Psychiatric Mental Health Nursing From Suffering to Hope 1st Edition Potter Test Bank

Full Download: http://testbanklive.com/download/psychiatric-mental-health-nursing-from-suffering-to-hope-1st-edition-potter-test

Psychiatric Mental Health Nursing (Potter) Chapter 2 Past, Present, Future

- 1) What would the nurse recognize as the impact that Florence Nightingale has had on the role of the nurse in psychiatric-mental health nursing?
- 1. Nightingale emphasized the cultural environment for healing.
- 2. Nightingale developed the idea of the therapeutic relationship.
- 3. Nightingale focused her ideas on nursing education rather than direct patient care.
- 4. Nightingale was among the first to note the influence of nurses has psychological components. Answer: 4

Explanation: 4. Nightingale was among the first to note that the influence of nurses on their patients goes beyond physical care and has psychological and social components; hence, the value of making her famous evening rounds to say goodnight. In addition to being the first to note the influence of nurses on psychological components, Nightingale emphasize the physical, not cultural, environment for healing. Nightingale focused her ideas on both direct patient care and nursing education. Hildegard Peplau is credited with theory related to the therapeutic nurse-patient relationship.

Page Ref: 26, 31

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Analysis

Learning Outcome: Discuss the role of nurses throughout history in forming and reforming the care of individuals with mental illness.

MNL LO: 1.2.3. Distinguish among the different psychosocial theories about the development of mental illness.

- 2) Which action by the psychiatric-mental health nurse best indicates use of Hildegard Peplau's nursing theory when caring for a patient with mental illness?
- 1. Establishing a therapeutic nurse-patient relationship
- 2. Assessing patient interactions with the environment
- 3. Intervening to enhance the patient's abilities to perform self-care
- 4. Evaluating the effectiveness of the patient's coping and adaptation skills

Explanation: 1. Peplau conceptualized the one-to-one nurse-patient relationship as one in which the patient can accomplish developmental tasks and practice healthy behaviors. This relationship is best known as the therapeutic nurse-patient relationship. While the additional answer choices are appropriate interventions for the psychiatric-mental health nurse, they do not best represent Hildegard Peplau's nursing theory.

Page Ref: 33

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Implementation Learning Outcome: Discuss the role of nurses throughout history in forming and reforming the

care of individuals with mental illness.

MNL LO: 1.2.3. Distinguish among the different psychosocial theories about the development

of mental illness.

- 3) What quality, emphasized by Vincent dePaul in the 17th century, would a psychiatric nurse find important in her practice today?
- 1. Spirituality
- 2. Humility
- 3. Practicality
- 4. Obedience

Answer: 2

Explanation: 2. Although spirituality was considered an important quality, it was not the focus of the treatment promoted by Vincent de Paul. According to de Paul, humility provided a lens for the recognition and acknowledgement of both personal talents and limits. Neither practicality nor obedience were qualities emphasized by de Paul.

Page Ref: 26

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Teaching and Learning

Learning Outcome: Discuss the role of nurses throughout history in forming and reforming the care of individuals with mental illness.

- 4) A nurse is preparing a paper for a conference on mental illness nursing throughout history. How does she present the concept of a *curative point* as a shift in the treatment of the mentally ill?
- 1. It envisioned the possibility of recovery in mental illness.
- 2. It incorporated herbal remedies in the treatment of mental illness.
- 3. It was the first treatment to provide specific treatment interventions.
- 4. It was the first treatment focused on the humane treatment of individuals with mental illness. Answer: 1

Explanation: 1. Although treatment that emphasized a curative point may have had some more humane aspects that were absent from some earlier treatments for mental illness, humane treatment was not the most essential element incorporated in this concept. Belief in a curative point presented the possibility that those with mental illness could actually improve rather than just be maintained. The curative point did not emphasize specific interventions, nor did it advocate specific herbal remedies.

Page Ref: 25

Cognitive Level: Analyzing

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Teaching and Learning

Learning Outcome: Discuss the role of nurses throughout history in forming and reforming the care of individuals with mental illness.

- 5) Which nursing diagnosis does the nurse recognize as the most consistent with the focus of psychiatric nursing care during the 19th century?
- 1. Anxiety
- 2. Self-care deficit
- 3. Altered thought processes
- 4. Ineffective individual coping

Explanation: 2. During the 19th century, psychiatric nurses attended mainly to the physical needs of patients and did not pursue systematic interpersonal work with them. Psychiatric nursing practice was primarily custodial. Nursing care that systematically addresses anxiety, coping, and altered-thought processes did not come about until the mid-20th century.

Page Ref: 33

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Evaluation Learning Outcome: Describe moral therapy, the system of care implemented by nurses in 19th-century asylums.

MNL LO: 1.2.1. Describe the history of mental health treatment.

- 6) Which dimension would the nurse most likely focus on if assessing the patient from primarily a 19th century perspective?
- 1. Spiritual
- 2. Physical
- 3. Social
- 4. Emotional

Answer: 2

Explanation: 2. Until the early to mid-20th century, psychiatric nurses attended primarily to the physical needs of the clients and did not pursue interpersonal work with them. Psychiatric nursing care during this period emphasized a physical environment. More holistic care (including emotional-social-spiritual dimensions) is a product of more recent history.

Page Ref: 33

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Assessment Learning Outcome: Describe moral therapy, the system of care implemented by nurses in 19th-century asylums.

- 7) What essential treatment elements of moral therapy could be considered as components of some current treatments? Select all that apply.
- 1. Kindness
- 2. Medication
- 3. Nutrition
- 4. Bloodletting
- 5. Meaningful activity

Answer: 1, 5

Explanation: 1. Kindness and meaningful activity were critical elements of moral therapy that are important components of some current methods of treatment. Although medication and bloodletting may have been used therapeutically by practitioners of moral therapy, they were secondary modalities. Nutrition was not an important consideration in this treatment.

5. Kindness and meaningful activity were critical elements of moral therapy that are important components of some current methods of treatment. Although medication and bloodletting may have been used therapeutically by practitioners of moral therapy, they were secondary modalities. Nutrition was not an important consideration in this treatment.

Page Ref: 27

Cognitive Level: Analyzing

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Teaching and Learning Learning Outcome: Describe moral therapy, the system of care implemented by nurses in 19th-

century asylums.

- 8) Several nurses are discussing the medicalization of mental health treatment. Which historical figure do they identify as claiming that the physician should be the ultimate authority over moral as well as medical therapy, and that no one should be exempt from the physician's decision?
- 1. Tuke
- 2. Stokes
- 3. de Paul
- 4. Esquirol

Explanation: 4. Jean-Étienne Esquirol, who created one of the most successful private asylums in Paris, believed that physicians should be the undisputed authority in all forms of mental health treatment. Stokes believed that the care of the insane necessitated a consulting rather than a resident physician. Tuke was one of the leaders of the York retreat, which was under the control of lay therapists rather than physicians. Vincent de Paul helped establish a nursing ministry for the insane.

Page Ref: 27

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Teaching and Learning

Learning Outcome: Describe the moral therapy, the system care implemented by nurses in 19th-century asylums.

- 9) In the 19th century, what factors did practitioners who accepted the theory that mental illness was an excess or deficit in excitability see as contributing to mental illness? Select all that apply.
- 1. Education
- 2. Urban life
- 3. Intemperance
- 4. Cerebral hyperemia
- 5. Demonic possession

Answer: 1, 2

Explanation: 1. Following the excitability theory of William Cullen, some thought education to be a major contributing factor in the emergence of insanity. The pace of urban life also contributed to excitability. Intemperance was not related to excitability excesses or deficits. Demonic possession was considered a cause of insanity in earlier eras and, by the 19th century had been replaced by other causative theories. Cerebral hyperemia as a contributing factor was promulgated by 18th century French physicians.

2. Following the excitability theory of William Cullen, some thought education to be a major contributing factor in the emergence of insanity. The pace of urban life also contributed to excitability. Intemperance was not related to excitability excesses or deficits. Demonic possession was considered a cause of insanity in earlier eras and, by the 19th century had been replaced by other causative theories. Cerebral hyperemia as a contributing factor was promulgated by 18th century French physicians.

Page Ref: 28

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Teaching and Learning

Learning Outcome: Identify social beliefs about mental illness in earlier centuries.

- 10) Which religious group of women instituted asylum-based treatment in the United States in order to provide peaceful surroundings for those with mental illness?
- 1. Quakers
- 2. Sisters of Charity
- 3. Daughters of Charity
- 4. Little Sisters of the Sick Poor

Explanation: 2. The Mount Hope Retreat, where people could live in secluded, peaceful natural surroundings, was created and administered by the American Sisters of Charity nurses. The Quakers are not a group of religious women. The Daughters of Charity pioneered asylum-based psychiatric nursing at French hospitals. The Little Sisters of the Sick Poor did not focus on treating the insane.

Page Ref: 28

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Implementation Learning Outcome: Identify social beliefs about mental illness in earlier centuries.

MNL LO: 1.2.1. Describe the history of mental health treatment.

- 11) What documentation was required for hospital admission to the Maryland Hospital for the Insane?
- 1. No documentation
- 2. Certificate of Insanity
- 3. Order of the patient's physician
- 4. Written request of the patient's family

Answer: 2

Explanation: 2. Upon a patient's admission, the admitting nurse had to collect from the patient the certificate of insanity issued by the Court of Competent Jurisdiction or two physicians. Patients could not be admitted without documentation. The order of an individual physician or a family request was not sufficient for admission.

Page Ref: 29

Cognitive Level: Applying

Client Need/Sub: Physiological Integrity: Reduction of Risk Potential

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Implementation Learning Outcome: Identify social beliefs about mental illness in earlier centuries.

- 12) Several nurses were discussing methods of restraint used in the 19th century. What are some of the methods the nurses might have noted? Select all that apply.
- 1. Mitts
- 2. Seclusion
- 3. Strapping
- 4. Hydrotherapy
- 5. Straightjacket

Answer: 1, 2, 3, 5

Explanation: 1. A straightjacket has long arms that can be tied together behind an individual's back to achieve restraint. Mitts are a hand device for restraining the hands of an individual. Hydrotherapy is a form of treatment, not restraint. Seclusion was used with some violent patients. Strapping involves tying patients to a bed or chair.

- 2. A straightjacket has long arms that can be tied together behind an individual's back to achieve restraint. Mitts are a hand device for restraining the hands of an individual. Hydrotherapy is a form of treatment, not restraint. Seclusion was used with some violent patients. Strapping involves tying patients to a bed or chair.
- 3. A straightjacket has long arms that can be tied together behind an individual's back to achieve restraint. Mitts are a hand device for restraining the hands of an individual. Hydrotherapy is a form of treatment, not restraint. Seclusion was used with some violent patients. Strapping involves tying patients to a bed or chair.
- 5. A straightjacket has long arms that can be tied together behind an individual's back to achieve restraint. Mitts are a hand device for restraining the hands of an individual. Hydrotherapy is a form of treatment, not restraint. Seclusion was used with some violent patients. Strapping involves tying patients to a bed or chair.

Page Ref: 30

Cognitive Level: Evaluating

Client Need/Sub: Safe and Effective Care Environment: Safety and Infection Control Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Implementation Learning Outcome: Identify social beliefs about mental illness in earlier centuries.

- 13) What term was acceptable in the 19th century when talking about mental illness that a nurse would not find acceptable today?
- 1. The same terminology is still in use today.
- 2. The term "mentally ill" was used regularly.
- 3. The term "mentally disabled" was frequently used in the 19th century.
- 4. In the 19th century, using the term "insane" was considered acceptable.

Explanation: 4. The term "insane" was considered acceptable to identify people with a variety of disabilities including learning and developmental disabilities, as well as mental health problems. The terms "mentally ill" and "mentally disabled" were not regularly used until the 20th century.

Page Ref: 25

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Implementation Learning Outcome: Compare historic with contemporary psychiatric science and practice. MNL LO: 1.2.1. Describe the history of mental health treatment.

- 14) In a research paper on moral therapy, a nurse wants to examine how the diagnoses in this method of treating mental illness differ from current diagnoses. What are some of the diagnoses she should consider related to the use of moral therapy? Select all that apply.
- 1. Ill health
- 2. Binge eating
- 3. Pecuniary losses
- 4. Family affliction
- 5. Jealousy and pride

Answer: 1, 3, 4, 5

Explanation: 1. William Stokes, a physician who consulted on moral therapy and wrote extensively on its practice, considered major diagnoses to include jealousy and pride, family affliction, pecuniary losses, and ill health. Binge-eating disorder is a diagnosis in the DSM-5.

- 3. William Stokes, a physician who consulted on moral therapy and wrote extensively on its practice, considered major diagnoses to include jealousy and pride, family affliction, pecuniary losses, and ill health. Binge-eating disorder is a diagnosis in the DSM-5.
- 4. William Stokes, a physician who consulted on moral therapy and wrote extensively on its practice, considered major diagnoses to include jealousy and pride, family affliction, pecuniary losses, and ill health. Binge-eating disorder is a diagnosis in the DSM-5.
- 5. William Stokes, a physician who consulted on moral therapy and wrote extensively on its practice, considered major diagnoses to include jealousy and pride, family affliction, pecuniary losses, and ill health. Binge-eating disorder is a diagnosis in the DSM-5.

Page Ref: 28

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Analysis

Learning Outcome: Compare historic with contemporary psychiatric science and practice.

- 15) What practice, implemented by the Sisters of Charity at Mount Hope, served as a resource providing historical information about the treatment provided there?
- 1. Daily notes
- 2. Patient charts
- 3. Treatment plans
- 4. Log of patient outcomes

Explanation: 4. Although there were no charts in which the Sisters recorded daily notes, or treatment plans, they did keep a log that included the name and age of each patient admitted to a facility, the diagnosis, when the patient was discharged, and the outcome of care.

Page Ref: 29

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Analysis Learning Outcome: Compare historic with contemporary psychiatric science and practice.

MNL LO: 1.2.1. Describe the history of mental health treatment.

- 16) Several nurses are discussing the effect of the medicalization of care on nursing patients with mental illness. What statement indicates that the nurses understand this historical trend?
- 1. "Medicalization tended to pull care away from its holistic tradition."
- 2. "Medicalization provided an essential basis for nursing education."
- 3. "Medicalization reflected a diminished interest in psychopathology."
- 4. "Medicalization provided a good understanding of the mind-body connection."

Answer: 1

Explanation: 1. Medicalization served to diminish interest in the mind-body connection and pulled nursing away from its traditional interest in caring for the whole person. With medicalization, nursing training lost some of its focus on nursing as a singular discipline. Psychopathology rather than healing was emphasized with medicalization.

Page Ref: 32

Cognitive Level: Analyzing

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Implementation Learning Outcome: Compare historic with contemporary psychiatric science and practice. MNL LO: 1.2.1. Describe the history of mental health treatment.

- 17) What was a common response during the eras when patients with mental illness were believed to be victims of demonic possession?
- 1. Punishment by stoning
- 2. Shackling in chains
- 3. Burning at the stake
- 4. Treatment with exorcism

Explanation: 2. Patients with mental illness were often placed in chains as restraints. Stoning was frequently used as a punishment for adultery. Burning at the stake was a punishment for heresy and witchcraft. The Catholic Church distinguishes behavior that indicates the need for exorcism from behavior indicating mental illness.

Page Ref: 25

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Assessment Learning Outcome: Summarize what the life of individuals with mental illness was like in earlier centuries.

MNL LO: 1.2.1. Describe the history of mental health treatment.

- 18) What specific condition was considered an indication for bloodletting when patients were diagnosed with mental illness?
- 1. Melancholy
- 2. Excess excitability
- 3. Cerebral dysfunction
- 4. Hereditary weakness

Answer: 2

Explanation: 2. The treatment for melancholy often included stimulants. Excess excitability was often treated with bloodletting or emetics. Symptoms that were attributed to cerebral dysfunction or hereditary predisposition were not usually treated with bloodletting.

Page Ref: 28

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Assessment

Learning Outcome: Summarize what the life of individuals with mental illness was like in earlier centuries.

- 19) A nurse is considering how the Sisters of Charity at Mt. Hope provided treatment for patients with mental illness. What elements of treatment at this facility does she see reflected in modern perspectives and practice? Select all that apply.
- 1. Conversation with the patient
- 2. Respectful and kind treatment
- 3. Provision of recreational activities
- 4. Control of treatment by the nursing staff
- 5. Removal from family and former associates

Answer: 1, 2, 3

Explanation: 1. Current treatment often involves elements of treatment essential at Mt. Hope, including recreational and productive activities, frequent conversations with patients, and respectful and kind treatment. At Mt. Hope, unlike in current practice, the nursing staff was in charge of decisions about patient care. Removal from the home, no longer universally recommended, was considered part of providing a healing environment.

- 2. Current treatment often involves elements of treatment essential at Mt. Hope, including recreational and productive activities, frequent conversations with patients, and respectful and kind treatment. At Mt. Hope, unlike in current practice, the nursing staff was in charge of decisions about patient care. Removal from the home, no longer universally recommended, was considered part of providing a healing environment.
- 3. Current treatment often involves elements of treatment essential at Mt. Hope, including recreational and productive activities, frequent conversations with patients, and respectful and kind treatment. At Mt. Hope, unlike in current practice, the nursing staff was in charge of decisions about patient care. Removal from the home, no longer universally recommended, was considered part of providing a healing environment.

Page Ref: 29

Cognitive Level: Analyzing

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Implementation Learning Outcome: Summarize what the life of individuals with mental illness was like in earlier centuries.

- 20) A nurse was asked to identify the most preferred location for addressing mental illness during the 19th century. What is the nurse's best response?
- 1. Home
- 2. Asylums
- 3. Hospitals
- 4. Sanitariums

Explanation: 2. During the 17th and 18th century, asylums were an attempt to provide humane treatment for the mentally ill, but by the 19th century they were intended more for restraint. Asylums were the preferred means of housing those with mental illness in the 19th century. Prior to the 19th century, the mentally ill were frequently housed in hospitals that treated all illnesses. The mentally ill, particularly those who were violent, were frequently institutionalized and removed from the home. Sanitariums were usually restricted to the wealthy.

Page Ref: 30

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Implementation Learning Outcome: Summarize what the life of individuals with mental illness was like in earlier centuries.

- 21) A nurse who is considering theories that guide the practice of psychiatric nursing wants to base her interactions with patients on the theory of interpersonal relations. Whose works might she consult in order to learn more?
- 1. Hilda Peplau
- 2. Karl Menninger
- 3. William Stokes
- 4. Florence Nightingale

Explanation: 1. Peplau's work on interpersonal relations and anxiety became foundational to nursing practice in general, and psychiatric-mental health nursing in particular. Karl Menninger worked to reform and reorganize psychiatry. William Stokes promoted moral therapy.

Nightingale created a model for training nurses.

Page Ref: 33

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Assessment

Learning Outcome: Examine the role of psychiatric nurses in health reform and social justice related to the care of individuals suffering with mental illness.

MNL LO: 1.2.1. Describe the history of mental health treatment.

- 22) Which nursing model was developed by Catherine McCauley in 19th century Ireland?
- 1. Careful nursing
- 2. Tidal model of care
- 3. Healing environment
- 4. Curative point nursing

Answer: 1

Explanation: 1. "Careful nursing" was a 19th-century model of nursing care developed in Ireland by Catherine McCauley. This model provided an early contribution to holistic psychiatric mental health nursing. Matilda Coskery, a Sisters of Charity nurse, wrote about the "curative point" in the care of clients. The Sisters of Charity also promoted the idea of a healing environment. Dr. Phil Barker, a British psychiatric nurse, is known internationally for creating the Tidal Model of Care, a philosophical approach to mental health.

Page Ref: 31

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Analysis

Learning Outcome: Examine the role of psychiatric nurses in health reform and social justice related to the care of individuals suffering with mental illness.

- 23) Based on the work of Florence Nightingale, what distinguishes nurses from nursing attendants?
- 1. Kindness
- 2. Training and education
- 3. Ability to use herbal remedies
- 4. Belief in the bio-medical model

Explanation: 2. Nursing traditionally uses a holistic model of care. Nightingale emphasized training and education as the foundation of professional nursing. Kindness is an element of many models of nursing care but does not distinguish nurses from other care providers. Herbal remedies are not a specialty particular to nurses.

Page Ref: 32

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Teaching and Learning

Learning Outcome: Examine the role of psychiatric nurses in health reform and social justice related to the care of individuals suffering with mental illness.

MNL LO: 1.2.1. Describe the history of mental health treatment.

- 24) What was the treatment model used by Matilda Coskery?
- 1. Moral therapy
- 2. Biomedical treatment
- 3. Interpersonal therapy
- 4. Brief solution-focused therapy

Answer: 1

Explanation: 1. Matilda Coskery was a practitioner of moral therapy and administered the Mount Hope Retreat. Biomedical therapy reflects the position that nurses are adjuncts to physician directed treatment. Interpersonal therapy was promoted by Hilda Peplau. Brief solution-focused therapy is a modality recently used by some advanced nurse-practitioners.

Page Ref: 29

Cognitive Level: Remembering

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Implementation Learning Outcome: Examine the role of psychiatric nurses in health reform and social justice related to the care of individuals suffering with mental illness.

- 25) Nursing theory provides guidance for a nurse who is expected to perform what activity? Select all that apply.
- 1. Generate goals
- 2. Plan interventions
- 3. Organize assessment data
- 4. Generate nursing actions
- 5. Diagnose patient conditions

Answer: 1, 2, 3, 4

Explanation: 1. Nurses use theories to assist them to organize and think about human responses and assessment data in meaningful ways. Nursing theories guide nurses to generate goals that have meaning for patients and reflect desired outcomes to promote health and well-being. Nurses do not diagnose patient conditions; rather, this is the role of the health care provider. Nurses use theories to plan interventions that address human responses as they interact with both the internal and external environments. Nursing theories also provide guidance in the focus for nursing actions that promote health as defined by each theory.

- 2. Nurses use theories to assist them to organize and think about human responses and assessment data in meaningful ways. Nursing theories guide nurses to generate goals that have meaning for patients and reflect desired outcomes to promote health and well-being. Nurses do not diagnose patient conditions; rather, this is the role of the health care provider. Nurses use theories to plan interventions that address human responses as they interact with both the internal and external environments. Nursing theories also provide guidance in the focus for nursing actions that promote health as defined by each theory.
- 3. Nurses use theories to assist them to organize and think about human responses and assessment data in meaningful ways. Nursing theories guide nurses to generate goals that have meaning for patients and reflect desired outcomes to promote health and well-being. Nurses do not diagnose patient conditions; rather, this is the role of the health care provider. Nurses use theories to plan interventions that address human responses as they interact with both the internal and external environments. Nursing theories also provide guidance in the focus for nursing actions that promote health as defined by each theory.
- 4. Nurses use theories to assist them to organize and think about human responses and assessment data in meaningful ways. Nursing theories guide nurses to generate goals that have meaning for patients and reflect desired outcomes to promote health and well-being. Nurses do not diagnose patient conditions; rather, this is the role of the health care provider. Nurses use theories to plan interventions that address human responses as they interact with both the internal and external environments. Nursing theories also provide guidance in the focus for nursing actions that promote health as defined by each theory.

Page Ref: 32-34

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Implementation Learning Outcome: Assess how nurses have created and cultivated healing environments that contribute to the healing of patients with mental illness.

- 26) Which nursing action is priority if the nurse is using the nursing theory that has shaped psychiatric-mental health most directly?
- 1. Teaching effective coping skills
- 2. Assessing the patient's abilities in areas of self-care
- 3. Establishing a therapeutic nurse-patient relationship
- 4. Encouraging the patient's sensitivity and caring for self

Explanation: 3. The interpersonal theory of psychiatric-mental health nursing and the therapeutic relationship originated by Peplau remains the theory that has shaped psychiatric-mental health nursing most directly. While assessing self-care abilities, encouraging sensitivity and caring for self, and teaching effective coping skills, are important areas for nursing action, all efforts are supported by the therapeutic nurse-patient relationship.

Page Ref: 32-34

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Implementation Learning Outcome: Assess how nurses have created and cultivated healing environments that contribute to the healing of patients with mental illness.

Psychiatric Mental Health Nursing From Suffering to Hope 1st Edition Potter Test Bank

Full Download: http://testbanklive.com/download/psychiatric-mental-health-nursing-from-suffering-to-hope-1st-edition-potter-test

- 27) What does a nurse realize is the most important thing in order to become an effective psychiatric nurse?
- 1. Develop good diagnostic skills.
- 2. Understand how to use medications effectively.
- 3. Understand the history of mental health treatment.
- 4. Learn how to guide a patient through their illness towards recovery.

Answer: 4

Explanation: 4. It is important to understand medications use and appropriate diagnoses but these are not the most important skills to learn. The ability to guide a patient towards recovery, using effective interpersonal skills, is critical to the holistic practice of psychiatric nursing. Understanding the history of mental health nursing can provide perspective but not necessarily practical skills.

Page Ref: 33

Cognitive Level: Analyzing

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Nursing Process: Implementation Learning Outcome: Assess how nurses have created and cultivated healing environments that contribute to the healing of patients with mental illness.

MNL LO: 1.2.1. Describe the history of mental health treatment.

28) What important development in nursing is attributed to Effie Taylor?

- 1. Reforming the asylum system
- 2. Introducing the use of activity therapy
- 3. Pioneering the development of nursing training
- 4. Incorporating a reintegration of the mind and body in nursing training

Answer: 4

Explanation: 4. Effie Taylor, a nurse educator at the Phipps Clinic at Johns Hopkins Hospital and later professor of psychiatric nursing at Yale University, sought to integrate mind and body in her nurses' training program involving both general and mental health nursing. Reform of the asylum system is associated with Dorothea Dix. Activity therapy was a central part of moral therapy. Nursing training was pioneered by Florence Nightingale.

Page Ref: 33

Cognitive Level: Applying

Client Need/Sub: Psychosocial Integrity

Standards: QSEN Competencies: I.A.1. Integrate understanding of multiple dimensions of patient-centered care | AACN Essential Competencies: III.1. Explain the interrelationships among theory, practice and research | NLN Competencies: Relationship Centered Care: Learn continuously, derive meaning from others' work, and learn from experience within the health care community | Nursing/Integrated Concepts: Teaching and Learning

Learning Outcome: Assess how nurses have created and cultivated healing environments that contribute to the healing of patients with mental illness.