

### 1 nursing process priority action following a missed provider prescription

- Ethical dilemmas are problems that involve more than one choice and stem from differences in values and beliefs of the decision maker and yourself.
- Nurses use critical thinking skills to determine the priority of care for providing care to multiple patients.
- Nurses use evidence to make autonomous action to benefit clients such as a nurse following procedure and turning a client every two hours to ensure the client does not have skin break down the nurses do this without orders from a provider thus are acting on their own accord.

### 2. Medical and surgical asepsis: disposing of biohazardous waste

- Ensure that a septum sample is begin transported in a biohazard labeled bag
- Make sure to pour an liquids used for client care directly into the drain to avoid splattering to prevent droplet contamination.
- Microbes can move by gravity from non-sterile to sterile environment which is why we do not reach over a sterile field.

### 3. Home safety: Teaching about home care of oxygen equipment

- Ensure that an oxygen source is at least 6 feet away from a heat source
- To ensure that the patients has no smoking signs as well as oxygen in use signs outside and inside the home.
- Ensure that the electronics are all in functioning order to ensure that there is not a fire or a short that causes a fire.

### 4. Ethical responsibilities demonstrating client advocacy

- Moral distress occurs when the nurse is placed in a difficult situation where the actions taken are different from what the nurse feels is ethically correct such as a patient refusing cancer treatment and not wanting to fight the disease anymore.
- Being a client advocate such as discussing options with a parent who has decided not to allow their child to have a blood transfusion when religion prevents it, you are still advocating for the clients best interest and giving all of the options available.
- Bioethics is the applications of ethics to health and life, it can also have ethical dilemmas viewed by many because it can involve things such as stem cell research which could be viewed as doing harm as a child was aborted to receive those stem cells but can also be viewed in a positive manner as the fetus is being utilized now rather than just discarded.

### 5. The interprofessional team quadrating client care with other members of the interprofessional team.

- A nurse can offer spiritual support to a client through a paster, priest or rabbis if the nurse thinks that the patients' religions views would aid in the physical and mental side of recovery as well as if the nurse thinks that the spiritual assistance is necessary for the patient.
- the interprofessional team involves anyone who practices in their own scope of practice to provide the patient with the best holistic care that is possible.

- Everyone has a specific role to play in order to provide adequate care for the client and each individual is assigned a specific role based on their capabilities such as an assistive personnel would not be told to intubate a patient as it is out of their scope of practice.

#### 6. Information technology: commonly used abbreviations

- Documentation should reflect assessments interventions and evaluations not personal opinions or criticism about the client.
- If a telephone or verbal prescription is necessary have another nurse listen to the prescription.
- Do not refer to the incident report in the clients medical record.

#### 7. critical thinking and clinical judgment prioritizing client care

- Complex critical thinking results from an increase in nursing knowledge, experience, intuition, and more flexible attitude.
- Nurses are fully expected to make choices without help from others and fully assume the responsibility for the choices made.
- Mentoring and peer relationships can positively influence the nurse's critical thinking ability as nurses discuss client care and learn from each other.

#### 8. Legal responsibilities responding to a client's inquiry about a surgery

A nurse must make sure that the client understands the aspects of care that they are going to receive in order to be active in the decision-making process.

The client can refuse a procedure at any point before the procedure.

The nurse must verify that consent is informed and witness the client signing the consent form.

#### 9. Legal responsibilities identifying negligence

- Negligence is when a nurse fails to implement safety measures for a client at risk for falls as an example so physical harm can come from negligence.
- Negligence can also be a failure by the nurse to notify a provider about a change to a client's condition.
- Negligence can also be from failing to communicate to a client effectively and thoroughly.

#### 10. Data collection and general survey- communication techniques for gathering health information

- Ensure when collecting information from a client you use open ended questions
- Ensure that the environment is private and have the necessary equipment ready for the physical exam
- Start with light palpation, be systematic, calm, and gentle when palpating

#### 11. Therapeutic communication: providing psychosocial support

- Nurses should be aware of how they communicate nonverbally and determine the meaning of the client's nonverbal communication.
- Lack of awareness of territoriality and personal space and the area around an individual can make clients perceive a threat and react defensively.

- Clients feel more at ease the implementation phase when nurses establish a helping relationship.

#### 12. Urinary Elimination: skin breakdown

- Incontinence can occur as a result of impaired mobility due to difficulty transferring to the bathroom
- Urinary incontinence is a significant contributing factor to skin breakdown and falls, especially in older adults.
- Intermittent urinary catheterization is periodic catheterization to empty bladder. It reduces the risk of infection from indwelling catheterization, which is a temporary intervention for clients at risk for skin breakdown, or when other options have failed.

#### 13. Fluid imbalances assessment findings of extracellular fluid volume deficit

- Compensatory mechanisms include sympathetic nervous system responses of increased thirst, antidiuretic hormone release and aldosterone release.
- A major cause of dehydration is hyperventilation or excessive perspiration without water replacement
- Fluid overload is an excess of fluid or water, this includes hemodilution which makes the amount of blood components seem lower

#### 14. Fluid imbalances calculating a client's net fluid intake

The most common way to calculate a client's intake and output is by recording their intakes and outputs for a shift or 24hr period.

A patient will need more fluids when they have excessive gastrointestinal loss such as vomiting

Older adults have an increased risk for dehydration due to multiple physiological factors including a decrease in total body mass.

#### 15. nutrition and oral hydration advancing to a full liquid diet

When planning a nutritional or hydration intervention. It is important to consider beliefs and culture, the environment, and the presentation of the food, as well as any illnesses or allergies clients might have.

Financial issues prevent some clients from buying foods that are high in protein, vitamins, and minerals

You need to take environmental factors into account such as schedules, sedentary lifestyles and work

#### 16. complementary and alternative therapies: identifying potential medication interaction with ginkgo biloba

An important prerequisite for implementing complementary or alternative therapies is the client's acceptance of the involvement in the therapeutic intervention.

Natural products include herbal medicines, minerals and vitamins, essential oils and dietary supplements.

Some herbal agents have been deemed safe or effective by nongovernment agencies

#### 17. Rest and sleep interventions to promote sleep

Chronic sleep loss can increase risks of obesity, depression, hypertension, diabetes mellitus, heart attack, and stroke.

The most common sleep disorder, this is the inability to get an adequate amount of sleep and to feel rested.

Narcolepsy is sudden attacks of sleep that are often uncontrollable

#### 18. safe medication administration and error reduction confirming clients identity

Knowing the therapeutic effect of a medication can let you as the nurse know how long the medication will take to go into effect as well as the effect the medication will have on the patient.

Knowing the contradictions to the medication that you are administering allows you to ensure that you are the client's best advocate and that you can ensure that there are no medication errors that the physician may not have foreseen.

A stat prescription is only for administration once and immediately.

#### 19. diabetes mellitus mixing insulin

Monitoring glucose levels is important when taking this medication, and do not rely on SNS manifestations as an alert to developing hypoglycemia.

When mixing short acting insulin with longer acting insulin draw the short acting insulin up into the syringe first and then the long acting insulin into the syringe.

As a nurse when mixing insulins you need to ensure that the long acting insulin does not get into the short acting insulin's vial.

#### 20. intravenous therapy promoting vein dilation prior to inserting a peripheral IV catheter

A fluid bolus is a large amount of IV fluid to give in a short time, usually less than 1 hour.

Nurses administer medications as an IV bolus, giving the medication in a small amount of solution, concentrated or diluted, and injecting it over a short time 1 or 2 minutes.

Administer medications directly into the peripheral IV or access port to achieve an immediate medication level in the bloodstream

#### 21. intravenous therapy selection of an intravenous site

Select a vein by using visualization, gravity, fist clenching, friction, with the cleaning solution or heat.

Avoid varicose veins that are permanently dilated and tortuous

Avoid veins in an extremity with impaired sensitivity scar tissue, paralysis, lymph nodes removed, recent infiltration, a PICC line, or an arteriovenous fistula or graft.

## 22. Hygiene providing oral care for a client who is unconscious

Before performing any personal hygiene it is important to assess the client's ability to participate in personal hygiene.

Culture plays an important role because some cultures have unique hygiene practices so be sure to be respectful and observant of each client's specific cultural needs.

Before starting any care be sure to understand how to complete each task to avoid injuring the client.

## 23. airway management suctioning a tracheostomy tube

Oxygen toxicity can result from high concentrations of oxygen typically greater than 50% long durations of oxygen therapy typically more than 24 to 48 hours and severity of lung disease.

Clients who have conditions that cause alveolar hypoventilation can be sensitive to the administration of oxygen.

Chest physiotherapy involves the use of chest percussion, vibration, and postural drainage to help mobilize secretions, chest percussion and vibration facilitate movement of secretions into the central airways.