. The patient may or may not be happier in the new setting; the nurse should not make this judgment. It is true that insurance only pays for a limited amount of time in an acute care facility, but this is not the best reason for the patient to transfer.

DIF: Applying OBJ: 1-4

TOP: Integrated Process: Communication and Documentation

MSC: Health Promotion and Maintenance

7. To best assure both the quality of care and the safety of the older adult patient who requires in-home unlicensed assistive personal (UAP) assistance, which action by the gerontologic nurse is best?
  - a. Evaluates the competency of the UAP staff.
  - b. Assumes the roles of case manager and patient advocate.
  - c. Arranges for the needed UAP provided services.
  - d. Assesses the patient for functional limitations.

ANS: A

As more care traditionally provided by professional nurses is being transferred to UAP, the nurse must assume more responsibility for educating, training, and evaluating the competency of UAP staff to provide safe, effective care for the older adult patient.

DIF: Applying OBJ: 1-5

TOP: Integrated Process: Communication and Documentation

MSC: Safe and Effective Care Environment

8. The nurse working with older adults understands what information about certification in gerontologic nursing?
  - a. It is mandatory for those in long-term care settings.
  - b. It is voluntary and shows clinical expertise in an area.
  - c. It allows nurses to be paid by third-party payers.
  - d. It allows nurses to advance their careers in a job.

ANS: B

Certification is voluntary and shows that a nurse has additional knowledge and expertise in a certain area of practice. It is not mandatory in specific care settings. It does not allow for third-party reimbursement. It may be part of a career ladder program, but that is not true of all work settings.

DIF: Remembering

OBJ: 1-2





15. A nurse wants to plan a community event at a retirement center. What topic would most likely be best received?
- Heart healthy living
  - Financial planning
  - Avoiding scams
  - Ethnic cooking classes

ANS: A

Older adults are demanding more programs and services aimed at health maintenance and promotion and disease and disability prevention. Based on this information, the heart healthy living presentation would be best received.

DIF: Applying      OBJ: 1-3      TOP: Integrated Process:  
Teaching-Learning  
MSC: Health Promotion and Maintenance

## MULTIPLE RESPONSE

1. The clinic nurse caring for an older diabetic patient with a sixth-grade education anticipates that the patient may experience difficulty with which of the following? (*Select all that apply.*)
- Recognizing the importance of keeping clinic appointments.
  - Following a low-carbohydrate diet.
  - Paying for insulin and syringes.
  - Deciding on a primary health care provider.
  - Naming a health care surrogate.

ANS: A, B, C

Even though the educational level of the older population has steadily increased, lower educational level and decreased literacy affects the older adults' ability to live a healthy life, understand the importance of medical follow-up, and manage acute illness and chronic conditions. These patients may also have fewer financial resources to devote to health care issues. Choosing a primary provider and naming health care surrogates would not necessarily be affected.

DIF: Analyzing      OBJ: 1-4      TOP: Nursing Process: Assessment  
MSC: Safe and Effective Care Environment

2. The nurse studying the history of gerontologic nursing learns which information about the specialty? (*Select all that apply.*)
- The number of older Americans is diminishing.
  - The gerontologic nursing conference group was established in 1962.
  - The gerontologic clinical nurse specialist certification was offered in 1989.
  - There were no writings about the care of older persons until World War II.
  - The first *Standards of Practice for Gerontologic Nursing* was written in 1969.

ANS: B, C, E



Nearly 75% of all deaths stem from the following 10 causes: heart disease, cancer (lung), chronic respiratory disease (COPD), accidents, stroke, Alzheimer's disease, diabetes, influenza/pneumonia, kidney disease, and suicide.

DIF: Remembering

OBJ: 1-4

TOP: Nursing Process: Assessment

MSC: Health Promotion and Maintenance