Chapter 4 Legal Responsibilities Answer Key

Application Exercises Key

1. A. **CORRECT:** By threatening the client, the AP is committing assault. Her threats could make the client become fearful and apprehensive.

   B. Battery is actual physical contact without the client's consent. Because the AP has only verbally threatened the client, battery has not occurred.

   C. Unless the AP restrains the client, there is no false imprisonment involved.

   D. Invasion of privacy involves disclosing information about a client to an unauthorized individual.

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2. A. Assault is an action that threatens harmful contact without the client's consent. The nurse has made no threats in this situation.

   B. **CORRECT:** The nurse gave the medication as a chemical restraint to keep the client from leaving the facility against medical advice. This is false imprisonment because the client neither requested nor consented to receiving the sedative.

   C. Negligence is a breach of duty that results in harm to the client. It is unlikely that the medication the nurse administered without his consent actually harmed the client.

   D. The nurse has not disclosed any protected health information, so there is no breach of confidentiality involved in this situation.

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3. A. The client may designate any competent adult to be his health care proxy. It does not have to be his spouse.

   B. The hospital staff must ask the client whether he has prepared advance directives and provide written information about them if he has not. The nurse should document whether the client has signed the advance directives. The hospital staff cannot refuse care based on the lack of advance directives.

   C. **CORRECT:** The client has the right to decide and specify which medical procedures he wants when a life-threatening situation arises.

   D. The client does not need his provider's approval to submit his advance directives. However, he should give his primary care provider a copy of the document for his records.

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4. A. **CORRECT:** It is the nurse's responsibility to verify that the surgeon obtained the client's consent and that he understands the information the surgeon gave him.

   B. **CORRECT:** It is the nurse's responsibility to witness the client's signing of the consent form, and to verify that he is consenting voluntarily and appears to be competent to do so. The nurse also should verify that he understands the information the surgeon gave him.

   C. It is the surgeon's responsibility to explain the risks and benefits of the procedure.

   D. It is the surgeon's responsibility to describe the consequences of choosing not to have the surgery.

   E. It is the surgeon's responsibility to tell the client about any available alternatives to having the surgery.

   NCLEX® Connection: Management of Care, Informed Consent

5. A. The nurse should not alert the American Nurses Association. The state's board of nursing regulates disciplinary action and can revoke a nurse's license for substance use.

   B. The nurse should not fill out an incident report. Incident reports are filed to document an accident or unusual occurrence.

   C. **CORRECT:** Any nurse who notices behavior that could jeopardize client care or could indicate a substance use disorder has a duty to report the situation immediately to the nurse manager.

   D. The nurse should not leave the nurse alone to sleep. Although the nurse is not responsible for solving the problem, she does have a duty to take action since she has observed the problem.

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PRACTICE Answer

UNDERLYING PRINCIPLES	NURSING INTERVENTIONS
• Duty to provide care as defined by a standard • Breach of duty by failure to meet standard • Foreseeability of harm • Breach of duty has potential to cause harm • Harm occurs	• Following standards of care • Giving competent care • Communicating with other health team members • Developing a caring rapport with clients • Fully documenting assessments, interventions, and evaluations

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