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Question: 1

Polypharmacy refers to:

- A. The simultaneous use of multiple medications.
- B. The administration of medications through the rectum.
- C. The process of tapering off medications under medical supervision.
- D. The practice of using herbal supplements alongside prescription medications.

Answer: A

Explanation: Polypharmacy refers to the use of multiple medications by an individual, typically involving different drug classes or combinations of medications. Polypharmacy can increase the risk of drug interactions, adverse effects, and medication non-adherence, particularly in older adults who may be taking multiple medications for various health conditions.

Question: 2

Which step of the nursing process involves developing a plan of care based on identified goals and interventions?

- A. Assessment
- B. Diagnosis
- C. Implementation
- D. Planning

Answer: D

Explanation: In the nursing process, planning is the step where the nurse develops a comprehensive plan of care based on the assessment data and identified goals. It involves determining appropriate interventions, setting

priorities, and establishing expected outcomes to guide the implementation and evaluation phases of the nursing process.

Question: 3

Which age-related physiological change is associated with decreased sensation of touch and temperature?

- A. Presbyopia
- B. Presbycusis
- C. Presbyesthesia
- D. Presbyesthesia

Answer: C

Explanation: Presbyesthesia refers to the age-related decline in the sensation of touch and temperature. It is a common physiological change associated with aging. Presbyopia (answer choice A) refers to age-related farsightedness, while presbycusis (answer choice B) refers to age-related hearing loss. Presbyesthesia specifically relates to the diminished sense of touch and temperature perception.

Question: 4

Which intervention is an evidence-based approach to prevent pressure injuries in bedridden older adults?

- A. Frequent repositioning
- B. Application of topical antiseptics
- C. Provision of high-protein diet
- D. Use of air mattresses

Answer: A

Explanation: Frequent repositioning of bedridden older adults is an evidence-based intervention to prevent pressure injuries, also known as pressure ulcers or bedsores. Repositioning helps relieve pressure on vulnerable areas of the body, improves blood circulation, and reduces the risk of tissue damage. Other options listed may have their benefits but are not the primary evidence-based intervention for preventing pressure injuries.

Question: 5

Which theoretical framework emphasizes the importance of satisfying basic needs such as physiological, safety, belongingness, and self-esteem?

- A. Coping theory
- B. Developmental theory
- C. Hierarchy of needs theory
- D. Social learning theory

Answer: C

Explanation: The hierarchy of needs theory, proposed by Abraham Maslow, suggests that individuals have a hierarchy of needs that must be fulfilled in a specific order. The needs include physiological needs (such as food, water, and shelter), safety needs, belongingness and love needs, esteem needs, and self-actualization needs. According to this theory, individuals are motivated to fulfill lower-level needs before progressing to higher-level needs.

Question: 6

Which risk factor is commonly associated with cognitive impairment in older adults?

- A. Sedentary lifestyle

- B. Excessive alcohol consumption
- C. Vitamin D deficiency
- D. Smoking

Answer: B

Explanation: Excessive alcohol consumption is a known risk factor for cognitive impairment in older adults. Chronic alcohol abuse can lead to alcohol-related dementia or contribute to other forms of cognitive decline. It is important for healthcare professionals to assess and address alcohol consumption as part of comprehensive gerontological care.

Question: 7

Which assessment tool is commonly used to evaluate fall risk in older adults?

- A. Mini-Cognitive Assessment Instrument (Mini-Cog)
- B. Barthel Index
- C. Morse Fall Scale
- D. Geriatric Depression Scale

Answer: C

Explanation: The Morse Fall Scale is a widely used tool in gerontological nursing to assess an individual's risk of falling. It evaluates factors such as history of falls, use of ambulatory aids, gait, and mental status to determine the likelihood of falls. The tool helps healthcare professionals identify patients who may require interventions to prevent falls and promote patient safety.

Question: 8

Which legal document allows individuals to express their healthcare preferences and appoint a healthcare proxy in the event they become unable to

make decisions for themselves?

- A. Advance directive
- B. Living will
- C. Power of attorney
- D. Informed consent

Answer: A

Explanation: An advance directive is a legal document that allows individuals to express their healthcare preferences, including decisions about life-sustaining treatments, and appoint a healthcare proxy (also known as a healthcare power of attorney) to make medical decisions on their behalf if they become incapacitated or unable to communicate their wishes. A living will (answer choice B) is a type of advance directive that specifically outlines an individual's preferences for medical treatments in different scenarios. Power of attorney (answer choice C) is a broader legal document that grants someone the authority to make various decisions on behalf of another person, not limited to healthcare. Informed consent (answer choice D) refers to the process of obtaining a patient's voluntary agreement to receive a specific medical treatment or procedure after being provided with relevant information about the treatment.

Question: 9

Which medication should be avoided in older adults according to the Beers Criteria?

- A. Aspirin for pain relief
- B. Ibuprofen for inflammation
- C. Diphenhydramine for sleep
- D. Acetaminophen for fever

Answer: C

Explanation: The Beers Criteria is a tool that identifies medications that may be potentially inappropriate or have a higher risk of adverse effects in older adults. According to the Beers Criteria, diphenhydramine (an antihistamine commonly used for sleep) is best avoided in older adults due to its association with increased risks of falls, confusion, and other side effects. The other options listed (aspirin, ibuprofen, and acetaminophen) are generally considered safer options for older adults when used appropriately.

Question: 10

Which assessment tool is commonly used to evaluate the risk of pressure injuries in older adults?

- A. Braden Scale
- B. Mini-Cog
- C. Geriatric Depression Scale
- D. Morse Fall Scale

Answer: A

Explanation: The Braden Scale is commonly used to assess the risk of pressure injuries in older adults. It evaluates factors such as sensory perception, moisture, activity, mobility, nutrition, and friction/shear to determine the individual's risk of developing pressure injuries. This tool helps healthcare professionals identify patients who require interventions to prevent pressure injuries and promote skin integrity.

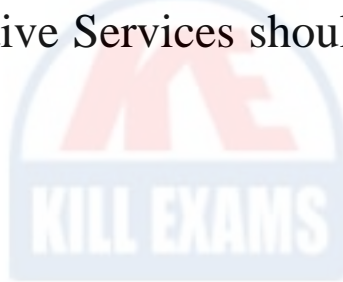
Question: 11

During a physical examination of an older adult, the nurse notices multiple bruises and abrasions in various stages of healing. The nurse suspects elder abuse. What is the nurse's most appropriate action?

- A. Document the findings in the patient's medical record.
- B. Confront the patient's family members about the suspected abuse.
- C. Report the suspected abuse to Adult Protective Services.
- D. Discuss the findings with the healthcare provider during the next team meeting.

Answer: C

Explanation: The nurse's most appropriate action is to report the suspected abuse to Adult Protective Services. Suspected elder abuse should be taken seriously and reported to the appropriate authorities to ensure the safety and well-being of the older adult. Documenting the findings (option A) is important but should not be the only action taken. Confronting the family members (option B) may escalate the situation and compromise the safety of the patient. Discussing the findings with the healthcare provider (option D) is important, but reporting to Adult Protective Services should be the immediate action to protect the patient.



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