

Comprehensive Health Assessment (C350)

Survival Guide



Welcome to Comprehensive Health Assessment (C350)!

This study guide is provided to help you engage the learning resources in an effective manner. Please use the incorporated review questions as a tool to drill down into the specific concepts. Do not simply memorize the answers and expect that this would be sufficient preparation to successfully complete the objective assessment. The questions should be used to gauge your understanding of related concepts, as well as your preparation level, prior to referring for the OA.

Should you have any question(s), please do not hesitate to contact the course mentors assigned to this competency. All student questions should be directed into the Group Inbox for UJC2, which is accessible through the COS and in the learning community.

Competency 1: Comprehensive Health Assessment of Individuals & Populations

➤ Read: Gordon's Functional Health Patterns

Study Gordon's functional health patterns. As you read the pages in this section, take notes on health status from both the individual level and the community or global level.

Read the following chapters in *Nursing Diagnosis Manual*:

- [Chapter 1 \("The Nursing Process: The Foundation of Quality Client Care"\)](#)
- [Chapter 2 \("The Language of Nursing"\)](#)

➤ **Read: Global Health**

Read the following chapters in *Global Health*:

- [Chapter 1 \("Measures of Health and Disease in Populations"\)](#)
- [Chapter 2 \("Culture, Behavior, and Health"\)](#)

Use the discussion questions at the end of each chapter to review the information you are learning and reflect more deeply on the application of your knowledge.

Read the following chapters in *Bates' Guide to Physical Examination and History-Taking*:

- [Chapter 1 \("Overview: Physical Examination and History Taking"\)](#)
- [Chapter 3 \("Interviewing and the Health History"\)](#)

➤ **Read: Population-Based Nursing**

As you complete the reading listed below, add to the notes you began in the earlier reading activities.

Read the following chapters in *Population-Based Nursing*:

- [Chapter 1 \("Introduction to Population-Based Learning"\)](#)
- [Chapter 3 \("Measuring Disease in Populations"\)](#)
- [Chapter 4 \("Applying Epidemiological Methods in Population-Based Nursing Practice"\)](#)
- [Chapter 5 \("Applying Evidence at the Population Level"\)](#)

Competency 2: Health Maintenance & Risk Reduction Assessment of Individuals & Populations

➤ **Read: Sociocultural Dimensions of Health**

Review the following chapter in *Bates' Guide to Physical Examination and History-Taking*:

- [Chapter 1 \("Overview: Physical Examination and History Taking"\)](#)

Make sure that you can identify emerging disease conditions, health trends, and social behaviors related to wellness and disease.

Look through the following chapter in *Bates' Guide to Physical Examination and History-Taking* for lifestyle, cultural, and environmental factors that affect the health of individuals and populations:

- [Chapter 20 \("The Older Adult"\)](#)

➤ **Read: Barriers to Healthcare Access**

As you read the chapters in this section, take notes on the following topics:

- barriers to access of care for health maintenance and risk reductions
- tools for measuring health status
- social and cultural constructs that affect patient behavior
- actions individuals and populations can take for maintaining and improving health status

Read the following chapters in *Population-Based Nursing*:

- [Chapter 2 \("Identifying Outcomes"\)](#)
- [Chapter 6 \("Using Information Systems to Improve Population Outcomes"\)](#)
- [Chapter 8 \("Evaluating Practice at the Population Level"\)](#)
- [Chapter 9 \("Building Relationships and Engaging Communities Through Collaboration"\)](#)

You may also want to review the following chapters in *Population-Based Nursing* that you read in an earlier activity:

- [Chapter 1 \("Introduction to Population-Based Learning"\)](#)
- [Chapter 3 \("Measuring Disease in Populations"\)](#)
- [Chapter 5 \("Applying Evidence at the Population Level"\)](#)

➤ **Read: Global Health**

Review the following chapter in *Global Health*:

- [Chapter 1 \("Measures of Health and Disease in Populations"\)](#)

Read the following chapters in *Bates' Guide to Physical Examination and History-Taking*:

- [Chapter 5 \("Behavior and Mental Status"\)](#)

- [Chapter 6 \("The Skin, Hair, and Nails"\)](#)

Use the discussion questions at the end of each chapter to review the information you are learning and reflect more deeply on the application of your knowledge.

Competency 3: Outcome Goals and Interventions for Individuals & Populations based on Assessment Findings

➤ **Read: Educating Populations**

This activity will help you to develop techniques on educating different populations on healthcare promotion and prevention.

Review the following chapters in *Population-Based Nursing*, focusing specifically on the elements of customized education plans and strategies for educating patients and populations:

- [Chapter 1 \("Introduction to Population-Based Learning"\)](#)
- [Chapter 4 \("Applying Epidemiological Methods in Population-Based Nursing Practice"\)](#)

Also read the following chapter in *Population-Based Nursing* for more information on this topic:

- [Chapter 9 \("Building Relationships and Engaging Communities Through Collaboration"\)](#)

➤ **Read: Diagnosis and Plan of Care**

Read the following chapters in *Nursing Diagnosis Manual*:

- [Chapter 3 \("The Assessment Process: Developing the Client Database"\)](#)
- [Chapter 4 \("Concept or Mind Mapping to Create and Document the Plan of Care"\)](#)

You may also want to review the following chapters in *Nursing Diagnosis Manual* that you read in an earlier activity:

- [Chapter 1 \("The Nursing Process"\)](#)
- [Chapter 2 \("The Language of Nursing"\)](#)

This guide will help you to appropriately diagnosis patients and give attainable outcomes of different patient populations. You should also become familiar with the following chapters in *Nursing Diagnosis Manual*, but you do not need to read the whole text of each chapter:

- [Chapter 5 \("Nursing Diagnoses in Alphabetical Order"\)](#)

- [Chapter 6 \("Health Conditions and Client Concerns With Associated Nursing Diagnoses"\)](#)

Review the following chapters in *Population-Based Nursing* and identify several of the healthcare services that are available for chronic disease processes:

- [Chapter 5 \("Applying Evidence at the Population Level"\)](#)
- [Chapter 6 \("Using Information Systems to Improve Population Outcomes"\)](#)

Competency 4: Strategies for Maintaining Physical & Functional Health

➤ **Read: Health Literacy and Pregnancy**

Add to the notes you began in the previous activity as you read the following chapter in *Bates' Guide to Physical Examination and History-Taking*:

- [Chapter 19 \("The Pregnant Woman"\)](#)

➤ **Watch: Patients' Acceptance of Health Information**

Research environmental, financial, and other types of issues that would affect patients' health literacy and acceptance of health information using the CDC community guide on the following web page:

- ["CDC Surveillance Resource Center"](#)

➤ **Watch: Public Health**

Watch the following video:

- [Global Governance Monitor: Public Health](#)

After you have watched the video, explore the other tabs in the section on Public Health (i.e., "Timeline," "Issue Brief," "Matrix," "Map," and "Resources").

➤ **Read: Financial Burden in Healthcare**

Read the following article:

- [Financial Burden of Medical Care: Early Release of Estimates From the National Health Interview Survey, January–June 2011](#)

Also review the following chapters in *Nursing Diagnosis Manual*, focusing specifically on risk factors in different patient populations and what strategies need to be in place to help with disease management:

- [Chapter 1 \("The Nursing Process: The Foundation of Quality Client Care"\)](#)
- [Chapter 3 \("The Assessment Process: Developing the Client Database"\)](#)

➤ **Read: Challenges in Implementation**

As you read, take notes on the following topics:

- health literacy strategies
- ethical implications of limited healthcare resources
- strategies for promoting health in populations with chronic disease

Read the following chapter in *Population-Based Nursing*:

- [Chapter 10 \("Challenges in Implementation"\)](#)

You may also want to review the following chapters in *Population-Based Nursing*:

- [Chapter 2 \("Identifying Outcomes"\)](#)
- [Chapter 9 \("Building Relationships and Engaging Communities Through Collaboration"\)](#)

➤ **Read: Global Health**

Read the following chapters in *Global Health*:

- [Chapter 12 \("The Design of Health Systems"\)](#)
- [Chapter 13 \("Management and Planning for Global Health"\)](#)

Use the discussion questions at the end of each chapter to review the information you are learning and reflect more deeply on the application of your knowledge.

- **Read: Communication & Health Promotion**

- Communication is a key component in helping decrease healthcare disparities in any population. Evidence-based practice as an approach to clinical decision making has gained considerable interest and influence. As healthcare becomes more evidence based, awareness of the principles, skills, and resources for evidence-based practice is of relevance to all healthcare providers.
- Review the following pages in *Global Health*: pages 58–59 ("Common Features of Successful Health Communication and Health Promotion Program") of chapter 2 ("Culture, Behavior, and Health")
 - You should also explore the following web page and list some of the factors that can help improve health promotion:

["Healthy Aging"](#)

➤ **Complete: Culturally Competent Care**

If you have not already done so, register for the following free online course:

- ["A Physician's Practical Guide to Culturally Competent Care"](#)

You should have completed the "Curriculum Introduction" and themes 1 and 2 in previous activities. Now complete the third theme in the course:

- "Structuring Culturally Competent Care"

Note: This course requires you to complete each section before moving on to the next, so you will need to do each section in order. If you did not complete the earlier parts of this course in a previous activity, you will need to do so before you are able to access the parts related to this topic.

➤ **Read: Implementing Evidence-Based Practice**

Measuring and improving the quality of medical care is an important focus for healthcare organizations in the United States. Read the following article to see examples how specific diagnoses coordinate with plans of care:

- [Chapter 7. The Evidence for Evidence-Based Practice Implementation](#)

➤ Explore: Genetics & Genomics

Explore the following website to find out about how genetics and genomics affect healthcare maintenance and prevention of disease:

- [HHS Prevention Strategies](#)

• Read: Health Assessment

These chapters contain several scenarios with questions that will help you apply the information you are reading about to specific health and nursing situations. Be sure to take time to focus on these scenarios and answer the questions related to each scenario. If you do not know how to answer the questions, review the chapters to increase your understanding of the content.

Read the following chapters in *Bates' Guide to Physical Examination and History-Taking*:

- [Chapter 2 \("Clinical Reasoning, Assessment, and Recording Your Findings"\)](#)
- [Chapter 4 \("Beginning the Physical Examination: General Survey, Vital Signs, and Pain"\)](#)

➤ Watch: Health Assessment Videos on thePoint

The videos in this activity will give you an idea of the content included in other videos within this resource. Although you are not required to watch all the health assessment videos, if there are areas where you feel you need additional support, you can refer back to this resource for guidance on specific aspects of health assessment.

Access thePoint by clicking on the links found in the following textbook:

- *Bates' Guide to Physical Examination and History-Taking*
- Access the "Student Resources," go to the "Videos" section and watch the following videos:
 - Head to Toe Assessment (Adult) Video, Introduction
 - Assessment of Thorax and Lungs Video, Introduction
 - Assessment of Cardiovascular Neck Vessels and Heart Video, Introduction

You may need to download or update software to watch the videos. Follow the directions on the website. You can also use the following link to download the videos to your computer:

Bates videos: <https://app.box.com/s/ynvd03ylo7b392erkp3p>

Concepts to Consider



- A critical component of passing the Objective Assessment for this course is to keep in the forefront of your mind that this course is created at the **Master's** level. In other words, you will be asked to review and recall some of the information you obtained at the Bachelor's level regarding general health assessment geared toward individual patients and families; however, this course is designed to refine your assessment skills to a more inclusive height by viewing illness and health, treatment and prevention. You will be asked to consider the effects of various disease states at the individual, local, and national levels, as well as on a global scale.
- A great deal of information regarding the various topics on the Objective Assessment can be found by reading the assigned text chapters and then searching those same subjects on the websites within the COS. There is indeed a great amount of information contained within each website and any of it is considered "fair game" on the assessment. Some specific areas of emphasis on each website include:
 - **Centers for Disease Control**
 - Vaccinations
 - Asthma
 - Cancer
 - Diabetes
 - Overweight/Obesity
 - Heart Disease
 - Hepatitis
 - Sickle Cell Disease
 - **Guide to Clinical Preventative Services (AHRQ)**
 - Breast Cancer and BRCA screening
 - Diabetes
 - Depression
 - Sexually transmitted diseases
 - Hepatitis
 - B/P screening
 - Heart disease
 - Neural tube defects
 - Genomics

- **HHS Prevention Strategies**
 - All of the above topics
 - Health Literacy
- As you visit each website, investigate the various types of information you can retrieve from each. Questions you may ask yourself:
 - **Is this information local/national/global?**
 - **Does the information include diagnosis, treatment options, and/or prevention strategies?**
 - **Does it include information separated by ethnicities, genders, geographic area, income, etc.?**
- Think about a major sore spot in the provision of healthcare in today's arena – **the cost of providing services!** Investigate some of the dangers of these rising costs and how healthcare providers can help with cost-containment.
- Consider possible nursing diagnoses for each of the aforementioned disease states (*Nursing Diagnosis Manual* found within the COS). You may even consider doing a Google search for each diagnosis to examine nursing interventions to address each condition!
- View all of the *Bates* videos. Pay close attention to those from Chapters **1, 2, 3, 4, 19 & 20**. It is certainly important to know **how** to perform each assessment, but also know **why** you are performing each step and **what** is considered normal/abnormal for each system
- Examine common healthcare issues that can occur in infants, children, and during pregnancy. Specifically, assess the issues from the aspects of potential causes, effects on the individual and population, possible treatments, and prevention strategies for both individuals and communities.
- Spend some time looking at the topic of breast cancer. You will want to focus on the topic as it pertains to its pathogenesis, & the BRCA1 & 2 genes.
- Review the methods and assessments tools that can be utilized when building relationships and engaging communities in healthcare
- Think about those ethical principles you learned in your BSN courses. Do you remember what they are and the meaning of each of them?

Review Questions for *Bates* Material

1. A 15-year-old high school sophomore and her mother come to your clinic because the mother is concerned about her daughter's weight. You measure her daughter's height and weight and obtain a BMI of 19.5 kg/m².

Based on this information, which of the following is appropriate?

- A) Refer the patient to a nutritionist and a psychologist because the patient is anorexic.
 - B) Reassure the mother that this is a normal body weight.
 - C) Give the patient information about exercise because the patient is obese.
 - D) Give the patient information concerning reduction of fat and cholesterol in her diet because she is obese.
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2. A middle-aged man comes in because he has noticed multiple small, blood-red, raised lesions over his anterior chest and abdomen for the past several months. They are not painful and he has not noted any bleeding or bruising. He is concerned this may be consistent with a dangerous condition.

What should you do?

- A) Reassure him that there is nothing to worry about.
- B) Do laboratory work to check for platelet problems.
- C) Obtain an extensive history regarding blood problems and bleeding disorders.
- D) Do a skin biopsy in the office.

3. A 23-year-old ticket agent is brought in by her husband because he is concerned about her recent behavior. He states that for the last 2 weeks she has been completely out of control. He says that she hasn't showered in days, stays awake most of the night cleaning their apartment, and has run up over \$1,000 on their credit cards. While he is talking, the patient interrupts him frequently and declares this is all untrue and she has never been so happy and fulfilled in her whole life. She speaks very quickly, changing the subject often. After a longer than normal interview you find out she has had no recent illnesses or injuries. Her past medical history is unremarkable. Both her parents are healthy but the husband has heard rumors about an aunt with similar symptoms. She and her husband have no children. She smokes one pack of cigarettes a day (although she has been chain-smoking in the last 2 weeks), drinks four to six drinks a week, and smokes marijuana occasionally. On examination she is very loud and outspoken. Her physical examination is unremarkable.

Which mood disorder does she most likely have?

- A) Major depressive episode
 - B) Manic episode
 - C) Dysthymic disorder
4. A patient is describing a very personal part of her history very quickly and in great detail. How should you react to this?
- A) Write down as much as you can, as quickly as possible.
 - B) Ask her to repeat key phrases or to pause at regular intervals, so you can get almost every word.
 - C) Tell her that she can go over the notes later to make sure they are accurate.
 - D) Push away from the keyboard or put down your pen and listen.
5. When using an interpreter to facilitate an interview, where should the interpreter be positioned?
- A) Behind you, the examiner, so that the lips of the patient and the patient's nonverbal cues can be seen
 - B) Next to the patient, so the examiner can maintain eye contact and observe the nonverbal cues of the patient
 - C) Between you and the patient so all parties can make the necessary observations
 - D) In a corner of the room so as to provide minimal distraction to the interview

6. Which of the following represents age-related changes in the lungs?
- A) Decrease in chest wall compliance
 - B) Speed of expiration increases
 - C) Increase in respiratory muscle strength
 - D) Increased elastic recoil of lung tissue

7. A 67-year-old retired janitor comes to the clinic with his wife. She brought him in because she is concerned about his weight loss. He has a history of smoking 3 packs of cigarettes a day for 30 years, for a total of 90 pack-years. He has noticed a daily cough for the past several years, which he states is productive of sputum. He came into the clinic approximately 1 year ago, and at that time his weight was 140 pounds. Today, his weight is 110 pounds.

Which one of the following questions would be the most important to ask if you suspect that he has lung cancer?

- A) Have you tried to force yourself to vomit after eating a meal?
 - B) Do you have heartburn/indigestion and diarrhea?
 - C) Do you have enough food to eat?
 - D) Have you tried to lose weight?
8. A 26-year-old violinist comes to your clinic, complaining of anxiety. He is a first chair violinist in the local symphony orchestra and has started having symptoms during performances, such as sweating, shaking, and hyperventilating. It has gotten so bad that he has thought about giving up his first chair status so he does not have to play the solo during one of the movements. He says that he never has these symptoms during rehearsals or when he is practicing. He denies having any of these symptoms at any other time. His past medical history is unremarkable. He denies any tobacco use, drug use, or alcohol abuse. His parents are both healthy. On examination you see a young man who appears worried. His vital signs and physical examination are unremarkable.

What type of anxiety disorder best describes his situation?

- A) Panic disorder
- B) Specific phobia
- C) Social phobia
- D) Generalized anxiety disorder

9. Mrs. H. comes to your clinic, wanting antibiotics for a sinus infection. When you enter the room, she appears to be very angry. She has a raised tone of voice and states that she has been waiting for the past hour and has to get back to work. She states that she is unimpressed by the reception staff, the nurse, and the clinic in general and wants to know why the office wouldn't call in an antibiotic for her.

Which of the following techniques is not useful in helping to calm this patient?

- A) Avoiding admission that you had a part in provoking her anger because you were late
- B) Accepting angry feelings from the patient and trying not to get angry in return
- C) Staying calm
- D) Keeping your posture relaxed

10. A patient tells you about her experience with prolonged therapy for her breast cancer. You comment, "That must have been a very trying time for you."

What is this an example of?

- A) Reassurance
- B) Empathy
- C) Summarization
- D) Validation

11. You are seeing an elderly man with multiple complaints. He has chronic arthritis, pain from an old war injury, and headaches. Today he complains of these pains, as well as dull chest pain under his sternum.

What would the order of priority be for your problem list?

- A) Arthritis, war injury pain, headaches, chest pain
- B) War injury pain, arthritis, headaches, chest pain
- C) Headaches, arthritis, war injury pain, chest pain
- D) Chest pain, headaches, arthritis, war injury pain

12. The following information is best placed in which category?
“The patient had a stent placed in the left anterior descending artery (LAD) in 1999.”

- A) Adult illnesses
- B) Surgeries
- C) Obstetrics/gynecology
- D) Psychiatric

13. On a very busy day in the office, Mrs. Donelan, who is 81 years old, comes for her usual visit for her blood pressure. She is on a low-dose diuretic chronically and denies any side effects. Her blood pressure is 118/78 today, which is well-controlled. As you are writing her script, she mentions that it is hard not having her husband Bill around anymore.

What would you do next?

- A) Hand her the script and make sure she has a 3-month follow-up appointment.
- B) Make sure she understands the script.
- C) Ask why Bill is not there.
- D) Explain that you will have more time at the next visit to discuss this.

14. A new mother is concerned that her child occasionally “turns blue.” On further questioning, she mentions that this is at her hands and feet. She does not remember the child’s lips turning blue. She is otherwise eating and growing well.

What would you do now?

- A) Reassure her that this is normal
- B) Obtain an echocardiogram to check for structural heart disease and consult cardiology
- C) Admit the child to the hospital for further observation
- D) Question the validity of her story

15. An 89-year-old retired school principal comes for an annual check-up. She would like to know whether or not she should undergo a screening colonoscopy. She has never done this before.

Which of the following factors should not be considered when discussing whether she should go for this screening test?

- A) Life expectancy
 - B) Time interval until benefit from screening accrues
 - C) Patient preference
 - D) Current age of patient
16. A 23-year-old graduate student comes to your clinic for evaluation of a urethral discharge. As the provider, you need to get a sexual history. Which one of the following questions is inappropriate for eliciting the information?
- A) Are you sexually active?
 - B) When was the last time you had intimate physical contact with someone, and did that contact include sexual intercourse?
 - C) Do you have sex with men, women, or both?
 - D) How many sexual partners have you had in the last 6 months?
17. A 37-year-old nurse comes for evaluation of colicky right upper quadrant abdominal pain. The pain is associated with nausea and vomiting and occurs 1 to 2 hours after eating greasy foods. Which one of the following physical examination descriptions would be most consistent with the diagnosis of cholecystitis?
- A) Abdomen is soft, nontender, and nondistended, without hepatosplenomegaly or masses.
 - B) Abdomen is soft and tender to palpation in the right lower quadrant, without rebound or guarding.
 - C) Abdomen is soft and tender to palpation in the right upper quadrant with inspiration, to the point of stopping inspiration, and there is no rebound or guarding.
 - D) Abdomen is soft and tender to palpation in the mid-epigastric area, without rebound or guarding.

18. You are interviewing an elderly woman in the ambulatory setting and trying to get more information about her urinary symptoms. Which of the following techniques is not a component of adaptive questioning?
- A) Directed questioning: starting with the general and proceeding to the specific in a manner that does not make the patient give a yes/no answer
 - B) Reassuring the patient that the urinary symptoms are benign and that she doesn't need to worry about it being a sign of cancer
 - C) Offering the patient multiple choices in order to clarify the character of the urinary symptoms that she is experiencing
 - D) Asking her to tell you exactly what she means when she states that she has a urinary tract infection
19. A 30-year-old sales clerk comes to your office wanting to lose weight; her BMI is 30.0 kg/m². What is the most appropriate amount for a weekly weight reduction goal?
- A) .5 to 1 pound per week
 - B) 1 to 2.5 pounds per week
 - C) 2.5 to 3.5 pounds per week
 - D) 3.5 to 4.5 pounds per week
20. You are observing a patient with heart failure and notice that there are pauses in his breathing. On closer examination, you notice that after the pauses the patient takes progressively deeper breaths and then progressively shallower breaths, which are followed by another apneic spell. The patient is not in any distress. You make the diagnosis of:
- A) Ataxic (Biot's) breathing
 - B) Cheyne-Stokes respiration
 - C) Kussmaul's respiration
 - D) COPD with prolonged expiration
21. It is summer and an 82-year-old woman is brought to you from her home after seeing her primary care doctor 2 days ago. She was started on an antibiotic at that time. Today, she comes to the emergency room not knowing where she is or what year it is.
- What could be a likely cause of this?
- A) Alzheimer's dementia
 - B) Stroke
 - C) Delirium
 - D) Meningitis

22. A patient complains of knee pain on your arrival in the room. What should your first sentence be after greeting the patient?
- A) How much pain are you having?
 - B) Have you injured this knee in the past?
 - C) When did this first occur?
 - D) Could you please describe what happened?
23. Which of the following is true of assessment of the vascular system in the elderly?
- A) Fewer than one third of patients with peripheral vascular disease have symptoms of claudication.
 - B) An aortic width of 2.5 cm is abnormal.
 - C) Bruits are commonly benign findings.
 - D) Orthostatic blood pressure and pulse are not useful in this population.
24. Mr. W. is a 51-year-old auto mechanic who comes to the emergency room wanting to be checked out for the symptom of chest pain. As you listen to him describe his symptom in more detail, you say "Go on," and later, "Mm-hmmm." This is an example of which of the following skilled interviewing techniques?
- A) Echoing
 - B) Nonverbal communication
 - C) Facilitation
 - D) Empathic response
25. The following information is recorded in the health history: "I feel really tired." Which category does it belong to?
- A) Chief complaint
 - B) Present illness
 - C) Personal and social history
 - D) Review of systems

26. Alexandra is a 28-year-old editor who presents to the clinic with abdominal pain. The pain is a dull ache, located in the right upper quadrant, that she rates as a 3 at the least and an 8 at the worst. The pain started a few weeks ago, it lasts for 2 to 3 hours at a time, it comes and goes, and it seems to be worse a couple of hours after eating. She has noticed that it starts after eating greasy foods, so she has cut down on these as much as she can. Initially it occurred once a week, but now it is occurring every other day. Nothing makes it better.

From this description, which of the seven attributes of a symptom has been omitted?

- A) Setting in which the symptom occurs
- B) Associated manifestations
- C) Quality
- D) Timing

27. You are excited about a positive test finding you have just noticed on physical examination of your patient. You go on to do more examination, laboratory work, and diagnostic tests, only to find that there is no sign of the disease you thought would correlate with the finding. This same experience happens several times.

What should you conclude?

- A) Consider not doing this test routinely.
- B) Use this test when you have a higher suspicion for a certain correlating condition.
- C) Continue using the test, perhaps doing less laboratory work and diagnostics.
- D) Omit this test from future examinations.

28. You have just asked a patient how he feels about his emphysema. He becomes silent, folds his arms across his chest and leans back in his chair, and then replies, "It is what it is." How should you respond?

- A) "You seem bothered by this question."
- B) "Next, I would like to talk with you about your smoking habit."
- C) "Okay, let's move on to your other problems."
- D) "You have adopted a practical attitude toward your problem."

29. The following information is recorded in the health history: “The patient has had abdominal pain for 1 week. The pain lasts for 30 minutes at a time; it comes and goes. The severity is 7 to 9 on a scale of 1 to 10. It is accompanied by nausea and vomiting. It is located in the mid-epigastric area.”

Which of these categories does it belong to?

- A) Chief complaint
 - B) Present illness
 - C) Personal and social history
 - D) Review of systems
30. A mother brings her 11 month old to you because her mother-in-law and others have told her that her baby is jaundiced. She is eating and growing well and performing the developmental milestones she should for her age. On examination you indeed notice a yellow tone to her skin from head to toe. Her sclerae are white. To which area should your next questions be related?
- A) Diet
 - B) Family history of liver diseases
 - C) Family history of blood diseases
 - D) Ethnicity of the child
31. You are growing fatigued of performing a maneuver on examination because you have never found a positive and are usually pressed for time. How should you next approach this maneuver?
- A) Use this test when you have a higher suspicion for a certain correlating condition.
 - B) Omit this test from future examinations.
 - C) Continue doing the test, but rely more heavily on laboratory work and diagnostics.
 - D) Continue performing it on all future examinations.

32. A 50-year-old body builder is upset by a letter of denial from his life insurance company. He is very lean but has gained 2 pounds over the past 6 months. You personally performed his health assessment and found no problems whatsoever. He says he is classified as “high risk” because of obesity.

What should you do next?

- A) Explain that even small amounts of weight gain can classify you as obese.
- B) Place him on a high-protein, low-fat diet.
- C) Advise him to increase his aerobic exercise for calorie burning.
- D) Measure his waist.

33. Mrs. Geller is somewhat quiet today. She has several bruises of different colors on the ulnar aspects of her forearms and on her abdomen. She otherwise has no complaints and her diabetes and hypertension are well managed. Her son from out of state accompanies her today and has recently moved in to help her.

What should you suspect?

- A) Overuse of aspirin
- B) Frequent falls
- C) Elder abuse
- D) Depression

34. The following information is recorded in the health history: “Patient denies chest pain, palpitations, orthopnea, and paroxysmal nocturnal dyspnea.”

Which category does it belong to?

- A) Chief complaint
- B) Present illness
- C) Personal and social history
- D) Review of systems

35. Mr. Curtiss has a history of obesity, diabetes, osteoarthritis of the knees, HTN, and obstructive sleep apnea. His BMI is 43 and he has been discouraged by his difficulty in losing weight. He is also discouraged that his goal weight is 158 pounds away. What would you tell him?
- A) "When you get down to your goal weight, you will feel so much better."
 - B) "Some people seem to be able to lose weight and others just can't, no matter how hard they try."
 - C) "We are coming up with new medicines and methods to treat your conditions every day."
 - D) "Even a weight loss of 10% can make a noticeable improvement in the problems you mention."
36. Blood pressure abnormalities found more commonly in Western elderly include which of the following?
- A) Isolated elevation of the diastolic BP
 - B) Narrow pulse pressure
 - C) Elevation of the systolic BP
 - D) Elevation of the BP with standing
37. Despite having high BP readings in the office, Mr. Kelly tells you that his readings at home are much lower. He checks them twice a day at the same time of day and has kept a log. How do you respond?
- A) You diagnose "white coat hypertension."
 - B) You assume he is quite nervous when he comes to your office.
 - C) You question the accuracy of his measurements.
 - D) You question the accuracy of your measurements.
38. You are beginning the examination of a patient. All of the following areas are important to observe as part of the General Survey except:
- A) Level of consciousness
 - B) Signs of distress
 - C) Dress, grooming, and personal hygiene
 - D) Blood pressure

39. Common or concerning symptoms to inquire about in the General Survey and vital signs include all of the following except:

- A) Changes in weight
- B) Fatigue and weakness
- C) Cough
- D) Fever and chills

40. Jason is a 41-year-old electrician who presents to the clinic for evaluation of shortness of breath. The shortness of breath occurs with exertion and improves with rest. It has been going on for several months and initially occurred only a couple of times a day with strenuous exertion; however, it has started to occur with minimal exertion and is happening more than a dozen times per day. The shortness of breath lasts for less than 5 minutes at a time. He has no cough, chest pressure, chest pain, swelling in his feet, palpitations, orthopnea, or paroxysmal nocturnal dyspnea.

Which of the following symptom attributes was not addressed in this description?

- A) Severity
- B) Setting in which the symptom occurs
- C) Timing
- D) Associated manifestations

41. Mrs. T. comes for her regular visit to the clinic. She is on your schedule because her regular provider is on vacation and she wanted to be seen. You have heard about her many times from your colleague and are aware that she is a very talkative person.

Which of the following is a helpful technique to improve the quality of the interview for both the provider and the patient?

- A) Allow the patient to speak uninterrupted for the duration of the appointment.
- B) Briefly summarize what you heard from the patient in the first 5 minutes and then try to have her focus on one aspect of what she told you.
- C) Set the time limit at the beginning of the interview and stick with it, no matter what occurs in the course of the interview.
- D) Allow your impatience to show so that the patient picks up on your nonverbal cue that the appointment needs to end.

42. Which of the following questions is part of the screening for physical disability?
- A) Are you able to go shopping for groceries or clothes?
 - B) Are you able to walk one block?
 - C) Are you able to pass the driver's license test?
 - D) Are you able to perform light dusting and pick up after yourself around the house?
43. A 72-year-old teacher comes to a skilled nursing facility for rehabilitation after being in the hospital for 6 weeks. She was treated for sepsis and respiratory failure and had to be on the ventilator for 3 weeks. You are completing your initial assessment and are evaluating her skin condition. On her sacrum there is full-thickness skin loss that is 5 cm in diameter, with damage to the subcutaneous tissue. The underlying muscle is not affected. You diagnose this as a pressure ulcer.
- What is the stage of this ulcer?
- A) Stage 1
 - B) Stage 2
 - C) Stage 3
 - D) Stage 4
44. Which of the following booster immunizations is recommended in the older adult population?
- A) Tetanus
 - B) Diphtheria
 - C) Measles
 - D) Mumps
45. When you enter your patient's examination room, his wife is waiting there with him. Which of the following is most appropriate?
- A) Ask if it's okay to carry out the visit with both people in the room.
 - B) Carry on as you would ordinarily. The permission is implied because his wife is in the room with him.
 - C) Ask his wife to leave the room for reasons of confidentiality.
 - D) First ask his wife what she thinks is going on.

46. The components of the health history include all of the following except which one?
- A) Review of systems
 - B) Thorax and lungs
 - C) Present illness
 - D) Personal and social items
47. Claire's daughter brings her in today after Claire fell at her home. Which assessments are indicated at this time?
- A) Orthostatic vital signs
 - B) Review of her medications
 - C) Assessment of gait and balance
 - D) All of the above
48. For which of the following patients would a comprehensive health history be appropriate?
- A) A new patient with the chief complaint of "I sprained my ankle"
 - B) An established patient with the chief complaint of "I have an upper respiratory infection"
 - C) A new patient with the chief complaint of "I am here to establish care"
 - D) A new patient with the chief complaint of "I cut my hand"
49. Suzanne, a 25 year old, comes to your clinic to establish care. You are the student preparing to go into the examination room to interview her. Which of the following is the most logical sequence for the patient-provider interview?
- A) Establish the agenda, negotiate a plan, establish rapport, and invite the patient's story.
 - B) Invite the patient's story, negotiate a plan, establish the agenda, and establish rapport.
 - C) Greet the patient, establish rapport, invite the patient's story, establish the agenda, expand and clarify the patient's story, and negotiate a plan.
 - D) Negotiate a plan, establish an agenda, invite the patient's story, and establish rapport.

50. You arrive at the bedside of an elderly woman who has had a stroke, affecting her entire right side. She cannot speak (aphasia). You are supposed to examine her. You notice that the last examiner left her socks at the bottom of the bed, and although sensitive areas are covered by a sheet, the blanket is heaped by her feet at the bottom of the bed.

What would you do next?

- A) Carry out your examination, focusing on the neurologic portion, and then cover her properly.
 - B) Carry out your examination and let the nurse assigned to her “put her back together.”
 - C) Put her socks back on and cover her completely before beginning the evaluation.
 - D) Apologize for the last examiner but let the next examiner dress and cover her.
51. Which of the following changes are expected in vision as part of the normal aging process?
- A) Cataracts
 - B) Glaucoma
 - C) Macular degeneration
 - D) Blurring of near vision
52. A 25-year-old radio announcer comes to the clinic for an annual examination. His BMI is 26.0 kg/m^2 . He is concerned about his weight. Based on this information, what is appropriate counsel for the patient during the visit?
- A) Refer the patient to a nutritionist because he is anorexic.
 - B) Reassure the patient that he has a normal body weight.
 - C) Give the patient information about reduction of fat, cholesterol, and calories because he is overweight.
 - D) Give the patient information about reduction of fat and cholesterol because he is obese.

Questions from the [Global Health e-book](#):

53. The relative importance or burden of a disease within a population will depend on a number of factors including

- A. Disease frequency
- B. Disease severity
- C. Disease consequences
- D. All of the above

Ref. Page: 2

54. A major challenge to developing a burden of disease profile in low and middle-income countries relates to

- A. Unwillingness to share complete information
- B. Conflicting disease definitions
- C. Challenges obtaining information related to cause of death
- D. All of the above

Ref. Page: 4

55. Reproductive health related metrics include

- A. Neonatal mortality rate
- B. Maternal mortality rate
- C. Infant mortality rate
- D. All of the above

Ref. Page: 8

56. Measures of health status that combine mortality and morbidity data

- A. Facilitate comparisons both within and across populations
- B. Help estimate the quantitative health benefits from interventions
- C. Serve as tools to assist with resource allocation
- D. All of the above

Ref. Page: 13

57. Cultural change can occur through the following conditions

- A. People migrate to new settings
- B. People acquire additional education and experiences
- C. Conditions change around people
- D. All of the above

Ref. Page: 44

58. The concept of cultural competence must include

- A. Understanding and appreciating health beliefs and behaviors in their cultural contexts
- B. Effectively imposing your biases on other cultures' belief systems
- C. Providing effective care to diverse peoples without having to tailor health care delivery to each patient's needs.
- D. All of the above

Ref. Page: 47

59. Based on a simple framework, the four key factors of healthcare systems include

- A. Government
- B. Population
- C. Financing agents
- D. Service providers
- E. All of the above

Ref. Page: 618

60. Some of the key objectives of health-sector reform include

- A. Improving equity of access to health care services
- B. Increasing state role in the financing and regulation of services
- C. Increasing reimbursement for health care providers
- D. All of the above

Ref. Page: 642

Answer Key

1. B
2. A
3. B
4. D
5. B
6. A
7. D
8. C
9. A
10. D
11. D
12. A
13. C
14. A
15. D
16. C
17. C
18. B
19. A
20. B
21. C
22. D
23. A
24. C
25. A
26. B
27. C
28. A
29. B
30. A
31. A
32. D
33. C
34. D
35. D
36. C
37. C
38. D
39. C
40. A
41. B
42. A
43. C
44. A

- 45. A
- 46. B
- 47. D
- 48. C
- 49. C
- 50. C
- 51. D
- 52. C
- 53. D
- 54. C
- 55. B
- 56. D
- 57. D
- 58. A
- 59. E
- 60. A