

Origin: Chapter 3- Applying a Nursing Model for Promoting Wellness in Older Adults, 1

1. A nurse is using the Functional Consequences Theory as a lens for planning client care in a health care facility. Which of the following is a key element of this nursing theory?
  - A) Most problems affecting older adults may be attributed to age-related changes.
  - B) Most functional consequences cannot be addressed through nursing interventions.
  - C) Wellness is a concept that is broader than just physiologic functioning.
  - D) The Functional Consequences Theory is an alternative to holistic nursing care.

Ans: C

**Feedback:**

Within the Functional Consequences Theory, wellness is a central concept that encompasses more than the older adult's level of physiologic function. Most problems affecting older adults are attributable to risk factors, even though age-related changes are indeed relevant and inevitable. Functional consequences can usually be addressed by nursing interventions, and holistic care is not an alternative to Functional Consequences Theory, but rather a component of the theory.

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2. A nurse is working with a 79-year-old client newly diagnosed with osteoporosis. Which of the following interactions promotes achievement of wellness outcomes?
  - A) The nurse performs strength and mobility training appropriate to the client's age and diagnosis.
  - B) The nurse teaches the client about bone density in older women and the role of vitamin D and calcium intake.
  - C) The nurse plans interventions in light of the body–mind–spirit interconnectedness of the client.
  - D) The nurse teaches the client about how her risk factors are a consequence of age.

Ans: B

**Feedback:**

Teaching about bone density and the role of vitamin D reflects an acknowledgment that the client's diagnosis is attributable to both the client's age-related changes and risk factors such as inadequate nutrient and mineral intake. Strength and mobility training may well be an appropriate intervention, but it does not necessarily acknowledge the interplay of risk factors and age in the client's diagnosis. The body–mind–spirit interconnectedness is a component of the Functional Consequences Theory, but it does not address the relationship between risk factors and age per se. Teaching about risk factors as a consequence of age implies that these factors are an inevitable consequence of age, which is not the case.

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3. A nurse is teaching a colleague about the difference between age-related changes and risk factors. Which of the following examples should the nurse use when discussing age-related changes?
- A) An older adult with a diagnosis of diabetes mellitus
  - B) An older adult who is obese
  - C) An older adult with obstructive lung disease
  - D) An older adult with decreased bowel motility

Ans: D

**Feedback:**

Decreased bowel motility is an example of a phenomenon that is a normal consequence of the aging process. Diabetes, obesity, and obstructive lung disease are all phenomena that may constitute or exacerbate health problems for older adults, but they are not age-related changes.

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4. A nurse determines risk factors for an 81-year-old client's plan of care. Which of the following characteristics of the client would the nurse consider as a risk factor? (Select all that apply.)
- A) Chronic bronchitis
  - B) Loss of bone density
  - C) Decreased vital lung capacity
  - D) Delayed gastric emptying
  - E) Digoxin (Lanoxin) toxicity

Ans: A, E

**Feedback:**

Chronic bronchitis would be considered a pathologic process and risk factor for disease, rather than an expected or inevitable age-related change. Adverse medication effects are also considered risk factors. Loss of bone density, decreased vital lung capacity, and delayed gastric emptying are all examples of normal, age-related changes.

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5. A nurse is identifying positive functional consequences as part of the development of an older client's care plan. Which of the following outcomes exemplifies the concept of positive functional consequences for an older adult? (Select all that apply.)
- A) The older adult with arthritis can walk 1 mile without pain.
  - B) The older adult who is overweight develops a plan to lose 2 lb a month.
  - C) The older adult has constipation from pain medication.
  - D) The older adult schedules cataract surgery.

Ans: A, B, D

**Feedback:**

Positive functional consequences can result from automatic actions or purposeful interventions. Older adults bring about positive functional consequences (also called wellness outcomes) when they compensate for age-related changes and risk factors, such as cataracts and chronic conditions. Nurses help older adults achieve positive functional consequences by teaching about health promotion interventions to improve functioning and quality of life.

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6. A nurse uses the Functional Consequences Theory to assess older adults. Which of the following situations best demonstrates the effect of physical environment on the older adult?
- A) A resident of a care facility experiences a fall because there are not grab bars outside his bathtub.
  - B) A hospital client develops *Clostridium difficile*-related diarrhea because a care provider did not perform adequate handwashing.
  - C) An older adult cannot afford a wheeled walker and suffers a fall while trying to ambulate using a cane.
  - D) An assisted living resident requires care for emphysema that resulted from a 70 pack-year history of cigarette smoking.

Ans: A

**Feedback:**

An adverse health effect that results from the inadequacy of one's surroundings (such as the lack of safety devices) is an example of the domain of environment. Although the use of incorrect equipment, health problems caused by lifestyle factors, and infections that result from caregiver negligence create risk factors for older adults, these problems are not situated within the domain of environment.

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7. A nurse plans interventions to promote wellness in older adults. Which of the following interventions is most appropriate to meet this goal?
- A) Talking with the physician about available treatment options for an older adult with an acute illness
  - B) Facilitating early mobilization to prevent muscle wasting and loss of function in an older hospital client
  - C) Deferring the final decision regarding an older adult's choice of assisted living facility to the person's son and daughter
  - D) Placing a 76-year-old on the waitlist for a kidney transplant

Ans: B

**Feedback:**

Goals of the Functional Consequences Theory include improving or preventing declines in functioning and addressing quality-of-life concerns. Discussing treatment options, having family members make an older adult's decisions, and placing an individual on a waitlist for a transplant are not direct manifestations of this principle.

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8. A nurse in the long-term care facility plans care to improve quality of life. Which of the following actions is most likely to enhance the older adult's connectedness?
- A) Teaching a client who has had a below-the-knee amputation how to care for his stump
  - B) Organizing a client's intravenous antibiotic therapy on an outpatient basis
  - C) Performing a focused respiratory assessment on a client who has a diagnosis of lung cancer
  - D) Advocating for a husband and wife to remain in the same room of a long-term care facility, as is their preference

Ans: D

**Feedback:**

Advocating for a husband and wife to remain in the same room of a long-term care facility, as is their preference fosters connectedness, a component of the older adult's quality of life. Teaching wound care, organizing treatment, and adequately assessing a client are aspects of good care, but none is a direct contributor to connectedness.

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9. A nurse plans the care of older adults in a long-term care setting. Which of the following interventions incorporates the residents' connectedness to society?
- A) Ensuring that there are multiple television sets available to residents of the facility
  - B) Arranging regular visits by schoolchildren to the facility
  - C) Conducting reminiscence therapy
  - D) Allowing residents to have input into the meal planning at the facility

Ans: B

**Feedback:**

Social connectedness can be fostered by arranging meaningful contact between older adults and other members of society. TV, reminiscence, and input into routines may all have benefits, but none is likely to create a sense of connectedness with society.

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10. An 89-year-old adult is dismayed that his primary care provider referred him for a driving evaluation because he experiences vision problems and slower reaction time. Which of the following concepts is illustrated in this example?

- A) Risk factors
- B) Age-related changes
- C) Positive functional consequences
- D) Wellness outcomes

Ans: B

**Feedback:**

Changes in vision and response time are considered to be age-related changes. These are not necessarily risk factors and they would not be considered positive functional consequences or wellness outcomes.

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11. A nurse in a community setting plans wellness outcomes with a 68-year-old female client who desires to participate in a half-marathon run. Which of the following outcomes should the nurse document?
- A) The client will remain free of disease.
  - B) The client will participate in daily aerobic activity class without falls.
  - C) The client will increase activity until able to run 30 minutes.
  - D) The client will participate in the half marathon that is scheduled in 6 months.

Ans: D

**Feedback:**

Health is individually determined, based on the functional capacities that are perceived as important by that person, in this case, participating in a half marathon. Remaining free from disease and expecting the older adult to participate in daily aerobic activity class may not be pertinent to this client. Increasing activity by only 30 minutes at time minimizes the client's goal.

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12. A nurse assesses a 71-year-old person who has smoked for 43 years. Which of the following is a negative functional consequence of smoking for this person? (Select all that apply.)
- A) Children are exposed to secondhand smoke
  - B) Low oxygen-carrying capacity
  - C) Abnormal breath sounds
  - D) The ability to run a 5-K race
  - E) Pulmonary disease

Ans: B

**Feedback:**

Functional consequences are the observable effects of actions, risk factors, and age-related changes that influence the quality of life or day-to-day activities of older adults. Low oxygen-carrying capacity, abnormal breath sounds, and pulmonary disease are negative functional consequences of smoking. The ability to run a 5-K race is lost with smoking. Children may be exposed to secondhand smoke. These are not functional consequences of smoking for this person.

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13. A home health nurse performs an admission on a 90-year-old client who has a small dog. The client states that the most important problem is urinary incontinence. The client's blood pressure is 135/90 mm Hg, with last bowel movement 3 days ago. Which of the following areas addresses the person's goals?
- A) Safety
  - B) Incontinence
  - C) Blood pressure
  - D) Constipation

Ans: B

**Feedback:**

Although nurses address safety, blood pressure, and constipation as part of a comprehensive care plan, it is imperative to begin by addressing the older adult's priority.

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14. A nurse cares for an older adult at risk for a venous stasis ulcer. Which interventions should the nurse include in the teaching with this older adult? (Select all that apply.)
- A) Health promotion interventions
  - B) Functional consequences
  - C) Wellness outcomes
  - D) Environmental modifications

Ans: A, D

**Feedback:**

The nurse should include health promotion interventions and environmental modifications to create wellness outcomes for this client. Functional consequences and wellness outcomes are not interventions.

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15. An older adult reflects, "Why should I go to the gym, I'm going to get fat anyway." Which response by the nurse is most appropriate?
- A) "Age-related changes are inevitable; however, most problems affecting older adults are related to risk factors, so it's important to do what you can to maintain a high level of functioning."
  - B) "Older adults experience positive or negative functional consequences because of age-related changes."
  - C) "Risk factors do impact consequences, but you can override them."
  - D) "Many problems affecting older adults are based on genetics."

Ans: A

**Feedback:**

Although age-related changes are inevitable, most problems affecting older adults are related to risk factors. Older adults experience positive or negative functional consequences because of a combination of age-related changes and additional risk factors. Interventions can be directed toward alleviating or modifying the negative functional consequences of risk factors.