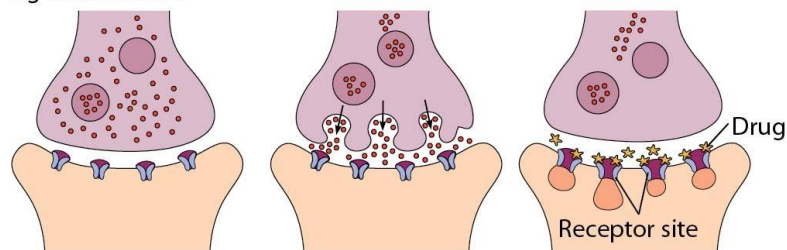


Nursing: A Concept-Based Approach to Learning, 2e (Pearson)
Module 22 Addiction

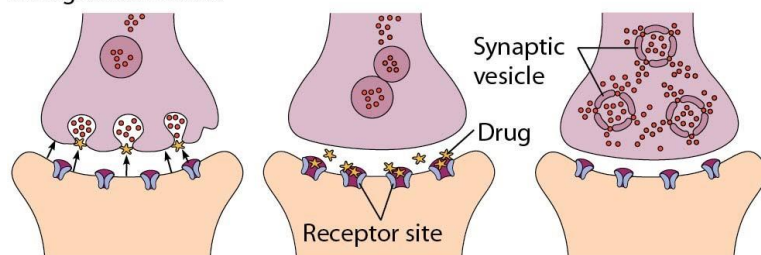
The Concept of Addiction

1) While practicing at an outpatient addiction clinic, the nurse is summarizing a diagram in the orientation handbook for a new nurse who requires orientation. Which statement made by the new nurse most closely aligns with the meaning of this diagram?

Agonistic effects



Antagonistic effects



- A) "Addiction involves an alteration in the amount of available neurotransmitters."
- B) "Actions at the neurotransmitter level affecting addiction are not genetic."
- C) "High self-esteem as a basis for pleasure seeking lowers neurotransmitter levels."
- D) "An addictive personality is identified by differences in the processing of neurotransmitters."

Answer: A

Explanation: A) Substances of addiction alter the amount of available neurotransmitters, including dopamine, serotonin, and norepinephrine. Several genes have been identified that seem to influence the risk for alcohol dependence. Low self-esteem increases the risk for addiction. No addictive personality type has been identified.

B) Substances of addiction alter the amount of available neurotransmitters, including dopamine, serotonin, and norepinephrine. Several genes have been identified that seem to influence the risk for alcohol dependence. Low self-esteem increases the risk for addiction. No addictive personality type has been identified.

C) Substances of addiction alter the amount of available neurotransmitters, including dopamine, serotonin, and norepinephrine. Several genes have been identified that seem to influence the risk for alcohol dependence. Low self-esteem increases the risk for addiction. No addictive personality type has been identified.

D) Substances of addiction alter the amount of available neurotransmitters, including dopamine, serotonin, and norepinephrine. Several genes have been identified that seem to influence the risk for alcohol dependence. Low self-esteem increases the risk for addiction. No addictive personality type has been identified.

Page Ref: 1520

Cognitive Level: Analyzing

Client Need: Physiological Integrity

Client Need Sub: Physiological Adaptation

Nursing Process: Evaluation

Learning Outcome: 1. Summarize the physiological and psychological processes that contribute to addiction.

QSEN Competencies: III.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.1.1.Explain the elements of addiction across the life span.

2) The nurse is conducting a class in the community regarding alcohol use to a group of college seniors. During the class a participant admits to frequently using alcohol. Which is the priority action of the nurse?

A) Initiate a community assessment of the campus.

B) Contact the campus nurse and refer the student.

C) Notify campus security to watch for driving under the influence.

D) Complete a crisis assessment.

Answer: D

Explanation: A) In a trusting relationship, the nurse will complete a crisis assessment to determine the appropriate action. Contacting the campus nurse is not advised without the student's permission. There is no evidence that the student is driving under the influence.

B) In a trusting relationship, the nurse will complete a crisis assessment to determine the appropriate action. Contacting the campus nurse is not advised without the student's permission. There is no evidence that the student is driving under the influence.

C) In a trusting relationship, the nurse will complete a crisis assessment to determine the appropriate action. Contacting the campus nurse is not advised without the student's permission. There is no evidence that the student is driving under the influence.

D) In a trusting relationship, the nurse will complete a crisis assessment to determine the appropriate action. Contacting the campus nurse is not advised without the student's permission. There is no evidence that the student is driving under the influence.

Page Ref: 1527

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Implementation

Learning Outcome: 4. Differentiate assessments of addictions across the life span.

QSEN Competencies: 1.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.1.3 Differentiate focused assessment procedures used to examine various addictions.

3) A nurse educator is teaching a group of students about the comprehensive theory of addiction by George Engel. Which statements indicate that the students understand the theory? Select all that apply.

- A) "Addiction occurs due to a lack of emotional attachment."
- B) "There is a biological factor involved in the development of addiction."
- C) "There are social factors that contribute to the development of addiction."
- D) "There is a moral factor involved in the development of addiction."
- E) "There is a psychological factor involved in the development of addiction."

Answer: B, C, E

Explanation: A) The biopsychosocial explanation of addiction is supported by current research and takes a more holistic view of the problem. The biopsychosocial explanation links biological, psychological, and social factors as contributing to the development of addiction. The view of addiction as a moral disease is nontherapeutic. Viewing addiction as only a behavioral or emotional problem oversimplifies a complex issue.

B) The biopsychosocial explanation of addiction is supported by current research and takes a more holistic view of the problem. The biopsychosocial explanation links biological, psychological, and social factors as contributing to the development of addiction. The view of addiction as a moral disease is nontherapeutic. Viewing addiction as only a behavioral or emotional problem oversimplifies a complex issue.

C) The biopsychosocial explanation of addiction is supported by current research and takes a more holistic view of the problem. The biopsychosocial explanation links biological, psychological, and social factors as contributing to the development of addiction. The view of addiction as a moral disease is nontherapeutic. Viewing addiction as only a behavioral or emotional problem oversimplifies a complex issue.

D) The biopsychosocial explanation of addiction is supported by current research and takes a more holistic view of the problem. The biopsychosocial explanation links biological, psychological, and social factors as contributing to the development of addiction. The view of addiction as a moral disease is nontherapeutic. Viewing addiction as only a behavioral or emotional problem oversimplifies a complex issue.

E) The biopsychosocial explanation of addiction is supported by current research and takes a more holistic view of the problem. The biopsychosocial explanation links biological, psychological, and social factors as contributing to the development of addiction. The view of addiction as a moral disease is nontherapeutic. Viewing addiction as only a behavioral or emotional problem oversimplifies a complex issue.

Page Ref: 1520

Cognitive Level: Analyzing

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Evaluation

Learning Outcome: 1. Summarize the physiological and psychological processes that contribute to addiction.

QSEN Competencies: III.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.1.1.Explain the elements of addiction across the life span.

4) During visitation on the unit, the nurse is observing the family dynamics of an adolescent client who has an addiction problem and recognizes that the family is experiencing behaviors consistent with codependence. Based on this data, which manifestation does the nurse anticipate from the client's family?

- A) Frustration intolerance
- B) Enabling
- C) Argumentative behaviors
- D) Impatience

Answer: B

Explanation: A) Codependents often engage in enabling behavior, which is any action an individual takes that consciously or unconsciously facilitates substance dependence. Although impatience, frustration intolerance, and argumentative behaviors may be present in this family, they are generally not related to the cycle of codependence and addiction.

B) Codependents often engage in enabling behavior, which is any action an individual takes that consciously or unconsciously facilitates substance dependence. Although impatience, frustration intolerance, and argumentative behaviors may be present in this family, they are generally not related to the cycle of codependence and addiction.

C) Codependents often engage in enabling behavior, which is any action an individual takes that consciously or unconsciously facilitates substance dependence. Although impatience, frustration intolerance, and argumentative behaviors may be present in this family, they are generally not related to the cycle of codependence and addiction.

D) Codependents often engage in enabling behavior, which is any action an individual takes that consciously or unconsciously facilitates substance dependence. Although impatience, frustration intolerance, and argumentative behaviors may be present in this family, they are generally not related to the cycle of codependence and addiction.

Page Ref: 1526

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Assessment

Learning Outcome: 2. Examine the relationship between addiction and other concepts/systems.

QSEN Competencies: III.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.1.2 Examine common alterations across the life span, including effects prevention methods.

5) The nurse is conducting a crisis assessment for a client who admits to cocaine use. Which questions are appropriate for the nurse to ask the client during this process?
Select all that apply.

- A) "Are recreational centers available?"
- B) "What is the most significant stress/problem occurring in your life right now?"
- C) "How long has this been a problem?"
- D) "What are the living conditions of the neighborhood?"
- E) "What other stresses do you have in your life?"

Answer: B, C, E

Explanation: A) When conducting a crisis assessment for a client who admits to using an illegal substance that is associated with addiction, the nurse will ask the client about the most significant stress occurring in life right now; how long the problems has been occurring; and the other stresses in the client's life. Asking about recreational centers and the living conditions of the neighborhood are more appropriate when conducting a community crisis assessment.

B) When conducting a crisis assessment for a client who admits to using an illegal substance that is associated with addiction, the nurse will ask the client about the most significant stress occurring in life right now; how long the problems has been occurring; and the other stresses in the client's life. Asking about recreational centers and the living conditions of the neighborhood are more appropriate when conducting a community crisis assessment.

C) When conducting a crisis assessment for a client who admits to using an illegal substance that is associated with addiction, the nurse will ask the client about the most significant stress occurring in life right now; how long the problems has been occurring; and the other stresses in the client's life. Asking about recreational centers and the living conditions of the neighborhood are more appropriate when conducting a community crisis assessment.

D) When conducting a crisis assessment for a client who admits to using an illegal substance that is associated with addiction, the nurse will ask the client about the most significant stress occurring in life right now; how long the problems has been occurring; and the other stresses in the client's life. Asking about recreational centers and the living conditions of the neighborhood are more appropriate when conducting a community crisis assessment.

E) When conducting a crisis assessment for a client who admits to using an illegal substance that is associated with addiction, the nurse will ask the client about the most significant stress occurring in life right now; how long the problems has been occurring; and the other stresses in the client's life. Asking about recreational centers and the living conditions of the neighborhood are more appropriate when conducting a community crisis assessment.

Page Ref: 1527

Cognitive Level: Understanding

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Assessment

Learning Outcome: 4. Differentiate assessment of addictions across the lifespan.

QSEN Competencies: 1.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education

- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.1.3 Differentiate focused assessment procedures used to examine various addictions.

6) A client is admitted to the emergency department with signs of drug use. The client reports having ingested Percocet and is experiencing respiratory depression. Based on this data, which prescription does the nurse anticipate for this client?

- A) Diazepam
- B) Haldol
- C) Vitamin B12
- D) Naloxone

Answer: D

Explanation: A) Percocet is a type of opiate. Naloxone is used to treat an overdose of opiates. Diazepam can be prescribed to manage signs of an overdose. Haldol can be administered to manage an overdose of phencyclidine piperidine (PCP). Vitamin B12 is used to manage the neurologic symptoms that might accompany a nitrate overdose.

B) Percocet is a type of opiate. Naloxone is used to treat an overdose of opiates. Diazepam can be prescribed to manage signs of an overdose. Haldol can be administered to manage an overdose of phencyclidine piperidine (PCP). Vitamin B12 is used to manage the neurologic symptoms that might accompany a nitrate overdose.

C) Percocet is a type of opiate. Naloxone is used to treat an overdose of opiates. Diazepam can be prescribed to manage signs of an overdose. Haldol can be administered to manage an overdose of phencyclidine piperidine (PCP). Vitamin B12 is used to manage the neurologic symptoms that might accompany a nitrate overdose.

D) Percocet is a type of opiate. Naloxone is used to treat an overdose of opiates. Diazepam can be prescribed to manage signs of an overdose. Haldol can be administered to manage an overdose of phencyclidine piperidine (PCP). Vitamin B12 is used to manage the neurologic symptoms that might accompany a nitrate overdose.

Page Ref: 1533

Cognitive Level: Analyzing

Client Need: Physiological Integrity

Client Need Sub: Pharmacological and Parenteral Therapies

Nursing Process: Planning

Learning Outcome: 6. Explain prevention and management of addictions.

QSEN Competencies: 1.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.1.2 Examine common alterations across the life span, including effects prevention methods.

7) The nurse is planning to implement addiction treatment groups at the inner city clinic. Which knowledge regarding addictions and its related therapies will facilitate implementation of the groups?

A) Relapse is a common feature of substance abuse.

B) Hereditary, as well as complex environmental influences, predisposes one to substance dependence.

C) Clients with a substance dependence cannot be held accountable for their actions.

D) Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) are accepted treatment approaches.

Answer: B

Explanation: A) Knowing the psychobiology aspects of heritability and predisposition to substance dependence, as well as the complex environmental influences, helps diminish stigma. Acknowledging relapse, treatment approaches, and behavioral intentions does not address the psychobiology of the illness.

B) Knowing the psychobiology aspects of heritability and predisposition to substance dependence, as well as the complex environmental influences, helps diminish stigma. Acknowledging relapse, treatment approaches, and behavioral intentions does not address the psychobiology of the illness.

C) Knowing the psychobiology aspects of heritability and predisposition to substance dependence, as well as the complex environmental influences, helps diminish stigma. Acknowledging relapse, treatment approaches, and behavioral intentions does not address the psychobiology of the illness.

D) Knowing the psychobiology aspects of heritability and predisposition to substance dependence, as well as the complex environmental influences, helps diminish stigma. Acknowledging relapse, treatment approaches, and behavioral intentions does not address the psychobiology of the illness.

Page Ref: 1521

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Implementation

Learning Outcome: 3. Identify commonly occurring addictions and their related therapies.

QSEN Competencies: III.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.1.2 Examine common alterations across the life span, including effects prevention methods.

8) The employee health nurse is providing care to an employee who was injured on the job. The client has a history of drug addiction and is currently enrolled in a 12-step recovery program. In order to determine whether the employee was impaired at the time of the accident, which diagnostic tool will the nurse use?

- A) Liver enzymes
- B) Stool guaiac
- C) Urine toxicology testing
- D) Hair testing

Answer: C

Explanation: A) Urine toxicology testing will determine whether the employee had drugs in his system during the shift in which the injury occurred. Hair testing can detect substance use for up to 90 days and is not an accurate tool to determine whether the employee was impaired at the time of the injury. Liver enzymes detect liver damage but are not specific to damage from substance abuse. A stool guaiac tests for blood.

B) Urine toxicology testing will determine whether the employee had drugs in his system during the shift in which the injury occurred. Hair testing can detect substance use for up to 90 days and is not an accurate tool to determine whether the employee was impaired at the time of the injury. Liver enzymes detect liver damage but are not specific to damage from substance abuse. A stool guaiac tests for blood.

C) Urine toxicology testing will determine whether the employee had drugs in his system during the shift in which the injury occurred. Hair testing can detect substance use for up to 90 days and is not an accurate tool to determine whether the employee was impaired at the time of the injury. Liver enzymes detect liver damage but are not specific to damage from substance abuse. A stool guaiac tests for blood.

D) Urine toxicology testing will determine whether the employee had drugs in his system during the shift in which the injury occurred. Hair testing can detect substance use for up to 90 days and is not an accurate tool to determine whether the employee was impaired at the time of the injury. Liver enzymes detect liver damage but are not specific to damage from substance abuse. A stool guaiac tests for blood.

Page Ref: 1528

Cognitive Level: Understanding

Client Need: Physiological Integrity

Client Need Sub: Reduction of Risk Potential

Nursing Process: Implementation

Learning Outcome: 5. Describe diagnostic and laboratory tests to determine an individual's addiction status.

QSEN Competencies: III.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.1.3 Differentiate focused assessment procedures used to examine various addictions.

9) The nurse is providing care for a client of Asian descent who admits to an alcohol addiction. The client admits to being able to hide the addiction from family and friends. Based on this data, which independent nursing intervention is appropriate for this client?

- A) Assertiveness training
- B) Milieu therapy
- C) Family therapy
- D) Communication training

Answer: D

Explanation: A) Many clients and families with addiction need training in communication skills. Verbal and nonverbal communication training is a vital independent nursing action. Cultural norms must be carefully considered prior to implementing assertiveness training. Milieu therapy and family therapy are interventions involving collaboration with therapists.

B) Many clients and families with addiction need training in communication skills. Verbal and nonverbal communication training is a vital independent nursing action. Cultural norms must be carefully considered prior to implementing assertiveness training. Milieu therapy and family therapy are interventions involving collaboration with therapists.

C) Many clients and families with addiction need training in communication skills. Verbal and nonverbal communication training is a vital independent nursing action. Cultural norms must be carefully considered prior to implementing assertiveness training. Milieu therapy and family therapy are interventions involving collaboration with therapists.

D) Many clients and families with addiction need training in communication skills. Verbal and nonverbal communication training is a vital independent nursing action. Cultural norms must be carefully considered prior to implementing assertiveness training. Milieu therapy and family therapy are interventions involving collaboration with therapists.

Page Ref: 1528

Cognitive Level: Analyzing

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Implementation

Learning Outcome: 7. Demonstrate the nursing process in providing culturally competent and caring interventions across the life span for individuals with addictions.

QSEN Competencies: 1.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and

quality and safe patient care

MNL Learning Outcome: 23.1.4 Compare common independent and collaborative interventions for individuals and families.

10) The client with a history of alcohol abuse is being discharged for a treatment facility. Which prescription does the nurse anticipate for this client?

- A) Disulfiram
- B) Naloxone
- C) Bupropion hydrochloride
- D) Varenicline

Answer: A

Explanation: A) Disulfiram (Antabuse) causes the client to become immediately and violently ill when consuming alcohol. Naloxone is administered to clients who overdose on opiates.

Bupropion hydrochloride and varenicline are both medications to assist with smoking cessation.

B) Disulfiram (Antabuse) causes the client to become immediately and violently ill when consuming alcohol. Naloxone is administered to clients who overdose on opiates. Bupropion hydrochloride and varenicline are both medications to assist with smoking cessation.

C) Disulfiram (Antabuse) causes the client to become immediately and violently ill when consuming alcohol. Naloxone is administered to clients who overdose on opiates. Bupropion hydrochloride and varenicline are both medications to assist with smoking cessation.

D) Disulfiram (Antabuse) causes the client to become immediately and violently ill when consuming alcohol. Naloxone is administered to clients who overdose on opiates. Bupropion hydrochloride and varenicline are both medications to assist with smoking cessation.

Page Ref: 1533

Cognitive Level: Understanding

Client Need: Physiological Integrity

Client Need Sub: Pharmacological and Parenteral Therapies

Nursing Process: Planning

Learning Outcome: 8. Compare and contrast common independent and collaborative interventions for addiction.

QSEN Competencies: 1.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.1.4 Compare common independent and collaborative interventions for individuals and families.

Exemplar 22.1 Alcohol Abuse

1) The nurse is providing care to a client diagnosed with alcoholism. The client's physical examination reveals a BMI of 18. Which prescription does the nurse anticipate to manage the client's nutritional status?

- A) Sertraline
- B) Methadone
- C) Naloxone
- D) Multivitamin with folic acid

Answer: D

Explanation: A) A client with alcohol dependence may suffer from numerous nutritional deficiencies, including deficiencies in thiamine, folic acid, vitamin A, magnesium, and zinc. A multivitamin may be prescribed to help with these deficiencies. Naloxone is used to manage an opiate overdose. Methadone is prescribed to manage heroin cravings. Sertraline is used to reduce anxiety and stabilize mood.

B) A client with alcohol dependence may suffer from numerous nutritional deficiencies, including deficiencies in thiamine, folic acid, vitamin A, magnesium, and zinc. A multivitamin may be prescribed to help with these deficiencies. Naloxone is used to manage an opiate overdose. Methadone is prescribed to manage heroin cravings. Sertraline is used to reduce anxiety and stabilize mood.

C) A client with alcohol dependence may suffer from numerous nutritional deficiencies, including deficiencies in thiamine, folic acid, vitamin A, magnesium, and zinc. A multivitamin may be prescribed to help with these deficiencies. Naloxone is used to manage an opiate overdose. Methadone is prescribed to manage heroin cravings. Sertraline is used to reduce anxiety and stabilize mood.

D) A client with alcohol dependence may suffer from numerous nutritional deficiencies, including deficiencies in thiamine, folic acid, vitamin A, magnesium, and zinc. A multivitamin may be prescribed to help with these deficiencies. Naloxone is used to manage an opiate overdose. Methadone is prescribed to manage heroin cravings. Sertraline is used to reduce anxiety and stabilize mood.

Page Ref: 1566

Cognitive Level: Applying

Client Need: Physiological Integrity

Client Need Sub: Pharmacological and Parenteral Therapies

Nursing Process: Planning

Learning Outcome: 5. Summarize therapies used by interdisciplinary teams in the collaborative care of an individual who abuses alcohol.

QSEN Competencies: I.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.2.2 Identify independent and collaborative therapies used by interdisciplinary teams.

2) A college student attends a seminar on alcohol abuse. Which statement would alert the nurse that the student needs more education?

- A) "The children of alcoholics are less likely to become alcoholics."
- B) "Native Americans are more likely to become alcoholics."
- C) "Married college graduates are less likely to become alcoholics."
- D) "Childless people are more likely to become alcoholics than parents."

Answer: A

Explanation: A) A genetic predisposition to alcoholism is established for Native Americans and the children of alcoholics. Married people, college graduates, and parents are less likely to become alcoholics.

B) A genetic predisposition to alcoholism is established for Native Americans and the children of alcoholics. Married people, college graduates, and parents are less likely to become alcoholics.

C) A genetic predisposition to alcoholism is established for Native Americans and the children of alcoholics. Married people, college graduates, and parents are less likely to become alcoholics.

D) A genetic predisposition to alcoholism is established for Native Americans and the children of alcoholics. Married people, college graduates, and parents are less likely to become alcoholics.

Page Ref: 1536

Cognitive Level: Analyzing

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Evaluation

Learning Outcome: 2. Identify risk factors associated with alcohol use.

QSEN Competencies: III.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.2.1 Differentiate the pathophysiology, etiology, risk factors, prevention, and clinical manifestations.

3) The nurse assesses a client with a history of alcoholism who is hospitalized with anorexia, dysphagia, odynophagia, and chest pressure after eating. Which nursing diagnosis is a priority for this client?

- A) Ineffective Coping
- B) Imbalanced Nutrition: Less Than Body Requirements
- C) Disturbed Sensory Perception
- D) Disturbed Thought Processes

Answer: B

Explanation: A) An alcoholic client with anorexia is at risk for Imbalanced Nutrition, Less Than Body Requirements. Ineffective Coping is a potential diagnosis used in substance abuse. Disturbed Thought Processes and Disturbed Sensory Perceptions are diagnoses used for delusions, hallucinations, and illusions that may occur during delirium tremens.

B) An alcoholic client with anorexia is at risk for Imbalanced Nutrition, Less Than Body Requirements. Ineffective Coping is a potential diagnosis used in substance abuse. Disturbed Thought Processes and Disturbed Sensory Perceptions are diagnoses used for delusions, hallucinations, and illusions that may occur during delirium tremens.

C) An alcoholic client with anorexia is at risk for Imbalanced Nutrition, Less Than Body Requirements. Ineffective Coping is a potential diagnosis used in substance abuse. Disturbed Thought Processes and Disturbed Sensory Perceptions are diagnoses used for delusions, hallucinations, and illusions that may occur during delirium tremens.

D) An alcoholic client with anorexia is at risk for Imbalanced Nutrition, Less Than Body Requirements. Ineffective Coping is a potential diagnosis used in substance abuse. Disturbed Thought Processes and Disturbed Sensory Perceptions are diagnoses used for delusions, hallucinations, and illusions that may occur during delirium tremens.

Page Ref: 1541

Cognitive Level: Applying

Client Need: Physiological Integrity

Client Need Sub: Reduction of Risk Potential

Nursing Process: Diagnosis

Learning Outcome: 4. Formulate priority nursing diagnoses appropriate for an individual who abuses alcohol.

QSEN Competencies: I.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and

quality and safe patient care

MNL Learning Outcome: 23.2.4 Examine the nursing interventions and expected outcomes for an individual and the family.

4) A client with alcoholism is receiving court-ordered care in a residential treatment facility. After alcohol is discovered in the client's room, the client states, "It is not mine." Which responses by the nurse are appropriate in this situation?

Select all that apply.

- A) "You will lose your day pass privileges for this Sunday."
- B) "We have a video of you accepting the alcohol from your brother."
- C) "What do you think about sharing this at AA tonight?"
- D) "You won't be allowed to go to dinner tonight."
- E) "You have violated our behavior contract."

Answer: A, B, C, E

Explanation: A) Used with care and a calm attitude, confrontation interferes with the client's ability to use denial or rationalization. Losing privileges is a consequence of violating the behavior contract. Participation in AA will provide peer feedback. Withholding food is inappropriate, particularly for a client with potential nutritional deficits.

B) Used with care and a calm attitude, confrontation interferes with the client's ability to use denial or rationalization. Losing privileges is a consequence of violating the behavior contract. Participation in AA will provide peer feedback. Withholding food is inappropriate, particularly for a client with potential nutritional deficits.

C) Used with care and a calm attitude, confrontation interferes with the client's ability to use denial or rationalization. Losing privileges is a consequence of violating the behavior contract. Participation in AA will provide peer feedback. Withholding food is inappropriate, particularly for a client with potential nutritional deficits.

D) Used with care and a calm attitude, confrontation interferes with the client's ability to use denial or rationalization. Losing privileges is a consequence of the violating the behavior contract. Participation in AA will provide peer feedback. Withholding food is inappropriate, particularly for a client with potential nutritional deficits.

E) Used with care and a calm attitude, confrontation interferes with the client's ability to use denial or rationalization. Losing privileges is a consequence of violating the behavior contract. Participation in AA will provide peer feedback. Withholding food is inappropriate, particularly for a client with potential nutritional deficits.

Page Ref: 1541

Cognitive Level: Evaluating

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Caring

Learning Outcome: 5. Summarize therapies used by interdisciplinary teams in the collaborative care of an individual who abuses alcohol.

QSEN Competencies: I.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.2.2 Identify independent and collaborative therapies used by interdisciplinary teams.

5) The nurse is evaluating outcome goals written by a student for a client diagnosed with alcoholism who is being discharged from a detoxification program. Which outcomes are appropriate for this client?

Select all that apply.

- A) Follow a 2000-calorie high-carbohydrate diet.
- B) Sponsor a participant in Alcoholics Anonymous (AA) meetings.
- C) Obtain at least 6-8 hours of sleep per night.
- D) Acknowledge the blame that family members must take for codependent behavior.
- E) Enroll in the Employee Assistance Program (EAP) through his employer.

Answer: C, E

Explanation: A) Outcome measures for a client discharging from alcohol detoxification are to obtain at least 6-8 hours of sleep a night and to enroll in the Employee Assistance Program if offered through the client's employer. The calorie requirement should be individualized and may not be 2000 calories. New or returning members to AA should be sponsored and are not ready to sponsor another person. This client should accept responsibility for his behavior in the family unit instead of assigning blame for codependent behavior.

B) Outcome measures for a client discharging from alcohol detoxification are to obtain at least 6-8 hours of sleep a night and to enroll in the Employee Assistance Program if offered through the client's employer. The calorie requirement should be individualized and may not be 2000 calories. New or returning members to AA should be sponsored and are not ready to sponsor another person. This client should accept responsibility for his behavior in the family unit instead of assigning blame for codependent behavior.

C) Outcome measures for a client discharging from alcohol detoxification are to obtain at least 6-8 hours of sleep a night and to enroll in the Employee Assistance Program if offered through the client's employer. The calorie requirement should be individualized and may not be 2000 calories. New or returning members to AA should be sponsored and are not ready to sponsor another person. This client should accept responsibility for his behavior in the family unit instead of assigning blame for codependent behavior.

D) Outcome measures for a client discharging from alcohol detoxification are to obtain at least 6-8 hours of sleep a night and to enroll in the Employee Assistance Program if offered through the client's employer. The calorie requirement should be individualized and may not be 2000 calories. New or returning members to AA should be sponsored and are not ready to sponsor another person. This client should accept responsibility for his behavior in the family unit instead of assigning blame for codependent behavior.

E) Outcome measures for a client discharging from alcohol detoxification are to obtain at least 6-8 hours of sleep a night and to enroll in the Employee Assistance Program if offered through the client's employer. The calorie requirement should be individualized and may not be 2000 calories. New or returning members to AA should be sponsored and are not ready to sponsor another person. This client should accept responsibility for his behavior in the family unit instead of assigning blame for codependent behavior.

Page Ref: 1541

Cognitive Level: Analyzing

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Planning

Learning Outcome: 6. Evaluate expected outcomes for an individual who abuses alcohol.

QSEN Competencies: I.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.2.4 Examine the nursing interventions and expected outcomes for an individual and the family.

6) A client is admitted for the fourth time in 4 years for alcohol detoxification. When planning care for this client, the nurse will include which pathophysiology aspect of alcoholism due to its impact on client care?

A) Aging can impact the ability of the body to handle detoxification from alcohol and drugs.

B) The withdrawal may be greater this time.

C) The dependency might have been greater this time.

D) Increased difficulty with alcohol detoxification is likely the result of an addiction to another substance at the same time.

Answer: B

Explanation: A) Subsequent episodes of withdrawal tend to get progressively worse due to kindling. Kindling refers to long-term changes in brain neurotransmission that occur after repeated detoxifications. Aging does not play a role in the process. There is no evidence to support the suspicion that the client is addicted to additional substances or has an increased degree of dependence.

B) Subsequent episodes of withdrawal tend to get progressively worse due to kindling. Kindling refers to long-term changes in brain neurotransmission that occur after repeated detoxifications. Aging does not play a role in the process. There is no evidence to support the suspicion that the client is addicted to additional substances or has an increased degree of dependence.

C) Subsequent episodes of withdrawal tend to get progressively worse due to kindling. Kindling refers to long-term changes in brain neurotransmission that occur after repeated detoxifications. Aging does not play a role in the process. There is no evidence to support the suspicion that the client is addicted to additional substances or has an increased degree of dependence.

D) Subsequent episodes of withdrawal tend to get progressively worse due to kindling. Kindling refers to long-term changes in brain neurotransmission that occur after repeated detoxifications. Aging does not play a role in the process. There is no evidence to support the suspicion that the client is addicted to additional substances or has an increased degree of dependence.

Page Ref: 1539

Cognitive Level: Applying

Client Need: Physiological Integrity

Client Need Sub: Physiological Adaptation

Nursing Process: Planning

Learning Outcome: 1. Describe the pathophysiology, psychopathology, etiology, clinical manifestations, and direct and indirect causes of alcohol abuse.

QSEN Competencies: III.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.2.1 Differentiate the pathophysiology, etiology, risk factors, prevention, and clinical manifestations.

7) The nurse is conducting a health history for a client and wants to determine the client's alcohol use. What question from the nurse will provide the greatest amount of information?

- A) "Are you a heavy drinker?"
- B) "How many alcoholic beverages do you drink each day?"
- C) "Is alcohol use a concern for you?"
- D) "Drinking doesn't cause any problems for you, does it?"

Answer: B

Explanation: A) Open-ended questions will elicit the greatest amount of information. Asking closed questions that can be answered with a "yes" or "no" will limit the information obtained.

B) Open-ended questions will elicit the greatest amount of information. Asking closed questions that can be answered with a "yes" or "no," such as those in the other options, will limit the information obtained.

C) Open-ended questions will elicit the greatest amount of information. Asking closed questions that can be answered with a "yes" or "no" will limit the information obtained.

D) Open-ended questions will elicit the greatest amount of information. Asking closed questions that can be answered with a "yes" or "no" will limit the information obtained.

Page Ref: 1548

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Assessment

Learning Outcome: 3. Illustrate the nursing process in providing culturally competent care across the life span for individuals who abuse alcohol.

QSEN Competencies: I.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.2.3 Summarize assessment findings in clients across the life span.

Exemplar 22.2 Nicotine Addiction

1) The nurse is providing care to a client who admits to smoking 2 packs of per day for 34 years. The client also has a history of intermittent claudication, chronic bronchitis, and emphysema. After 6 weeks of smoking cessation the client reports, “yelling at my spouse” and “flying off the handle.” Which effects of cigarette smoking are associated with the data collected from the client?

Select all that apply.

- A) Nicotine causes destruction of the alveoli.
- B) The release of epinephrine causes vasoconstriction.
- C) Dopaminergic processes are implicated in withdrawal symptoms.
- D) Tar causes the mucus production seen in chronic bronchitis.
- E) Tobacco use causes atherosclerosis.

Answer: B, C, D, E

Explanation: A) Nicotine causes the release of epinephrine, which triggers vasoconstriction, exacerbating intermittent claudication. Tobacco use causes atherosclerosis, which is seen in intermittent claudication. Tar and other chemicals, not nicotine, cause the destruction of the alveoli seen in emphysema and the productive cough seen in chronic bronchitis.

B) Nicotine causes the release of epinephrine, which triggers vasoconstriction, exacerbating intermittent claudication. Tobacco use causes atherosclerosis, which is seen in intermittent claudication. Tar and other chemicals, not nicotine, cause the destruction of the alveoli seen in emphysema and the productive cough seen in chronic bronchitis.

C) Nicotine causes the release of epinephrine, which triggers vasoconstriction, exacerbating intermittent claudication. Tobacco use causes atherosclerosis, which is seen in intermittent claudication. Tar and other chemicals, not nicotine, cause the destruction of the alveoli seen in emphysema and the productive cough seen in chronic bronchitis.

D) Nicotine causes the release of epinephrine, which triggers vasoconstriction, exacerbating intermittent claudication. Tobacco use causes atherosclerosis, which is seen in intermittent claudication. Tar and other chemicals, not nicotine, cause the destruction of the alveoli seen in emphysema and the productive cough seen in chronic bronchitis.

E) Nicotine causes the release of epinephrine, which triggers vasoconstriction, exacerbating intermittent claudication. Tobacco use causes atherosclerosis, which is seen in intermittent claudication. Tar and other chemicals, not nicotine, cause the destruction of the alveoli seen in emphysema and the productive cough seen in chronic bronchitis.

Page Ref: 1546

Cognitive Level: Analyzing

Client Need: Physiological Integrity

Client Need Sub: Physiological Adaptation

Nursing Process: Assessment

Learning Outcome: 1. Describe the pathophysiology, etiology, clinical manifestations, and direct and indirect causes of nicotine addiction.

QSEN Competencies: III.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.3.1 Differentiate the pathophysiology, etiology, risk factors, prevention, and clinical manifestations.

2) An older adult client with heart disease tells the nurse, "I am sick because I sinned by smoking cigarettes." Which response by the nurse is appropriate?

A) "Smoking cigarettes isn't a sin. There are many worse habits you could have."

B) "Cigarette smoking was desirable when you began smoking. We didn't know about the problems it could cause."

C) "Why don't we call the hospital chaplain and you can pray about your sins?"

D) "You are correct, but it is too late to do anything about it now."

Answer: B

Explanation: A) This client is in distress and is seeking forgiveness. The nurse should offer this forgiveness and a reason the forgiveness is valid. If the nurse tells the client that it is too late to do anything about the problem, there is a possibility that distress will increase. Suggesting that the hospital chaplain be called for prayer reinforces the idea that smoking cigarettes is a sin. Saying there are worse habits minimizes the client's concerns and does not offer forgiveness.

B) This client is in distress and is seeking forgiveness. The nurse should offer this forgiveness and a reason the forgiveness is valid. If the nurse tells the client that it is too late to do anything about the problem, there is a possibility that distress will increase. Suggesting that the hospital chaplain be called for prayer reinforces the idea that smoking cigarettes is a sin. Saying there are worse habits minimizes the client's concerns and does not offer forgiveness.

C) This client is in distress and is seeking forgiveness. The nurse should offer this forgiveness and a reason the forgiveness is valid. If the nurse tells the client that it is too late to do anything about the problem, there is a possibility that distress will increase. Suggesting that the hospital chaplain be called for prayer reinforces the idea that smoking cigarettes is a sin. Saying there are worse habits minimizes the client's concerns and does not offer forgiveness.

D) This client is in distress and is seeking forgiveness. The nurse should offer this forgiveness and a reason the forgiveness is valid. If the nurse tells the client that it is too late to do anything about the problem, there is a possibility that distress will increase. Suggesting that the hospital chaplain be called for prayer reinforces the idea that smoking cigarettes is a sin. Saying there are worse habits minimizes the client's concerns and does not offer forgiveness.

Page Ref: 1629

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Caring

Learning Outcome: 3. Illustrate the nursing process in providing culturally competent care across the life span for individuals with nicotine addiction.

QSEN Competencies: I.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.3.4 Examine the nursing interventions and expected outcomes for an individual and the family.

3) The nurse is conducting a health promotion class to adolescents regarding smoking. Which point is most important to convey to this audience?

A) Teens are not strongly influenced by tobacco advertising.

B) Smoking causes lung cancer.

C) Cost is no deterrent to smoking.

D) Alcohol use is strongly associated with smoking.

Answer: B

Explanation: A) Although alcohol abuse, a sedentary lifestyle, and drug abuse are preventable causes of mortality in the United States, smoking is now the number one cause of preventable death and disease for both men and women.

B) Although alcohol abuse, a sedentary lifestyle, and drug abuse are preventable causes of mortality in the United States, smoking is now the number one cause of preventable death and disease for both men and women.

C) Although alcohol abuse, a sedentary lifestyle, and drug abuse are preventable causes of mortality in the United States, smoking is now the number one cause of preventable death and disease for both men and women.

D) Although alcohol abuse, a sedentary lifestyle, and drug abuse are preventable causes of mortality in the United States, smoking is now the number one cause of preventable death and disease for both men and women.

Page Ref: 1549

Cognitive Level: Applying

Client Need: Health Promotion and Maintenance

Client Need Sub:

Nursing Process: Implementation

Learning Outcome: 2. Identify risk factors associated with nicotine addiction.

QSEN Competencies: III.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.3.1 Differentiate the pathophysiology, etiology, risk factors, prevention, and clinical manifestations.

4) The nurse is planning care for a client with esophageal cancer due to years of nicotine abuse. Which is the priority nursing diagnosis for this client?

- A) Decisional Conflict
- B) Situational Social Isolation
- C) Disturbed Body Image
- D) Ineffective Airway Clearance

Answer: D

Explanation: A) The nurse should anticipate that the client with esophageal cancer may have issues with airway edema and therefore an ineffective airway clearance. This is the priority nursing diagnosis of those listed. There is no evidence that the client has a disturbed body image or experiences decisional conflict or social isolation.

B) The nurse should anticipate that the client with esophageal cancer may have issues with airway edema and therefore an ineffective airway clearance. This is the priority nursing diagnosis of those listed. There is no evidence that the client has a disturbed body image or experiences decisional conflict or social isolation.

C) The nurse should anticipate that the client with esophageal cancer may have issues with airway edema and therefore an ineffective airway clearance. This is the priority nursing diagnosis of those listed. There is no evidence that the client has a disturbed body image or experiences decisional conflict or social isolation.

D) The nurse should anticipate that the client with esophageal cancer may have issues with airway edema and therefore an ineffective airway clearance. This is the priority nursing diagnosis of those listed. There is no evidence that the client has a disturbed body image or experiences decisional conflict or social isolation.

Page Ref: 1549

Cognitive Level: Applying

Client Need: Physiological Integrity

Client Need Sub: Physiological Adaptation

Nursing Process: Diagnosis

Learning Outcome: 4. Formulate priority nursing diagnoses appropriate for an individual with nicotine addiction.

QSEN Competencies: I.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.3.3 Summarize assessment findings in clients across the life span.

5) A nurse works at a clinic which provides care to a community which has a high population of smokers. The nurse is planning an educational session on "Tips to Quit." Which action by the nurse is appropriate?

A) Telling this group that smoking is unacceptable.

B) Making sure the group is aware of the increased risk of liver disease and cancer of the esophagus.

C) Reviewing the available pharmacologic adjuncts to cessation.

D) Recommending hypnosis at a local dinner theater.

Answer: C

Explanation: A) Available pharmacologic adjuncts for smoking cessation should be discussed in a "Tips to Quit" community talk. Simply telling the group that smoking is unacceptable is not effective in promoting wellness. Discussing esophageal cancer and liver disease is inappropriate for a single educational session; lung cancer and cardiovascular disease are the primary health threats that should be discussed.

B) Available pharmacologic adjuncts for smoking cessation should be discussed in a "Tips to Quit" community talk. Simply telling the group that smoking is unacceptable is not effective in promoting wellness. Discussing esophageal cancer and liver disease is inappropriate for a single educational session; lung cancer and cardiovascular disease are the primary health threats that should be discussed.

C) Available pharmacologic adjuncts for smoking cessation should be discussed in a "Tips to Quit" community talk. Simply telling the group that smoking is unacceptable is not effective in promoting wellness. Discussing esophageal cancer and liver disease is inappropriate for a single educational session; lung cancer and cardiovascular disease are the primary health threats that should be discussed.

D) Available pharmacologic adjuncts for smoking cessation should be discussed in a "Tips to Quit" community talk. Simply telling the group that smoking is unacceptable is not effective in promoting wellness. Discussing esophageal cancer and liver disease is inappropriate for a single educational session; lung cancer and cardiovascular disease are the primary health threats that should be discussed.

Page Ref: 1547

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Implementation

Learning Outcome: 5. Summarize therapies used by interdisciplinary teams in the collaborative care of an individual with nicotine addiction.

QSEN Competencies: I.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.3.2 Identify independent and collaborative therapies used by interdisciplinary teams.

6) The nurse is providing care to a client who has a history of chronic obstructive pulmonary disease (COPD) who wants help and information regarding nicotine addiction and ways to quit smoking. After providing education to this client regarding smoking cessation, which statement indicates appropriate understanding of the information presented?

A) "I will keep a pack of cigarettes in my closet in case I need it."

B) "I will taper off smoking gradually."

C) "I will chew sugar-free gum when I want a cigarette."

D) "I will eat a snack when I am feeling nervous."

Answer: C

Explanation: A) When providing education regarding smoking cessation, it is important for the nurse to include adaptive coping mechanisms for the client to use during times of stress. The client who expresses the intention to use a healthy coping mechanism—such as chewing sugar-free gum—when the urge to smoke arises indicates appropriate understanding of the information presented. Tapering off smoking and keeping cigarettes close by are examples of the client who is not wholly committed. Eating when stressed may lead the client to substitute eating for smoking, which is a form of denial.

B) When providing education regarding smoking cessation, it is important for the nurse to include adaptive coping mechanisms for the client to use during times of stress. The client who expresses the intention to use a healthy coping mechanism—such as chewing sugar-free gum—when the urge to smoke arises indicates appropriate understanding of the information presented. Tapering off smoking and keeping cigarettes close by are examples of the client who is not wholly committed. Eating when stressed may lead the client to substitute eating for smoking, which is a form of denial.

C) When providing education regarding smoking cessation, it is important for the nurse to include adaptive coping mechanisms for the client to use during times of stress. The client who expresses the intention to use a healthy coping mechanism—such as chewing sugar-free gum—when the urge to smoke arises indicates appropriate understanding of the information presented. Tapering off smoking and keeping cigarettes close by are examples of the client who is not wholly committed. Eating when stressed may lead the client to substitute eating for smoking, which is a form of denial.

D) When providing education regarding smoking cessation, it is important for the nurse to include adaptive coping mechanisms for the client to use during times of stress. The client who expresses the intention to use a healthy coping mechanism—such as chewing sugar-free gum—when the urge to smoke arises indicates appropriate understanding of the information presented. Tapering off smoking and keeping cigarettes close by are examples of the client who is not wholly committed. Eating when stressed may lead the client to substitute eating for smoking, which is a form of denial.

Page Ref: 1549-1550

Cognitive Level: Analyzing

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Evaluation

Learning Outcome: 7. Evaluate expected outcomes for an individual with nicotine addiction.

QSEN Competencies: I.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values

- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.3.4 Examine the nursing interventions and expected outcomes for an individual and the family.

- 7) The nurse is providing education to a client who wants to quit smoking. Which statements are appropriate for the nurse to include in the teaching session with this client? Select all that apply.
- A) "There is no adverse risk if the client chooses to smoke while wearing a nicotine patch."
 - B) "Bupropion (Zyban) is used to suppress the craving for tobacco."
 - C) "A piece of nicotine gum should be chewed for 5 minutes of every waking hour then held in the cheek."
 - D) "Most persons quit smoking several times before they are successful."
 - E) "Alternative therapies should be considered to help reduce the stress that accompanies smoking cessation."

Answer: B, D, E

Explanation: A) When teaching clients about smoking cessation, the nurse should emphasize that most persons who quit smoking try to quit several times before they are successful.

Bupropion is used to suppress the craving for tobacco and is a viable option for this client. The proper use of nicotine gum is to take one piece when the urge to smoke occurs, up to 9 to 12 times daily. The gum should be chewed several times to soften it and then held in the buccal space for at least 30 minutes to absorb the medication. A client wearing a nicotine patch must not smoke because of increased risk for cardiovascular problems, including myocardial infarction. The nurse should always consider alternative therapies in addition to traditional therapies, as they may help the client deal with the stress that accompanies smoking cessation.

B) When teaching clients about smoking cessation, the nurse should emphasize that most persons who quit smoking try to quit several times before they are successful. Bupropion is used to suppress the craving for tobacco and is a viable option for this client. The proper use of nicotine gum is to take one piece when the urge to smoke occurs, up to 9 to 12 times daily. The gum should be chewed several times to soften it and then held in the buccal space for at least 30 minutes to absorb the medication. A client wearing a nicotine patch must not smoke because of increased risk for cardiovascular problems, including myocardial infarction. The nurse should always consider alternative therapies in addition to traditional therapies, as they may help the client deal with the stress that accompanies smoking cessation.

C) When teaching clients about smoking cessation, the nurse should emphasize that most persons who quit smoking try to quit several times before they are successful. Bupropion is used to suppress the craving for tobacco and is a viable option for this client. The proper use of nicotine gum is to take one piece when the urge to smoke occurs, up to 9 to 12 times daily. The gum should be chewed several times to soften it and then held in the buccal space for at least 30 minutes to absorb the medication. A client wearing a nicotine patch must not smoke because of increased risk for cardiovascular problems, including myocardial infarction. The nurse should always consider alternative therapies in addition to traditional therapies, as they may help the client deal with the stress that accompanies smoking cessation.

D) When teaching clients about smoking cessation, the nurse should emphasize that most persons who quit smoking try to quit several times before they are successful. Bupropion is used to suppress the craving for tobacco and is a viable option for this client. The proper use of nicotine gum is to take one piece when the urge to smoke occurs, up to 9 to 12 times daily. The gum should be chewed several times to soften it and then held in the buccal space for at least 30 minutes to absorb the medication. A client wearing a nicotine patch must not smoke because of increased risk for cardiovascular problems, including myocardial infarction. The nurse should always consider alternative therapies in addition to traditional therapies, as they may help the client deal with the stress that accompanies smoking cessation.

E) When teaching clients about smoking cessation, the nurse should emphasize that most persons

who quit smoking try to quit several times before they are successful. Bupropion is used to suppress the craving for tobacco and is a viable option for this client. The proper use of nicotine gum is to take one piece when the urge to smoke occurs, up to 9 to 12 times daily. The gum should be chewed several times to soften it and then held in the buccal space for at least 30 minutes to absorb the medication. A client wearing a nicotine patch must not smoke because of increased risk for cardiovascular problems, including myocardial infarction. The nurse should always consider alternative therapies in addition to traditional therapies, as they may help the client deal with the stress that accompanies smoking cessation.

Page Ref: 1533

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Implementation

Learning Outcome: 6. Plan evidence-based caring interventions for an individual with nicotine addiction and his or her family in collaboration with other members of the healthcare team.

QSEN Competencies: III.A.2 Describe EBP to include the components of research evidence, clinical expertise and patient/family values.

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.3.2 Identify independent and collaborative therapies used by interdisciplinary teams.

8) A nurse is caring for a client who smokes cigarettes and asks the nurse about nicotine replacement therapy (NRT). Which statement regarding this product is appropriate for the nurse to include in the teaching session?

A) "Over-the-counter (OTC) NRTs include transdermal patches, gums, nicotine inhalers, and nasal sprays."

B) "NRT helps to relieve the psychological and physiological effects of nicotine withdrawal."

C) "NRT does not address addictive behavior."

D) "Combining the use of NRT and a smoking cessation program is no more effective than NRT use alone."

Answer: C

Explanation: A) Nicotine replacement therapy (NRT) does not address addictive behavior. NRT helps to relieve some physiological, not psychological, effects of nicotine withdrawal. Over-the-counter (OTC) NRTs include transdermal patches and gums. Nicotine inhalers and nasal sprays are available by prescription only. Combining the use of NRT and a smoking cessation program is more effective than the use of NRT alone.

B) Nicotine replacement therapy (NRT) does not address addictive behavior. NRT helps to relieve some physiological, not psychological, effects of nicotine withdrawal. Over-the-counter (OTC) NRTs include transdermal patches and gums. Nicotine inhalers and nasal sprays are available by prescription only. Combining the use of NRT and a smoking cessation program is more effective than the use of NRT alone.

C) Nicotine replacement therapy (NRT) does not address addictive behavior. NRT helps to relieve some physiological, not psychological, effects of nicotine withdrawal. Over-the-counter (OTC) NRTs include transdermal patches and gums. Nicotine inhalers and nasal sprays are available by prescription only. Combining the use of NRT and a smoking cessation program is more effective than the use of NRT alone.

D) Nicotine replacement therapy (NRT) does not address addictive behavior. NRT helps to relieve some physiological, not psychological, effects of nicotine withdrawal. Over-the-counter (OTC) NRTs include transdermal patches and gums. Nicotine inhalers and nasal sprays are available by prescription only. Combining the use of NRT and a smoking cessation program is more effective than the use of NRT alone.

Page Ref: 1547

Cognitive Level: Applying

Client Need: Physiological Integrity

Client Need Sub: Pharmacological and Parenteral Therapies

Nursing Process: Implementation

Learning Outcome: 5. Summarize therapies used by interdisciplinary teams in the collaborative care of an individual with nicotine addiction.

QSEN Competencies: I.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.3.2 Identify independent and collaborative therapies used by interdisciplinary teams.

9) A nurse is caring for a client with congestive heart failure (CHF) who currently smokes cigarettes and has a 50 pack-year smoking history. When providing smoking cessation education to the client, which statements regarding the pathophysiology of nicotine use are appropriate? Select all that apply.

- A) "In low doses, nicotine stimulates nicotinic receptors in the brain to release dopamine."
- B) "In high doses, nicotine stimulates the parasympathetic system to release epinephrine, causing vasoconstriction."
- C) "Initially, nicotine increases mental alertness and cognitive ability."
- D) "Nicotine is a nonpsychoactive substance found in tobacco."
- E) "Gradual reduction of nicotine appears to be the best method of cessation."

Answer: A, C

Explanation: A) In low doses, nicotine stimulates nicotinic receptors in the brain to release dopamine and epinephrine, causing vasoconstriction. Initially, nicotine increases mental alertness and cognitive ability, but eventually it depresses those responses. Nicotine is a psychoactive substance found in tobacco.

B) In low doses, nicotine stimulates nicotinic receptors in the brain to release dopamine and epinephrine, causing vasoconstriction. Initially, nicotine increases mental alertness and cognitive ability, but eventually it depresses those responses. Nicotine is a psychoactive substance found in tobacco.

C) In low doses, nicotine stimulates nicotinic receptors in the brain to release dopamine and epinephrine, causing vasoconstriction. Initially, nicotine increases mental alertness and cognitive ability, but eventually it depresses those responses. Nicotine is a psychoactive substance found in tobacco.

D) In low doses, nicotine stimulates nicotinic receptors in the brain to release dopamine and epinephrine, causing vasoconstriction. Initially, nicotine increases mental alertness and cognitive ability, but eventually it depresses those responses. Nicotine is a psychoactive substance found in tobacco.

E) In low doses, nicotine stimulates nicotinic receptors in the brain to release dopamine and epinephrine, causing vasoconstriction. Initially, nicotine increases mental alertness and cognitive ability, but eventually it depresses those responses. Nicotine is a psychoactive substance found in tobacco.

Page Ref: 1546

Cognitive Level: Applying

Client Need: Physiological Integrity

Client Need Sub: Physiological Adaptation

Nursing Process: Implementation

Learning Outcome: 3. Illustrate the nursing process in providing culturally competent care across the life span for individuals with nicotine addiction.

QSEN Competencies: I.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support

- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.3.4 Examine the nursing interventions and expected outcomes for an individual and the family.

10) A nurse working in an outpatient primary care clinic is caring for a client with asthma who has an 80 pack-year smoking history. When assessing the client's current use of nicotine, which question is most appropriate?

A) "Have you tried a nicotine patch for quitting smoking?"

B) "Do you smoke cigarettes with filters or without?"

C) "Do you smoke upon waking?"

D) "Tell me about any attempts you've made to quit using nicotine."

Answer: D

Explanation: A) Appropriate assessment questions should be open-ended and allow the client to elaborate on the answers. "Tell me about any attempts you've made to quit using nicotine" is the only open-ended phrase that is effective in assessing this client.

B) Appropriate assessment questions should be open-ended and allow the client to elaborate on the answers. "Tell me about any attempts you've made to quit using nicotine" is the only open-ended phrase that is effective in assessing this client.

C) Appropriate assessment questions should be open-ended and allow the client to elaborate on the answers. "Tell me about any attempts you've made to quit using nicotine" is the only open-ended phrase that is effective in assessing this client.

D) Appropriate assessment questions should be open-ended and allow the client to elaborate on the answers. "Tell me about any attempts you've made to quit using nicotine" is the only open-ended phrase that is effective in assessing this client.

Page Ref: 1548

Cognitive Level: Applying

Client Need: Physiological Integrity

Client Need Sub: Reduction of Risk Potential

Nursing Process: Assessment

Learning Outcome: 3. Illustrate the nursing process in providing culturally competent care across the life span for individuals with nicotine addiction.

QSEN Competencies: I.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.3.3 Summarize assessment findings in clients across the life span.

Exemplar 22.3 Prenatal Substance Exposure

1) The nurse is caring for a pregnant woman who admits to using Ecstasy on a regular basis. The client states, "Everybody knows that alcohol is bad during pregnancy, but what's the big deal about Ecstasy?" Which response by the nurse is appropriate?

- A) "Ecstasy use leads to deficiencies of thiamine and folic acid, which help the baby develop."
- B) "Ecstasy use produces babies with small heads, short bodies, and brain function alterations."
- C) "Ecstasy use results in intrauterine growth restriction and meconium aspiration."
- D) "Ecstasy use has been associated with long-term impaired memory and learning in the child."

Answer: D

Explanation: A) Little is known about the effects of Ecstasy on pregnancy. Preliminary research does suggest that ecstasy is associated with long-term impaired memory and learning in the child. The impact on the timing of Ecstasy use by the pregnant woman during critical brain development may be a critical issue. Alcohol use, not Ecstasy use, by a pregnant woman causes deficiencies of thiamine and folic acid. Folic acid helps prevent neural tube defects. Cocaine use by a pregnant woman can cause the baby to have a small head and brain alterations. Heroin use by a pregnant woman can cause intrauterine growth restriction and meconium aspiration.

B) Little is known about the effects of Ecstasy on pregnancy. Preliminary research does suggest that ecstasy is associated with long-term impaired memory and learning in the child. The impact on the timing of Ecstasy use by the pregnant woman during critical brain development may be a critical issue. Alcohol use, not Ecstasy use, by a pregnant woman causes deficiencies of thiamine and folic acid. Folic acid helps prevent neural tube defects. Cocaine use by a pregnant woman can cause the baby to have a small head and brain alterations. Heroin use by a pregnant woman can cause intrauterine growth restriction and meconium aspiration.

C) Little is known about the effects of Ecstasy on pregnancy. Preliminary research does suggest that ecstasy is associated with long-term impaired memory and learning in the child. The impact on the timing of Ecstasy use by the pregnant woman during critical brain development may be a critical issue. Alcohol use, not Ecstasy use, by a pregnant woman causes deficiencies of thiamine and folic acid. Folic acid helps prevent neural tube defects. Cocaine use by a pregnant woman can cause the baby to have a small head and brain alterations. Heroin use by a pregnant woman can cause intrauterine growth restriction and meconium aspiration.

D) Little is known about the effects of Ecstasy on pregnancy. Preliminary research does suggest that ecstasy is associated with long-term impaired memory and learning in the child. The impact on the timing of Ecstasy use by the pregnant woman during critical brain development may be a critical issue. Alcohol use, not Ecstasy use, by a pregnant woman causes deficiencies of thiamine and folic acid. Folic acid helps prevent neural tube defects. Cocaine use by a pregnant woman can cause the baby to have a small head and brain alterations. Heroin use by a pregnant woman can cause intrauterine growth restriction and meconium aspiration.

Page Ref: 1554

Cognitive Level: Applying

Client Need: Physiological Integrity

Client Need Sub: Reduction of Risk Potential

Nursing Process: Implementation

Learning Outcome: 1. Describe the pathophysiology, etiology, clinical manifestations, and direct and indirect effects of prenatal substance use on both the mother and the fetus.

QSEN Competencies: III.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.4.1 Differentiate the pathophysiology, etiology, risk factors, prevention, and clinical manifestations.

2) A pregnant client experiences abruptio placentae. The father of the baby asks the nurse why this has happened to them. Which risk factor in the client's history is the likely cause for this condition?

- A) Maternal smoking
- B) Genetic history
- C) Maternal cocaine use
- D) The mother having low levels of folic acid

Answer: C

Explanation: A) Maternal cocaine consumption during pregnancy puts the woman at risk for abruptio placentae. Cocaine use is also associated with preterm birth, low birth weight, neonatal irritability, neonatal depression, SIDS, and developmental delays. Teratogens are medications known to adversely affect normal cellular development in the embryo or fetus. Folic acid is necessary for normal neural tube development. Genetic history does not affect the risk for spontaneous abortion.

B) Maternal cocaine consumption during pregnancy puts the woman at risk for abruptio placentae. Cocaine use is also associated with preterm birth, low birth weight, neonatal irritability, neonatal depression, SIDS, and developmental delays. Teratogens are medications known to adversely affect normal cellular development in the embryo or fetus. Folic acid is necessary for normal neural tube development. Genetic history does not affect the risk for spontaneous abortion.

C) Maternal cocaine consumption during pregnancy puts the woman at risk for abruptio placentae. Cocaine use is also associated with preterm birth, low birth weight, neonatal irritability, neonatal depression, SIDS, and developmental delays. Teratogens are medications known to adversely affect normal cellular development in the embryo or fetus. Folic acid is necessary for normal neural tube development. Genetic history does not affect the risk for spontaneous abortion.

D) Maternal cocaine consumption during pregnancy puts the woman at risk for abruptio placentae. Cocaine use is also associated with preterm birth, low birth weight, neonatal irritability, neonatal depression, SIDS, and developmental delays. Teratogens are medications known to adversely affect normal cellular development in the embryo or fetus. Folic acid is necessary for normal neural tube development. Genetic history does not affect the risk for spontaneous abortion.

Page Ref: 1553

Cognitive Level: Applying

Client Need: Physiological Integrity

Client Need Sub: Reduction of Risk Potential

Nursing Process: Assessment

Learning Outcome: 2. Identify risk factors associated with prenatal substance use.

QSEN Competencies: III.A.1 Demonstrate knowledge of basic scientific methods and processes
AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.4.1 Differentiate the pathophysiology, etiology, risk factors,

prevention, and clinical manifestations.

3) The nurse is collecting data on prenatal clients at a clinic on a Native American reservation in Arizona. One client has risk factors for substance abuse. What physical sign or signs did the nurse assess that suggest substance abuse in this client?

Select all that apply.

- A) Dilated pupils
- B) Odor of alcohol on the breath
- C) Frequent accidents or falls
- D) Underweight
- E) Dressed in jeans and a t-shirt

Answer: A, B, D

Explanation: A) Physical signs of substance abuse include dilated or constricted pupils, inflamed nasal mucosa, evidence of needle "track marks" or abscesses, poor nutritional status, slurred speech or staggering gait, and an odor of alcohol on the breath. Frequent accidents or falls are behavioral signs of substance abuse. Wearing a jeans and t-shirt is not indicative of substance abuse.

B) Physical signs of substance abuse include dilated or constricted pupils, inflamed nasal mucosa, evidence of needle "track marks" or abscesses, poor nutritional status, slurred speech or staggering gait, and an odor of alcohol on the breath. Frequent accidents or falls are behavioral signs of substance abuse. Wearing a jeans and t-shirt is not indicative of substance abuse.

C) Physical signs of substance abuse include dilated or constricted pupils, inflamed nasal mucosa, evidence of needle "track marks" or abscesses, poor nutritional status, slurred speech or staggering gait, and an odor of alcohol on the breath. Frequent accidents or falls are behavioral signs of substance abuse. Wearing a jeans and t-shirt is not indicative of substance abuse.

D) Physical signs of substance abuse include dilated or constricted pupils, inflamed nasal mucosa, evidence of needle "track marks" or abscesses, poor nutritional status, slurred speech or staggering gait, and an odor of alcohol on the breath. Frequent accidents or falls are behavioral signs of substance abuse. Wearing a jeans and t-shirt is not indicative of substance abuse.

E) Physical signs of substance abuse include dilated or constricted pupils, inflamed nasal mucosa, evidence of needle "track marks" or abscesses, poor nutritional status, slurred speech or staggering gait, and an odor of alcohol on the breath. Frequent accidents or falls are behavioral signs of substance abuse. Wearing a jeans and t-shirt is not indicative of substance abuse.

Page Ref: 1557

Cognitive Level: Analyzing

Client Need: Physiological Integrity

Client Need Sub: Physiological Adaptation

Nursing Process: Assessment

Learning Outcome: 3. Illustrate the nursing process in providing culturally competent care across the life span for individuals who abuse substances during pregnancy.

QSEN Competencies: I.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support

- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.4.3 Summarize assessment findings in clients across the life span.

4) A young adult client is at 28 weeks' gestation. The prenatal history reveals past drug abuse, and urine screening indicates that she has recently used heroin. Which potential fetal health problem should the nurse use to select a nursing diagnosis to guide care?

- A) Congenital anomalies
- B) Abruptio placentae
- C) Diabetes mellitus
- D) Intrauterine growth restriction (IUGR)

Answer: D

Explanation: A) Women who use heroin place the fetus at an increased risk for developing intrauterine growth restriction (IUGR). Congenital anomalies often occur with the use of lithium during pregnancy. Diabetes is an endocrine disorder that is unrelated to drug use and abuse. Abruptio placentae is a condition the mother can experience and is seen more commonly with cocaine and crack use.

B) Women who use heroin place the fetus at an increased risk for developing intrauterine growth restriction (IUGR). Congenital anomalies often occur with the use of lithium during pregnancy. Diabetes is an endocrine disorder that is unrelated to drug use and abuse. Abruptio placentae is a condition the mother can experience and is seen more commonly with cocaine and crack use.

C) Women who use heroin place the fetus at an increased risk for developing intrauterine growth restriction (IUGR). Congenital anomalies often occur with the use of lithium during pregnancy. Diabetes is an endocrine disorder that is unrelated to drug use and abuse. Abruptio placentae is a condition the mother can experience and is seen more commonly with cocaine and crack use.

D) Women who use heroin place the fetus at an increased risk for developing intrauterine growth restriction (IUGR). Congenital anomalies often occur with the use of lithium during pregnancy. Diabetes is an endocrine disorder that is unrelated to drug use and abuse. Abruptio placentae is a condition the mother can experience and is seen more commonly with cocaine and crack use.

Page Ref: 1554

Cognitive Level: Applying

Client Need: Physiological Integrity

Client Need Sub: Physiological Adaptation

Nursing Process: Diagnosis

Learning Outcome: 4. Formulate priority nursing diagnoses appropriate for an individual who abuses substances during pregnancy and for her newborn.

QSEN Competencies: I.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.4.3 Summarize assessment findings in clients across the life span.

5) The nurse is doing preconception counseling with an adult client with no prior pregnancies. Which client statement indicates that teaching has been effective?

- A) "I can continue to drink alcohol throughout my pregnancy."
- B) "A beer once a week will not damage the fetus."
- C) "I don't need to stop drinking alcohol until my pregnancy is confirmed."
- D) "I can't drink alcohol while breastfeeding, because it will pass into the breast milk."

Answer: D

Explanation: A) Women should discontinue drinking alcohol when they attempt to become pregnant. It is not known how much alcohol will cause fetal damage; therefore, any amount of alcohol, even one beer, during pregnancy is contraindicated. Alcohol passes readily into breast milk; therefore, it should be avoided, or the milk should be pumped and dumped after alcohol consumption.

B) Women should discontinue drinking alcohol when they attempt to become pregnant. It is not known how much alcohol will cause fetal damage; therefore, any amount of alcohol, even one beer, during pregnancy is contraindicated. Alcohol passes readily into breast milk; therefore, it should be avoided, or the milk should be pumped and dumped after alcohol consumption.

C) Women should discontinue drinking alcohol when they attempt to become pregnant. It is not known how much alcohol will cause fetal damage; therefore, any amount of alcohol, even one beer, during pregnancy is contraindicated. Alcohol passes readily into breast milk; therefore, it should be avoided, or the milk should be pumped and dumped after alcohol consumption.

D) Women should discontinue drinking alcohol when they attempt to become pregnant. It is not known how much alcohol will cause fetal damage; therefore, any amount of alcohol, even one beer, during pregnancy is contraindicated. Alcohol passes readily into breast milk; therefore, it should be avoided, or the milk should be pumped and dumped after alcohol consumption.

Page Ref: 1552-1553

Cognitive Level: Analyzing

Client Need: Health Promotion and Maintenance

Client Need Sub:

Nursing Process: Evaluation

Learning Outcome: 7. Evaluate expected outcomes for women who abuse substances during pregnancy, their newborns, and their family members.

QSEN Competencies: I.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and

quality and safe patient care

MNL Learning Outcome: 23.4.4 Examine the nursing interventions and expected outcomes for an individual and the family.

6) A pregnant woman, who admits to intravenous drug use, had a negative human immunodeficiency virus (HIV) screening test just after missing her first menstrual period. Which assessment data would indicate the client needs to be retested for HIV?

- A) Hemoglobin of 11 g/dL and a rapid weight gain
- B) Elevated blood pressure and ankle edema
- C) Unusual fatigue and oral thrush
- D) Shortness of breath and frequent urination

Answer: C

Explanation: A) The client who is HIV-positive would have a suppressed immune system and would experience symptoms of fatigue and opportunistic infections such as oral thrush. The client with HIV would be anemic and anorexic. The client would have a decrease in blood pressure, and no ankle edema. Shortness of breath and frequent urination do not indicate a need to retest for HIV.

B) The client who is HIV-positive would have a suppressed immune system and would experience symptoms of fatigue and opportunistic infections such as oral thrush. The client with HIV would be anemic and anorexic. The client would have a decrease in blood pressure, and no ankle edema. Shortness of breath and frequent urination do not indicate a need to retest for HIV.

C) The client who is HIV-positive would have a suppressed immune system and would experience symptoms of fatigue and opportunistic infections such as oral thrush. The client with HIV would be anemic and anorexic. The client would have a decrease in blood pressure, and no ankle edema. Shortness of breath and frequent urination do not indicate a need to retest for HIV.

D) The client who is HIV-positive would have a suppressed immune system and would experience symptoms of fatigue and opportunistic infections such as oral thrush. The client with HIV would be anemic and anorexic. The client would have a decrease in blood pressure, and no ankle edema. Shortness of breath and frequent urination do not indicate a need to retest for HIV.

Page Ref: 1560

Cognitive Level: Analyzing

Client Need: Physiological Integrity

Client Need Sub: Physiological Adaptation

Nursing Process: Evaluation

Learning Outcome: 6. Plan evidence-based care for women who abuse substances during pregnancy, their newborns, and their family members in collaboration with other members of the healthcare team.

QSEN Competencies: III.A.2 Describe EBP to include the components of research evidence, clinical expertise and patient/family values.

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.4.2 Identify independent and collaborative therapies used by interdisciplinary teams.

7) The nurse provides a wellness program to a group of pregnant adolescents at risk for substance abuse. Which participant statement indicates that teaching has been effective?

A) "Drinking alcohol and smoking marijuana can harm my baby."

B) "I need to take good care of myself by participating in vigorous exercise."

C) "My anemia and eating mostly fast food are not important."

D) "I should seek prenatal care at some point in the pregnancy."

Answer: A

Explanation: A) Pregnant adolescents are at great risk for complications such as pregnancy-induced hypertension, anemia, preterm birth, low-birth-weight infants, and fetal harm from cigarette smoking, alcohol consumption, or the use of street drugs. Early and regular prenatal care is the best intervention to prevent complications or to detect them early, to minimize the harm to both the teen and her fetus. Pregnant adolescents are at great risk for complications such as anemia. Vigorous exercise would not necessarily promote a healthy pregnancy and does not indicate an understanding of the increased risk for an adolescent who is at risk for substance abuse.

B) Pregnant adolescents are at great risk for complications such as pregnancy-induced hypertension, anemia, preterm birth, low-birth-weight infants, and fetal harm from cigarette smoking, alcohol consumption, or the use of street drugs. Early and regular prenatal care is the best intervention to prevent complications or to detect them early, to minimize the harm to both the teen and her fetus. Pregnant adolescents are at great risk for complications such as anemia. Vigorous exercise would not necessarily promote a healthy pregnancy and does not indicate an understanding of the increased risk for an adolescent who is at risk for substance abuse.

C) Pregnant adolescents are at great risk for complications such as pregnancy-induced hypertension, anemia, preterm birth, low-birth-weight infants, and fetal harm from cigarette smoking, alcohol consumption, or the use of street drugs. Early and regular prenatal care is the best intervention to prevent complications or to detect them early, to minimize the harm to both the teen and her fetus. Pregnant adolescents are at great risk for complications such as anemia. Vigorous exercise would not necessarily promote a healthy pregnancy and does not indicate an understanding of the increased risk for an adolescent who is at risk for substance abuse.

D) Pregnant adolescents are at great risk for complications such as pregnancy-induced hypertension, anemia, preterm birth, low-birth-weight infants, and fetal harm from cigarette smoking, alcohol consumption, or the use of street drugs. Early and regular prenatal care is the best intervention to prevent complications or to detect them early, to minimize the harm to both the teen and her fetus. Pregnant adolescents are at great risk for complications such as anemia. Vigorous exercise would not necessarily promote a healthy pregnancy and does not indicate an understanding of the increased risk for an adolescent who is at risk for substance abuse.

Page Ref: 1552

Cognitive Level: Analyzing

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Evaluation

Learning Outcome: 7. Evaluate expected outcomes for women who abuse substances during pregnancy, their newborns, and their family members.

QSEN Competencies: I.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values

- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.4.4 Examine the nursing interventions and expected outcomes for an individual and the family.

8) A young adult pregnant client tells the nurse that she and her husband are going to a 50th wedding anniversary party for her grandparents this weekend. The client asks the nurse if it will be okay to have a few glasses of wine at the party. Which response by the nurse is appropriate?

A) "Drinking a few glasses of wine will not be a problem."

B) "Alcohol during pregnancy can cause the baby to be born without limbs."

C) "Drinking any alcoholic beverages during pregnancy puts your baby at risk for injury."

D) "Wine is acceptable but not hard liquor."

Answer: C

Explanation: A) Drinking any alcohol, no matter what type and what quantity, during pregnancy increases the risk for accidents and damage to the infant. Mothers are encouraged to drink no alcohol at all during pregnancy. Wine can put the mother and fetus at risk as much as hard liquor.

B) Drinking any alcohol, no matter what type and what quantity, during pregnancy increases the risk for accidents and damage to the infant. Mothers are encouraged to drink no alcohol at all during pregnancy. Wine can put the mother and fetus at risk as much as hard liquor.

C) Drinking any alcohol, no matter what type and what quantity, during pregnancy increases the risk for accidents and damage to the infant. Mothers are encouraged to drink no alcohol at all during pregnancy. Wine can put the mother and fetus at risk as much as hard liquor.

D) Drinking any alcohol, no matter what type and what quantity, during pregnancy increases the risk for accidents and damage to the infant. Mothers are encouraged to drink no alcohol at all during pregnancy. Wine can put the mother and fetus at risk as much as hard liquor.

Page Ref: 1552-1553

Cognitive Level: Applying

Client Need: Physiological Integrity

Client Need Sub: Reduction of Risk Potential

Nursing Process: Implementation

Learning Outcome: 5. Summarize therapies used by interdisciplinary teams in the collaborative care of women who abuse substances during pregnancy, their newborns, and their family members.

QSEN Competencies: I.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.4.2 Identify independent and collaborative therapies used by interdisciplinary teams.

9) A nurse is caring for a client who is pregnant and requires IV antibiotic therapy for treatment of pyelonephritis. Prior to administering the medication, the nurse discovers the medication is Category B for pregnancy. When planning care for this client, which will the nurse take into consideration regarding this medication?

A) Controlled studies in women have demonstrated no associated fetal risk.

B) There have been no controlled studies in women in particular, but controlled human studies have failed to demonstrate a risk.

C) Animal studies show teratogenic effects, but no controlled studies in women are available.

D) Evidence of human fetal risk exists, but the benefits of the drug in certain situations are thought to outweigh the risks.

Answer: B

Explanation: A) To provide information for caregivers and clients, the U.S. Food and Drug Administration (FDA) has developed a classification system for all medications administered during pregnancy. This system can be used to help determine the risk of prenatal substance exposure from use of legal medications whether they are abused or prescribed by a physician. In Category C, there have been no controlled studies in women in particular, but controlled human studies have failed to demonstrate a risk. The other choices are for additional classifications, not Category C.

B) To provide information for caregivers and clients, the U.S. Food and Drug Administration (FDA) has developed a classification system for all medications administered during pregnancy. This system can be used to help determine the risk of prenatal substance exposure from use of legal medications whether they are abused or prescribed by a physician. In Category C, there have been no controlled studies in women in particular, but controlled human studies have failed to demonstrate a risk. The other choices are for additional classifications, not Category C.

C) To provide information for caregivers and clients, the U.S. Food and Drug Administration (FDA) has developed a classification system for all medications administered during pregnancy. This system can be used to help determine the risk of prenatal substance exposure from use of legal medications whether they are abused or prescribed by a physician. In Category C, there have been no controlled studies in women in particular, but controlled human studies have failed to demonstrate a risk. The other choices are for additional classifications, not Category C.

D) To provide information for caregivers and clients, the U.S. Food and Drug Administration (FDA) has developed a classification system for all medications administered during pregnancy. This system can be used to help determine the risk of prenatal substance exposure from use of legal medications whether they are abused or prescribed by a physician. In Category C, there have been no controlled studies in women in particular, but controlled human studies have failed to demonstrate a risk. The other choices are for additional classifications, not Category C.

Page Ref: 1555

Cognitive Level: Applying

Client Need: Physiological Integrity

Client Need Sub: Pharmacological and Parenteral Therapies

Nursing Process: Planning

Learning Outcome: 3. Illustrate the nursing process in providing culturally competent care across the life span for individuals who abuse substances during pregnancy.

QSEN Competencies: I.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values

- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.4.4 Examine the nursing interventions and expected outcomes for an individual and the family.

10) A nurse is caring for a newborn who is being treated in the newborn intensive care unit (NICU) due to complications from exposure to illicit drugs in utero. The newborn has microcephaly, multiple cerebral infarcts and is inconsolable with a high-pitched cry. Which illicit drug is likely to blame for the newborn's symptoms?

- A) Marijuana
- B) PCP
- C) Cocaine
- D) LSD

Answer: C

Explanation: A) The newborn is likely showing symptoms of cocaine withdrawal. Although the other choices have been linked to fetal manifestations, they do not match the clinical manifestations that the newborn is displaying.

B) The newborn is likely showing symptoms of cocaine withdrawal. Although the other choices have been linked to fetal manifestations, they do not match the clinical manifestations that the newborn is displaying.

C) The newborn is likely showing symptoms of cocaine withdrawal. Although the other choices have been linked to fetal manifestations, they do not match the clinical manifestations that the newborn is displaying.

D) The newborn is likely showing symptoms of cocaine withdrawal. Although the other choices have been linked to fetal manifestations, they do not match the clinical manifestations that the newborn is displaying.

Page Ref: 1553-1554

Cognitive Level: Analyzing

Client Need: Physiological Integrity

Client Need Sub: Physiological Adaptation

Nursing Process: Assessment

Learning Outcome: 1. Describe the pathophysiology, etiology, clinical manifestations, and direct and indirect effects of prenatal substance use on both the mother and the fetus.

QSEN Competencies: III.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.4.1 Differentiate the pathophysiology, etiology, risk factors, prevention, and clinical manifestations.

11) The nurse is providing care to a pregnant client during a prenatal visit. The nurse suspects that the client has used cocaine. Which clinical manifestations support the nurse's suspicion? Select all that apply.

- A) Increased appetite
- B) Pinpoint pupils
- C) Muscle jerks
- D) Hypertension
- E) Bradycardia

Answer: C, D

Explanation: A) Acute cocaine intoxication manifests as muscle jerking, hypertension, decreased appetite, dilated pupils, and tachycardia.

B) Acute cocaine intoxication manifests as muscle jerking, hypertension, decreased appetite, dilated pupils, and tachycardia.

C) Acute cocaine intoxication manifests as muscle jerking, hypertension, decreased appetite, dilated pupils, and tachycardia.

D) Acute cocaine intoxication manifests as muscle jerking, hypertension, decreased appetite, dilated pupils, and tachycardia.

E) Acute cocaine intoxication manifests as muscle jerking, hypertension, decreased appetite, dilated pupils, and tachycardia.

Page Ref: 1553-1554

Cognitive Level: Applying

Client Need: Physiological Integrity

Client Need Sub: Physiological Adaptation

Nursing Process: Assessment

Learning Outcome: 1. Describe the pathophysiology, etiology, clinical manifestations, and direct and indirect effects of prenatal substance use on both the mother and the fetus.

QSEN Competencies: III.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.4.1 Differentiate the pathophysiology, etiology, risk factors, prevention, and clinical manifestations.

Exemplar 22.4 Substance Abuse

1) The nurse is caring for a client who is diagnosed with a cocaine addiction. For which additional disorder should the nurse assess this client?

- A) Anxiety
- B) Diabetes
- C) Weight gain
- D) Kidney stones

Answer: A

Explanation: A) Anxiety and depressive disorders frequently occur with substance abuse. More than 90% of individuals who commit suicide have a depressive or substance abuse disorder.

Weight gain, diabetes, and kidney stones are not linked to substance abuse.

B) Anxiety and depressive disorders frequently occur with substance abuse. More than 90% of individuals who commit suicide have a depressive or substance abuse disorder. Weight gain, diabetes, and kidney stones are not linked to substance abuse.

C) Anxiety and depressive disorders frequently occur with substance abuse. More than 90% of individuals who commit suicide have a depressive or substance abuse disorder. Weight gain, diabetes, and kidney stones are not linked to substance abuse.

D) Anxiety and depressive disorders frequently occur with substance abuse. More than 90% of individuals who commit suicide have a depressive or substance abuse disorder. Weight gain, diabetes, and kidney stones are not linked to substance abuse.

Page Ref: 1560

Cognitive Level: Applying

Client Need: Physiological Integrity

Client Need Sub: Reduction of Risk Potential

Nursing Process: Assessment

Learning Outcome: 1. Describe the pathophysiology, etiology, clinical manifestations, and direct and indirect causes of substance abuse.

QSEN Competencies: III.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.5.1 Differentiate the pathophysiology, etiology, risk factors, prevention, and clinical manifestations.

2) A nursing instructor is teaching a class about the role of dopamine in substance abuse. Which student statement indicates appropriate understanding?

- A) "The dopamine D(1) and dopamine D(2) receptors are responsible for co-occurring disorders."
- B) "Dopamine increases opioid transmission, and this reinforces the cycle of substance abuse."
- C) "Dopamine causes changes in brain neurotransmission that enhance the cycle of substance abuse."
- D) "The dopamine D(3) receptor is involved in drug-seeking behaviors."

Answer: D

Explanation: A) Although most studies have focused on the role of dopamine D(1) and dopamine D(2) receptors in sustaining the addictive danger of drugs, recent studies also have shown that the dopamine D(3) receptor is involved in drug-seeking behavior. Ethanol, not dopamine, increases opioid transmission and reinforces the cycle of substance abuse. Dopamine does not cause changes in brain neurotransmission that enhance the cycle of substance abuse. D(1) and D(2) receptors are not responsible for co-occurring disorders.

B) Although most studies have focused on the role of dopamine D(1) and dopamine D(2) receptors in sustaining the addictive danger of drugs, recent studies also have shown that the dopamine D(3) receptor is involved in drug-seeking behavior. Ethanol, not dopamine, increases opioid transmission and reinforces the cycle of substance abuse. Dopamine does not cause changes in brain neurotransmission that enhance the cycle of substance abuse. D(1) and D(2) receptors are not responsible for co-occurring disorders.

C) Although most studies have focused on the role of dopamine D(1) and dopamine D(2) receptors in sustaining the addictive danger of drugs, recent studies also have shown that the dopamine D(3) receptor is involved in drug-seeking behavior. Ethanol, not dopamine, increases opioid transmission and reinforces the cycle of substance abuse. Dopamine does not cause changes in brain neurotransmission that enhance the cycle of substance abuse. D(1) and D(2) receptors are not responsible for co-occurring disorders.

D) Although most studies have focused on the role of dopamine D(1) and dopamine D(2) receptors in sustaining the addictive danger of drugs, recent studies also have shown that the dopamine D(3) receptor is involved in drug-seeking behavior. Ethanol, not dopamine, increases opioid transmission and reinforces the cycle of substance abuse. Dopamine does not cause changes in brain neurotransmission that enhance the cycle of substance abuse. D(1) and D(2) receptors are not responsible for co-occurring disorders.

Page Ref: 1560

Cognitive Level: Analyzing

Client Need: Physiological Integrity

Client Need Sub: Physiological Adaptation

Nursing Process: Evaluation

Learning Outcome: 1. Describe the pathophysiology, etiology, clinical manifestations, and direct and indirect causes of substance abuse.

QSEN Competencies: III.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and

quality and safe patient care

MNL Learning Outcome: 23.5.1 Differentiate the pathophysiology, etiology, risk factors, prevention, and clinical manifestations.

3) A college student is incoherent after taking "downers with beer." For which health problem should the nurse observe in this client?

- A) Hallucinations
- B) Respiratory depression
- C) Seizure activity
- D) Signs of withdrawal

Answer: B

Explanation: A) Downers are central nervous system depressants. Barbiturates and alcohol are a lethal combination. The client who has ingested both items is at risk for varying degrees of sedation, up to coma and death. Seizure activity, signs of withdrawal, and signs of hallucinations do not pose as great a risk for this client as respiratory depression.

B) Downers are central nervous system depressants. Barbiturates and alcohol are a lethal combination. The client who has ingested both items is at risk for varying degrees of sedation, up to coma and death. Seizure activity, signs of withdrawal, and signs of hallucinations do not pose as great a risk for this client as respiratory depression.

C) Downers are central nervous system depressants. Barbiturates and alcohol are a lethal combination. The client who has ingested both items is at risk for varying degrees of sedation, up to coma and death. Seizure activity, signs of withdrawal, and signs of hallucinations do not pose as great a risk for this client as respiratory depression.

D) Downers are central nervous system depressants. Barbiturates and alcohol are a lethal combination. The client who has ingested both items is at risk for varying degrees of sedation, up to coma and death. Seizure activity, signs of withdrawal, and signs of hallucinations do not pose as great a risk for this client as respiratory depression.

Page Ref: 1563

Cognitive Level: Analyzing

Client Need: Physiological Integrity

Client Need Sub: Reduction of Risk Potential

Nursing Process: Assessment

Learning Outcome: 2. Identify risk factors associated with substance abuse.

QSEN Competencies: III.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.5.1 Differentiate the pathophysiology, etiology, risk factors, prevention, and clinical manifestations.

4) The nurse is completing a health history with an adolescent client and determines the client would benefit from teaching about substance abuse. Which client statements caused the nurse to come to this conclusion?

Select all that apply.

- A) "I drink alcohol with my friends on the weekends."
- B) "I smoke cigarettes on a daily basis."
- C) "I use my seat belt every time I ride in a car."
- D) "I became sexually active at the age of 13."
- E) "I get all A's and B's in school."

Answer: A, B, D

Explanation: A) Early sexual activity, smoking cigarettes, and drinking alcohol are all risk factors for teenage substance abuse. Getting good grades and wearing a seat belt are not risk factors for substance abuse.

B) Early sexual activity, smoking cigarettes, and drinking alcohol are all risk factors for teenage substance abuse. Getting good grades and wearing a seat belt are not risk factors for substance abuse.

C) Early sexual activity, smoking cigarettes, and drinking alcohol are all risk factors for teenage substance abuse. Getting good grades and wearing a seat belt are not risk factors for substance abuse.

D) Early sexual activity, smoking cigarettes, and drinking alcohol are all risk factors for teenage substance abuse. Getting good grades and wearing a seat belt are not risk factors for substance abuse.

E) Early sexual activity, smoking cigarettes, and drinking alcohol are all risk factors for teenage substance abuse. Getting good grades and wearing a seat belt are not risk factors for substance abuse.

Page Ref: 1567

Cognitive Level: Analyzing

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Assessment

Learning Outcome: 3. Illustrate the nursing process in providing culturally competent care across the life span for individuals with substance abuse disorders.

QSEN Competencies: I.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and

in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.5.3 Summarize assessment findings in clients across the life span.

5) A nurse is concerned about potential substance abuse by a coworker. Which of the coworker's behaviors would place the clients on the unit at risk for injury?

- A) The nurse in question frequently volunteers to give medications to clients.
- B) The nurse in question prefers not to be the "medication nurse" on the shift.
- C) The nurse in question declines to take scheduled breaks.
- D) The nurse in question frequently requests the largest client care assignment for the shift.

Answer: A

Explanation: A) Frequently volunteering to give medications or having excessive medication wasting could be a sign that a nurse is using or diverting drugs. The nurse who is unable or unwilling to manage a large client care assignment or who requests to administer medications could be a substance abuser. Taking frequent or lengthy breaks might signal substance abuse.

B) Frequently volunteering to give medications or having excessive medication wasting could be a sign that a nurse is using or diverting drugs. The nurse who is unable or unwilling to manage a large client care assignment or who requests to administer medications could be a substance abuser. Taking frequent or lengthy breaks might signal substance abuse.

C) Frequently volunteering to give medications or having excessive medication wasting could be a sign that a nurse is using or diverting drugs. The nurse who is unable or unwilling to manage a large client care assignment or who requests to administer medications could be a substance abuser. Taking frequent or lengthy breaks might signal substance abuse.

D) Frequently volunteering to give medications or having excessive medication wasting could be a sign that a nurse is using or diverting drugs. The nurse who is unable or unwilling to manage a large client care assignment or who requests to administer medications could be a substance abuser. Taking frequent or lengthy breaks might signal substance abuse.

Page Ref: 1561-1562

Cognitive Level: Analyzing

Client Need: Safe and Effective Care Environment

Client Need Sub: Safety and Infection Control

Nursing Process: Evaluation

Learning Outcome: 4. Formulate priority nursing diagnoses appropriate for individuals with a substance abuse disorder.

QSEN Competencies: I.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support
- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.5.3 Summarize assessment findings in clients across the life span.

6) The nurse is providing care to a client with alcohol and opioid dependency. A family member states, "I don't understand why Naltrexone treatment is prescribed because it causes a high too, right?" Which response by the nurse is appropriate?

A) "Naltrexone will cause your daughter to become violently ill if she drinks alcohol or abuses drugs."

B) "Naltrexone is less potent than the street drugs your daughter is currently taking and therefore safer."

C) "Naltrexone diminishes the cravings your daughter will feel for alcohol and opioids."

D) "Naltrexone will prevent your daughter from getting drunk when she drinks."

Answer: C

Explanation: A) Naltrexone diminishes the cravings for alcohol and opioids. Disulfiram, not naltrexone, will cause a person to become violently ill when alcohol is consumed.

B) Naltrexone diminishes the cravings for alcohol and opioids. Disulfiram, not naltrexone, will cause a person to become violently ill when alcohol is consumed.

C) Naltrexone diminishes the cravings for alcohol and opioids. Disulfiram, not naltrexone, will cause a person to become violently ill when alcohol is consumed.

D) Naltrexone diminishes the cravings for alcohol and opioids. Disulfiram, not naltrexone, will cause a person to become violently ill when alcohol is consumed.

Page Ref: 1566

Cognitive Level: Applying

Client Need: Physiological Integrity

Client Need Sub: Pharmacological and Parenteral Therapies

Nursing Process: Implementation

Learning Outcome: 6. Plan evidence-based care for individuals with a substance abuse disorder and their families in collaboration with other members of the healthcare team.

QSEN Competencies: III.A.2 Describe EBP to include the components of research evidence, clinical expertise and patient/family values.

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.5.2 Identify independent and collaborative therapies used by interdisciplinary teams.

7) A client who is attending a Narcotics Anonymous (NA) program asks the nurse what the most important initial goal of attending the meetings is. When responding to the client, which will the nurse take into account?

- A) To admit to having a problem
- B) To learn problem-solving skills
- C) To take a moral inventory of self
- D) To make amends to people they have hurt

Answer: A

Explanation: A) The initial outcome for clients in substance abuse programs is to admit they have a problem with drugs or alcohol. Clients will be unable to participate fully in a recovery program until they can admit that they have a substance abuse problem, admit the extent of that problem, and acknowledge how abuse has impacted their lives. Learning problem-solving skills is a later outcome for a substance abuse program. Taking a moral inventory and making amends are the fourth and eighth steps of Narcotics Anonymous and would not be initial outcomes.

B) The initial outcome for clients in substance abuse programs is to admit they have a problem with drugs or alcohol. Clients will be unable to participate fully in a recovery program until they can admit that they have a substance abuse problem, admit the extent of that problem, and acknowledge how abuse has impacted their lives. Learning problem-solving skills is a later outcome for a substance abuse program. Taking a moral inventory and making amends are the fourth and eighth steps of Narcotics Anonymous and would not be initial outcomes.

C) The initial outcome for clients in substance abuse programs is to admit they have a problem with drugs or alcohol. Clients will be unable to participate fully in a recovery program until they can admit that they have a substance abuse problem, admit the extent of that problem, and acknowledge how abuse has impacted their lives. Learning problem-solving skills is a later outcome for a substance abuse program. Taking a moral inventory and making amends are the fourth and eighth steps of Narcotics Anonymous and would not be initial outcomes.

D) The initial outcome for clients in substance abuse programs is to admit they have a problem with drugs or alcohol. Clients will be unable to participate fully in a recovery program until they can admit that they have a substance abuse problem, admit the extent of that problem, and acknowledge how abuse has impacted their lives. Learning problem-solving skills is a later outcome for a substance abuse program. Taking a moral inventory and making amends are the fourth and eighth steps of Narcotics Anonymous and would not be initial outcomes.

Page Ref: 1560

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Implementation

Learning Outcome: 7. Evaluate expected outcomes for individuals with a substance abuse disorder.

QSEN Competencies: I.A.1 Integrate understanding of multiple dimensions of patient centered care:

- patient/family/community preferences, values
- coordination and integration of care
- information, communication, and education
- physical comfort and emotional support

- involvement of family and friends
- transition and continuity

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.5.4 Examine the nursing interventions and expected outcomes for an individual and the family.

8) A client is admitted to the emergency department after overdosing on phencyclidine piperidine (PCP). Based on this actions, which actions are appropriate by the nurse? Select all that apply.

- A) Obtain materials to assist with lavage.
- B) Initiate an IV.
- C) Initiate seizure precautions.
- D) Induce vomiting.
- E) Administer ammonium chloride.

Answer: B, C, E

Explanation: A) The client has taken an overdose of phencyclidine piperidine (PCP), which can produce an adrenaline-like response, or "speed" reaction. PCP overdose is associated with possible hypertensive crisis, respiratory arrest, hyperthermia, and seizures. The client will require an IV line. The client will need to have seizure precautions such as padded side rails initiated. The client may also be given ammonium chloride to acidify the urine to help excrete the drug. Vomiting is induced for overdoses of alcohol, barbiturates, and benzodiazepines. Lavage would be an inappropriate treatment for inhalation of any substance. Narcan is a narcotic antagonist administered for opiate overdose.

B) The client has taken an overdose of phencyclidine piperidine (PCP), which can produce an adrenaline-like response, or "speed" reaction. PCP overdose is associated with possible hypertensive crisis, respiratory arrest, hyperthermia, and seizures. The client will require an IV line. The client will need to have seizure precautions such as padded side rails initiated. The client may also be given ammonium chloride to acidify the urine to help excrete the drug. Vomiting is induced for overdoses of alcohol, barbiturates, and benzodiazepines. Lavage would be an inappropriate treatment for inhalation of any substance. Narcan is a narcotic antagonist administered for opiate overdose.

C) The client has taken an overdose of phencyclidine piperidine (PCP), which can produce an adrenaline-like response, or "speed" reaction. PCP overdose is associated with possible hypertensive crisis, respiratory arrest, hyperthermia, and seizures. The client will require an IV line. The client will need to have seizure precautions such as padded side rails initiated. The client may also be given ammonium chloride to acidify the urine to help excrete the drug. Vomiting is induced for overdoses of alcohol, barbiturates, and benzodiazepines. Lavage would be an inappropriate treatment for inhalation of any substance. Narcan is a narcotic antagonist administered for opiate overdose.

D) The client has taken an overdose of phencyclidine piperidine (PCP), which can produce an adrenaline-like response, or "speed" reaction. PCP overdose is associated with possible hypertensive crisis, respiratory arrest, hyperthermia, and seizures. The client will require an IV line. The client will need to have seizure precautions such as padded side rails initiated. The client may also be given ammonium chloride to acidify the urine to help excrete the drug. Vomiting is induced for overdoses of alcohol, barbiturates, and benzodiazepines. Lavage would be an inappropriate treatment for inhalation of any substance. Narcan is a narcotic antagonist administered for opiate overdose.

E) The client has taken an overdose of phencyclidine piperidine (PCP), which can produce an adrenaline-like response, or "speed" reaction. PCP overdose is associated with possible hypertensive crisis, respiratory arrest, hyperthermia, and seizures. The client will require an IV line. The client will need to have seizure precautions such as padded side rails initiated. The client may also be given ammonium chloride to acidify the urine to help excrete the drug. Vomiting is induced for overdoses of alcohol, barbiturates, and benzodiazepines. Lavage would be an inappropriate treatment for inhalation of any substance. Narcan is a narcotic antagonist administered for opiate overdose.

Page Ref: 1567

Cognitive Level: Analyzing

Client Need: Physiological Integrity

Client Need Sub: Reduction of Risk Potential

Nursing Process: Implementation

Learning Outcome: 5. Summarize therapies used by interdisciplinary teams in the collaborative care of individuals with a substance abuse disorder.

QSEN Competencies: I.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.5.2 Identify independent and collaborative therapies used by interdisciplinary teams.

9) After an assessment of a new client, a nursing student expresses a belief that drug addiction is not a real illness, as these clients "did it to themselves." Which response by the staff nurse is appropriate?

A) "Sometimes a client doesn't show much effort."

B) "We are legally obligated to provide care."

C) "It is important to remain nonjudgmental when caring for any client, even a drug addict."

D) "You are right. I don't know why we bother."

Answer: C

Explanation: A) Nurses must provide a nonjudgmental attitude with their clients in order to promote trust and respect. Even if a client is not currently making much effort toward management of addiction disorders, the development of a trusting relationship with the nurse helps to set the stage for movement toward recovery in the future. Although it is true that nurses are legally obligated to provide care, this response is not client-focused and is therefore inappropriate.

B) Nurses must provide a nonjudgmental attitude with their clients in order to promote trust and respect. Even if a client is not currently making much effort toward management of addiction disorders, the development of a trusting relationship with the nurse helps to set the stage for movement toward recovery in the future. Although it is true that nurses are legally obligated to provide care, this response is not client-focused and is therefore inappropriate.

C) Nurses must provide a nonjudgmental attitude with their clients in order to promote trust and respect. Even if a client is not currently making much effort toward management of addiction disorders, the development of a trusting relationship with the nurse helps to set the stage for movement toward recovery in the future. Although it is true that nurses are legally obligated to provide care, this response is not client-focused and is therefore inappropriate.

D) Nurses must provide a nonjudgmental attitude with their clients in order to promote trust and respect. Even if a client is not currently making much effort toward management of addiction disorders, the development of a trusting relationship with the nurse helps to set the stage for movement toward recovery in the future. Although it is true that nurses are legally obligated to provide care, this response is not client-focused and is therefore inappropriate.

Page Ref: 1567

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Implementation

Learning Outcome: 6. Plan evidence-based care for individuals with a substance abuse disorder and their families in collaboration with other members of the healthcare team.

QSEN Competencies: III.A.2 Describe EBP to include the components of research evidence, clinical expertise and patient/family values.

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.5.2 Identify independent and collaborative therapies used by interdisciplinary teams.

10) A nurse is caring for a client who displays addiction behavior toward the use of alcohol. The client states to the nurse, "I have been in jail twice for driving under the influence." When planning care for this client, which behavioral therapy is most appropriate?

- A) Positive reinforcement
- B) Negative reinforcement
- C) Positive punishment
- D) Negative punishment

Answer: C

Explanation: A) Consequences that lead to a decrease in undesirable behavior are referred to as punishment. Positive punishment is the addition of a negative consequence if the undesirable behavior occurs; for example, the addict who drives under the influence is jailed or fined.

Negative punishment is the removal of a positive reward if the undesirable behavior occurs; for example, the addict who does not show up for work loses his job. Consequences that lead to an increase in a particular behavior are referred to as reinforcement. Positive reinforcement provides a reward for the desired behavior, such as the pleasant sensation, or high, that comes from the use of a substance. Negative reinforcement removes a negative stimulus to increase the chances that the desired behavior will occur. An example of negative reinforcement is when the family of an addict refuses to support the behavior that results from use of the substance.

B) Consequences that lead to a decrease in undesirable behavior are referred to as punishment. Positive punishment is the addition of a negative consequence if the undesirable behavior occurs; for example, the addict who drives under the influence is jailed or fined. Negative punishment is the removal of a positive reward if the undesirable behavior occurs; for example, the addict who does not show up for work loses his job. Consequences that lead to an increase in a particular behavior are referred to as reinforcement. Positive reinforcement provides a reward for the desired behavior, such as the pleasant sensation, or high, that comes from the use of a substance. Negative reinforcement removes a negative stimulus to increase the chances that the desired behavior will occur. An example of negative reinforcement is when the family of an addict refuses to support the behavior that results from use of the substance.

C) Consequences that lead to a decrease in undesirable behavior are referred to as punishment. Positive punishment is the addition of a negative consequence if the undesirable behavior occurs; for example, the addict who drives under the influence is jailed or fined. Negative punishment is the removal of a positive reward if the undesirable behavior occurs; for example, the addict who does not show up for work loses his job. Consequences that lead to an increase in a particular behavior are referred to as reinforcement. Positive reinforcement provides a reward for the desired behavior, such as the pleasant sensation, or high, that comes from the use of a substance. Negative reinforcement removes a negative stimulus to increase the chances that the desired behavior will occur. An example of negative reinforcement is when the family of an addict refuses to support the behavior that results from use of the substance.

D) Consequences that lead to a decrease in undesirable behavior are referred to as punishment. Positive punishment is the addition of a negative consequence if the undesirable behavior occurs; for example, the addict who drives under the influence is jailed or fined. Negative punishment is the removal of a positive reward if the undesirable behavior occurs; for example, the addict who does not show up for work loses his job. Consequences that lead to an increase in a particular behavior are referred to as reinforcement. Positive reinforcement provides a reward for the desired behavior, such as the pleasant sensation, or high, that comes from the use of a substance. Negative reinforcement removes a negative stimulus to increase the chances that the desired behavior will occur. An example of negative reinforcement is when the family of an addict refuses to support the behavior that results from use of the substance.

Page Ref: 1529

Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Planning

Learning Outcome: 5. Summarize therapies used by interdisciplinary teams in the collaborative care of individuals with a substance abuse disorder.

QSEN Competencies: I.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.5.2 Identify independent and collaborative therapies used by interdisciplinary teams.

11) A nurse manager in the intensive care unit (ICU) notes a pattern for a staff nurse who excessively "wastes" narcotics, and the manager suspects the staff nurse may be impaired. Which clinical situation may have contributed to the staff nurse's problem?

A) Caring for clients who require IV medications

B) Easy access to prescription drugs

C) Easy access to client care areas

D) Caring for clients who require numerous oral medications

Answer: B

Explanation: A) Easy access to prescription drugs presents an at-risk situation for nurses who abuse substances. The other situations are common for all nurses and do not necessarily pose an increased risk for substance abuse.

B) Easy access to prescription drugs presents an at-risk situation for nurses who abuse substances. The other situations are common for all nurses and do not necessarily pose an increased risk for substance abuse.

C) Easy access to prescription drugs presents an at-risk situation for nurses who abuse substances. The other situations are common for all nurses and do not necessarily pose an increased risk for substance abuse.

D) Easy access to prescription drugs presents an at-risk situation for nurses who abuse substances. The other situations are common for all nurses and do not necessarily pose an

increased risk for substance abuse.

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Cognitive Level: Applying

Client Need: Psychosocial Integrity

Client Need Sub:

Nursing Process: Assessment

Learning Outcome: 2. Identify risk factors associated with substance abuse.

QSEN Competencies: III.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.5.1 Differentiate the pathophysiology, etiology, risk factors, prevention, and clinical manifestations.

12) A nurse working in the emergency department is caring for a client who has overdosed on cocaine. The nurse receives a prescription to administer an antipsychotic medication from the healthcare provider. Which symptom would this medication help to manage?

Select all that apply.

- A) Alkaline urine
- B) Decreased deep tendon reflexes
- C) Hyperpyrexia
- D) Respiratory distress
- E) CNS depression

Answer: C, D

Explanation: A) Antipsychotic medications are used in the treatment of clients who have overdosed on crack or cocaine. These medications help to manage the hyperpyrexia, respiratory distress, acidic urine, and convulsions associated with the overdose. CNS depression and decreased deep tendon reflexes do not occur in acute cocaine overdose.

B) Antipsychotic medications are used in the treatment of clients who have overdosed on crack or cocaine. These medications help to manage the hyperpyrexia, respiratory distress, acidic urine, and convulsions associated with the overdose. CNS depression and decreased deep tendon reflexes do not occur in acute cocaine overdose.

C) Antipsychotic medications are used in the treatment of clients who have overdosed on crack or cocaine. These medications help to manage the hyperpyrexia, respiratory distress, acidic urine, and convulsions associated with the overdose. CNS depression and decreased deep tendon reflexes do not occur in acute cocaine overdose.

D) Antipsychotic medications are used in the treatment of clients who have overdosed on crack or cocaine. These medications help to manage the hyperpyrexia, respiratory distress, acidic urine, and convulsions associated with the overdose. CNS depression and decreased deep tendon reflexes do not occur in acute cocaine overdose.

E) Antipsychotic medications are used in the treatment of clients who have overdosed on crack or cocaine. These medications help to manage the hyperpyrexia, respiratory distress, acidic urine, and convulsions associated with the overdose. CNS depression and decreased deep tendon reflexes do not occur in acute cocaine overdose.

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Cognitive Level: Applying

Client Need: Physiological Integrity

Client Need Sub: Pharmacological and Parenteral Therapies

Nursing Process: Planning

Learning Outcome: 5. Summarize therapies used by interdisciplinary teams in the collaborative care of individuals with a substance abuse disorder.

QSEN Competencies: I.A.1 Demonstrate knowledge of basic scientific methods and processes

AACN Essential Competencies: IX.3 Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across lifespan, and in all healthcare settings

NLN Competencies: Knowledge and Science: Relationships between knowledge/science and quality and safe patient care

MNL Learning Outcome: 23.5.2 Identify independent and collaborative therapies used by interdisciplinary teams.