

# *STUDENT LEARNING GUIDE*

*to accompany*

*LONG PHIPPS CASSMEYER*

# *Medical-Surgical Nursing*

*A  
Nursing Process  
Approach*

*THIRD EDITION*

*STUDENT LEARNING GUIDE*  
*to accompany*  
***Medical-Surgical***  
***Nursing***  
*A Nursing Process Approach*

***Barbara C. Long, MSN, RN***

Associate Professor Emeritus of Medical-Surgical Nursing  
Frances Payne Bolton School of Nursing  
Case Western Reserve University  
Cleveland, Ohio

***Wilma J. Phipps, PhD, RN, FAAN***

Professor Emeritus of Medical-Surgical Nursing  
Frances Payne Bolton School of Nursing  
Case Western Reserve University  
Cleveland, Ohio

***Virginia L. Cassmeyer, PhD, RN***

Associate Professor  
School of Nursing  
University of Kansas  
Kansas City, Kansas

***THIRD EDITION***

 **Mosby**

St. Louis Baltimore Boston Chicago London Philadelphia Sydney Toronto



Dedicated to Publishing Excellence

Publisher: Alison Miller  
Editor: Terry Van Schaik  
Developmental Editor: Emma Underdown, Janet Livingston  
Project Manager: John Rogers  
Production Editor: Chris Murphy  
Designer: Susan Lane

**Copyright © 1993 by Mosby-Year Book, Inc.**

All rights reserved. Except in classes in which Long/Phipps/Cassmeyer: *Medical-Surgical Nursing: A Nursing Process Approach* is being used, no part of this publication may be reproduced, stored in a retrieval system, or transmitted, in any form or by any means, electronic, mechanical, photocopying, recording, or otherwise, without prior written permission from the publisher.

Permission to photocopy or reproduce solely for internal or personal use is permitted for libraries or other users registered with the Copyright Clearance Center, provided that the base fee of \$4.00 per chapter plus \$.10 per page is paid directly to the Copyright Clearance Center, 27 Congress Street, Salem, MA 01970. This consent does not extend to other kinds of copying, such as copying for general distribution, for advertising or promotional purposes, for creating new collected works, or for resale.

Printed in the United States of America.

Mosby-Year Book, Inc.  
11830 Westline Industrial Drive  
St. Louis, Missouri 63146

**International Standard Book Number 0-8016-7417-4**

94 95 96 97 SH/PC 9 8 7 6 5 4

# Contents

## **Unit One**

### **Medical Surgical Nursing Practice**

---

- 1 Perspectives of Medical-Surgical Nursing, 3
- 2 Quality Management in Nursing, 5

## **Unit Two**

### **Health Promotion and Illness Prevention**

---

- 3 Cultural Influences on Health and Illness, 7
- 4 Promotion of Health in the Elderly, 10
- 5 Health Promotion: Nutrition and Exercise, 12
- 6 Stressors, Stress, and Stress Management, 14

## **Unit Three**

### **Common Problems Encountered in Medical-Surgical Nursing**

---

- 7 Fluid and Electrolyte Imbalances, 19
- 8 Acid-Based Imbalances, 23
- 9 Shock, 25
- 10 Pain, 28
- 11 Cancer, 30
- 12 Sleep Disorders, 34
- 13 Substance Abuse, 36
- 14 Chronic Illness, 39
- 15 Loss, Dying, and Death, 41

## **Unit Four**

### **Infection**

---

- 16 Biologic Defense Mechanisms, 45
- 17 Infection Control, 47
- 18 Sexually Transmitted Diseases, 52
- 19 Management of Person with HIV Infection and AIDS, 55

## **Unit Five**

### **Perioperative Nursing**

---

- 20 Preoperative Intervention, 57
- 21 Intraoperative Intervention, 60
- 22 Postoperative Intervention, 63

## **Unit Six**

### **Gas Transport Problems**

---

- 23 The Patient with Nose and Throat Problems, 67
- 24 The Patient with Pulmonary Problems, 70
- 25 The Patient with Cardiovascular Problems, 76
- 26 The Patient with Peripheral Vascular Problems, 84
- 27 The Patient with Hematologic Problems, 88

**Unit Seven****Metabolic and Endocrine Problems**

---

- 28**    *The Patient with Diabetes Mellitus, 93*
- 29**    *The Patient with Endocrine Problems, 97*
- 30**    *The Patient with Hepatic Problems, 103*

**Unit Eight****Problems with Digestion or Elimination**

---

- 31**    *The Patient with Gastrointestinal Problems, 107*
- 32**    *The Patient with Biliary and Pancreatic Problems, 115*
- 33**    *The Patient with Urinary Problems, 118*

**Unit Nine****Sexual and Reproductive Problems**

---

- 34**    *Sexuality in Health and Illness, 125*
- 35**    *The Patient with Reproductive Problems, 129*
- 36**    *The Patient with Problems of the Breast, 135*

**Unit Ten****Problems of Cognition, Sensation, and Motion**

---

- 37**    *The Patient with Neurologic Problems, 139*
- 38**    *The Patient with Eye Problems, 150*
- 39**    *The Patient with Ear Problems, 154*
- 40**    *The Patient with Musculoskeletal Problems, 158*

**Unit Eleven****Problems of Defense and Protection**

---

- 41**    *The Patient with Immunologic Problems, 165*
- 42**    *The Patient with an Organ/Tissue Transplant, 168*
- 43**    *The Patient with Dermatologic Problems, 171*
- 44**    *The Patient with Burns, 176*

**Unit Twelve****Special Environments of Care**

---

- 45**    *Problems Encountered in Emergencies and Disasters, 179*
- 46**    *Care of the Patient in a Critical Care Unit, 183*
- 47**    *Home Care of the Ill Adult, 187*

**ANSWER GUIDE, 189**

# *STUDENT LEARNING GUIDE*



# 1 *Perspectives of Medical-Surgical Nursing*

## **OBJECTIVES**

- Differentiate the practice of medical-surgical nursing from other nursing disciplines.
- Differentiate health promotion and prevention of illness, and the three levels of prevention.
- Identify stages of disease development.
- Differentiate between independent and interdependent nursing functions.
- Describe five steps of nursing process.
- Identify ethical issues that may occur in the practice of medical-surgical nursing.

## **SELF-ASSESSMENT ACTIVITIES**

### **I. Define the following terms.**

at-risk status	medical-surgical nursing
diagnosis	mental health
disease	noncompliance
dynamic equilibrium	nursing process
epidemiology	objective data
etiology	pathophysiology
health	prevention
health care	primary prevention
health promotion	risk factors
homeostasis	secondary prevention
illness	sick role
independent nursing action	subjective data
interdependent nursing action	tertiary prevention
medical care	



**II. What are the three different levels of protection? What are their goals?**

**III. Describe the five steps of the nursing process.**

**IV. Fill in the blank.**

- |                              |                          |
|------------------------------|--------------------------|
| <b>a</b> Epidemiology        | <b>e</b> Nursing process |
| <b>b</b> Signs               | <b>f</b> Symptoms        |
| <b>c</b> Dynamic equilibrium | <b>g</b> Etiology        |
| <b>d</b> Nursing diagnosis   | <b>h</b> Pathophysiology |

1. \_\_\_\_\_ is/are objective evidence of disease or dysfunction, while \_\_\_\_\_ is/are subjective evidence.
2. \_\_\_\_\_ refer(s) to the process of maintaining a stable internal environment.
3. The specific cause(s) of a disease is(are) referred to as its \_\_\_\_\_.
4. Altered physiologic functioning is referred to as \_\_\_\_\_.
5. \_\_\_\_\_ is/are concerned with the incidence, distribution, and determinants of diseases and injuries.
6. \_\_\_\_\_ provide(s) organization and direction of nursing activities.
7. \_\_\_\_\_ involve(s) drawing conclusions from the data collected.

# 2 *Quality Management in Nursing*

## OBJECTIVES

- Define quality management.
- Identify three reasons why quality management is an important aspect of the practice of nursing.
- Describe the steps of the American Nurses Association (ANA) model of quality assurance.
- State the difference between standards and criteria.
- Name five mechanisms involved in implementing quality management programs.
- Describe the use of quality indicators as one means for monitoring quality of care.

## SELF-ASSESSMENT ACTIVITIES

### I. Define the following terms.

accreditation	nurse practice acts
aggregate data	nursing audit (evaluation study)
concurrent audit (review)	peer review
continuous quality improvement	PSRO
criterion measure	quality indicator
DRG	quality management
effectiveness	retrospective audit (review)
efficiency	standard
iatrogenic	standards of nursing practice
incidence report	total quality management
JCAHO	utilization review
medical practice acts	

### II. Describe the eight steps of the ANA's quality management process.

**III. Discuss five of the tools used to measure a quality management program.**

**IV. Choose the most appropriate answer.**

1. The primary responsibility for implementing the standards of nursing practice lies with:
  - a. The nursing director in the hospital
  - b. The individual nurse
  - c. The nursing board within each state
  - d. The physician writing the treatment orders
2. Which of the following defines the legal scope of nursing practice?
  - a. Nurse practice acts
  - b. Medical practice acts
  - c. Joint Commission on Accreditation of Hospitals
  - d. ANA Standards of Nursing Practice
3. JCAH (Joint Commission on Accreditation of Hospitals):
  - a. Is a mandatory governmental program for accrediting hospitals
  - b. Is a voluntary agency that licenses hospitals
  - c. Establishes standards for the operation of hospitals
  - d. Develops plans for monitoring the quality of nursing care
4. A framework against which performance is compared is called:
  - a. A criterion measure
  - b. A standard
  - c. A structure criterion
  - d. Quality assurance
5. The statement "Every patient will have oral hygiene as a part of the morning bath" is a(n):
  - a. Assessment
  - b. Standard
  - c. Process criterion
  - d. Outcome criterion
6. The statement "Intravenous infusions will be monitored every hour" is a(n):
  - a. Process criterion
  - b. Structure criterion
  - c. Standard
  - d. Outcome criterion
7. The statement "The patient can perform proper colostomy irrigations" is a(n):
  - a. Process criterion
  - b. Structure criterion
  - c. Standard
  - d. Outcome criterion
8. The statement "An RN will be available on every nursing unit" is a(n):
  - a. Structure criterion
  - b. Process criterion
  - c. Outcome criterion
  - d. Standard
9. The statement "The charge nurse on each shift will be an RN" is a(n):
  - a. Standard
  - b. Structure criterion
  - c. Process criterion
  - d. Outcome criterion

# 3

## *Cultural Influences on Health and Illness*

### OBJECTIVES

- Have an awareness of one's self as a member of a cultural group.
- Respect similarities and differences in others.
- Inquire about others' values, traditions, preferences, and expectations before acting.
- Demonstrate ability to plan, mediate, and implement nursing care that brings about the most harmony between a patient's culture and recommended health behaviors.
- Serve as an advocate on behalf of the cultural needs of patients and families to relevant components of the health care system.
- Distinguish between the concepts of culture, ethnicity, nationality, and race.
- Describe and give examples of at least two other theories of disease in addition to Western biomedicine.

### SELF-ASSESSMENT ACTIVITIES

#### I. Define the following terms.

body

kinesics

community

mind

cross-cultural nursing

nationality

cultural assessment

nonverbal communication

culture

predetermination

disease

proxemics

environment

race

ethnicity

role

ethnosensitivity

self

face

shame

gender identify

sick role

health care access

sickness

illness

theory of specific etiology (germ theory)

**II.** State the differences in the terms *culture*, *ethnic background*, *nationality*, and *race*.

**III.** Describe five of the physical, mental, external, internal, cultural and biological traits of an individual as they relate to his/her sense of self.

**IV.** Choose the most appropriate answer.

1. Ethnology is the study of:
  - a. Diseases and illnesses transmitted in groups
  - b. Cultures of a group or groups of people
  - c. Human behavior
  - d. Social structures and interactions of groups
2. Which of the following is *not* true of race?
  - a. Beliefs and perceptions about race are learned
  - b. The three major racial groups are Black, Caucasian, and Oriental
  - c. It is genetic
  - d. Race identifies the behavior, economic level, and other sociocultural attributes of a group
3. Laboratory tests can confirm which of the following?
  - a. Illness
  - b. Disease
  - c. Sickness
  - d. Sick role
4. Behavioral and environmental factors related to cancer mortality include:
  - a. Inheritance
  - b. Cultural norms
  - c. Alcohol use and reproductive factors
  - d. Epidemiologic research
5. Which of the following is the most important factor for the nurse to remember when caring for a patient with a nontraditional sexual orientation?
  - a. Sensitivity is needed to avoid being judgmental
  - b. Sexual orientation is established by age 6
  - c. The patient may or may not have come to terms with his or her own sexuality
  - d. The nurse should carefully screen visitation to avoid conflicts between family members and the patient's partner
6. All of the following are true of the cultural assessment *except*:
  - a. The nurse must be nonjudgmental about the patient's concerns and beliefs
  - b. The nurse must be accepting and supportive of the patient's behavior
  - c. The nurse must consider what is unique about the patient when evaluating the normative data
  - d. Most patients do not need thorough cultural assessments
7. A balanced view of human health that considers biologic, psychologic, social, and cultural components is:
  - a. Anthropology
  - b. Folk medicine
  - c. Native healing
  - d. Holistic health care

**V. Case Study** A 10-year-old boy, Tomas, is recovering from a car accident. He is stable but sustained a broken arm, multiple contusions, and a slight concussion. His parents, Hector and Maria Inosina, speak little English and are very worried about what has happened to their son.

1. What are nonverbal ways you can communicate Tomas' condition to the parents?
  
  
  
  
  
  
  
  
  
  
2. How would you perform a cultural assessment of the family to assure compliance with the discharge care?

# 4 *Promotion of Health in the Elderly*

## OBJECTIVES

- Distinguish between primary and secondary changes of aging.
- Describe psychosocial aspects of aging.
- Compare health concerns of elderly adults with those of younger adults.
- Describe health promotion strategies for the older adult.
- Describe special precautions for the hospitalized elderly.

## SELF-ASSESSMENT ACTIVITIES

### I. Define the following terms.

Alzheimer's disease

Patient Self-Determination Act

biologic age

pressure sore

dementia

primary aging

durable power of attorney

psychosocial age

dysfunctional syndrome

physiologic age

incontinence

secondary aging

living will

senile pruritus

medication error

shearing lesion

orthostatic hypotension

### II. Describe six of the physiologic changes associated with aging. Which biologic variables do not change with aging?

### III. What is the difference between primary and secondary aging?

**IV. Choose the most appropriate answer.**

1. The primary reason why women older than 65 cease having sexual activity is:
  - a. Lack of interest
  - b. Lack of acceptable sexual partners
  - c. Inability to become sufficiently aroused
  - d. Performance anxiety
2. The major health problems of the elderly are:
  - a. Arthritis and injury caused by accidents
  - b. Cancer and heart disease
  - c. Heart disease and hypertension
  - d. Gastrointestinal disorders and renal disease
3. The best and simplest type of exercise for the elderly is:
  - a. Water exercise
  - b. Gardening
  - c. Walking
  - d. None; exercise should be avoided
4. Which of the following is *not* true of the nutritional needs of an elderly patient?
  - a. The nutritional needs of the older patient differ from those of younger adults
  - b. Dehydration may be a problem
  - c. Changes in the digestive enzymes may lead to malnutrition
  - d. Vitamin and mineral supplements should be used regularly
5. A medication error occurs when:
  - a. A drug interacts with food in the stomach, changing the kinetics of the drug
  - b. The nurse gives the wrong dosage of a drug to a patient
  - c. A drug interacts with another drug to create a new problem
  - d. The patient does not take a prescribed drug or does not take it at the correct times
6. Musculoskeletal problems:
  - a. Are among the main problems of secondary aging
  - b. Account for almost 50% of injuries in the elderly (because of falls)
  - c. Include increasing mineralization of bones and increased body fat in the elderly
  - d. May be corrected in most cases by carefully placed restraints
7. One of the secondary effects of aging is:
  - a. Decline in pulmonary function
  - b. Decreased sensory status
  - c. Urinary incontinence
  - d. Decreased cardiac output

**V. Case Study** Mrs. Ruby Winthorp is a 70-year-old woman who is postoperative from a total hip replacement caused by a fall. Her children confide in you that they are worried she can no longer take care of herself adequately. But everytime they start to talk about this with her, she turns and refuses to listen. They ask you to convince their mother to enter a nursing home.

1. Describe how you would evaluate Mrs. Winthorp's functional abilities to arrive at your own conclusions regarding her ability to care for herself. What questions would you ask? What observations would you make?
2. Which community support services might you recommended to Mrs. Winthorp if she refuses to move out of her home?



# 5

## *Health Promotion: Nutrition and Exercise*

### OBJECTIVES

- Describe factors affecting health-promoting behaviors and approaches to facilitate health promotion.
- Differentiate nutrient standards, food guides, and dietary guidelines in terms of purpose.
- Describe seven dietary guidelines recommended by Department of Health and Human Services/ U.S. Department of Agriculture.
- Differentiate saturated, monounsaturated, and polyunsaturated fats, and cholesterol in terms of definition and recommendations for health.
- Use the daily food guide to evaluate adequacy of nutrient intake.
- Explain approaches to facilitate weight loss and weight gain.
- Describe the effects and benefits of exercise and recommendations for physical fitness programs.

### SELF ASSESSMENT ACTIVITIES

#### I. Define the following terms.

aerobic exercise

isometric exercise

anaerobic exercise

isotonic exercise

assessment of nutritional status

malnutrition

Basic Four daily food guide

nutrition

behavior modification

nutritional status

body mass index (BMI)

obesity

diet history

overweight

dietary fiber

recommended dietary allowances (RDAs)

dietary guidelines

serum cholesterol

food-drug interactions

therapeutic diet

health promotion

underweight

ideal body weight