Nurs1117 Unit 4 Promoting Healthy Physiologic Responses QUESTIONS AND CORRECT VERIFIED ANSWERS (DETAILED ANSWERS) ALREADY GRADED A+ 100% GUARANTEED TO PASS CONCEPTS!!

Phases of Surgery - **√ANSWER√/**->>>>Preoperative Intraoperative Postoperative

Preoperative Nursing Process - √√ANSWER√√->>>>Previous surgery Nutrition Use of ETOH, illicit drugs, or nicotine ADL's Occupation Coping Patterns Support System

Assessment- Health History - √√ANSWER√√->>>>>Cardiovascular, Respiratory, Renal/Liver, Endocrine Diseases

Cardiovascular Diseases - √√ANSWER√√->>>>>recent MI, thrombocytopenia, hemophilia, CHF, dysrhythmias

Hemophilia - $\sqrt{4}$ ANSWER $\sqrt{4}$ ->>>>>condition where blood doesn't clot normally

Respiratory diesases - $\sqrt{4}$ ANSWER $\sqrt{4}$ ->>>>>pneumonia, COPD, increase risk of respiratory depression from anesthesia and post-op complications (atelectasis, pneumonia, acid-base alterations)

Renal and liver diseases - $\sqrt{4}$ ANSWER $\sqrt{4}$ ->>>>>affects fluid and electrolyte balances, alters metabolism and excretion of medications, impairs wound healing

Endocrine diseases - $\sqrt{4}$ ANSWER $\sqrt{4}$ ->>>>DM increase risk for hypoglycemia or acidosis and slows wound healing

DM - √√ANSWER√√->>>>#1 endocrine disease for delayed wound healing

Medications- Health history - ✓✓ANSWER✓✓->>>>>Anticoagulants Diuretics Tranquilizers Corticosteriods Anitbiotics

Anticoagulants - $\sqrt{4}$ ANSWER $\sqrt{4}$ ->>>>Medication that may increase hemorrhaging

Aspirin - $\sqrt{4}$ ANSWER $\sqrt{4}$ ->>>>#1 anticoagulant patients are on. Mild; makes platelets slippery. Bruise easily. Affects are 7-10 days.

Diuretics - $\sqrt{4}$ ANSWER $\sqrt{4}$ ->>>>Medication that may lead to electrolyte imbalance

Tranquilizers - $\sqrt{4}$ ANSWER $\sqrt{4}$ ->>>>Medication that increase hypotensive effects of anesthesia

Corticosteriods - $\sqrt{4}$ ANSWER $\sqrt{4}$ ->>>>Medication that can cause cardiovascular collapse with abrupt withdrawal.

life of platelets - √√ANSWER√√->>>>>7-10 days

Informed Consent - $\sqrt{4}$ ANSWER $\sqrt{4}$ ->>>>Nurses responsibility to make sure it gets done, but not to actually do it

Inclusions of informed consent - √√ANSWER√√->>>>>describe procedure underlying disease process name & qualifications of person performing procedure explaining risks explain patients right to refuse and consent can be withdrawn at anytime explanation of expected outcome, recovery, & home going plan

Informed consent - $\sqrt{ANSWER}\sqrt{\sqrt{->>>>}}$ Patients voluntary agreement to undergo a procedure or treatment Should be completed before procedure/treatment Collected by person performing procedure Legal document

When is informed consent not legal? - $\sqrt{4}$ ANSWER $\sqrt{4}$ ->>>>>If patient is confused, unconscious, sedated, mentally incompetent, or a minor and family member, POA, or guardian can sign in this instance

Interventions during pre-op phase - √√ANSWER√√->>>>>>hygiene, skin prep determine that skin is intact pre-op shower possible removal of hair

True - $\sqrt{ANSWER}\sqrt{\sqrt{->>>>>}}$ True or false? Surgeries have been cancelled due to rashes or skin breakdown the day of surgery

Pre-op shower - $\sqrt{4}$ ANSWER $\sqrt{4}$ ->>>>Chlorhexidine gluconate (CHG) soap

False - \checkmark ANSWER \checkmark ->>>> True or false? Hair is automatically removed from patient prior to surgery?

Psychologically Therapeutic communication Avoiding false reassurance - \checkmark ANSWER \checkmark ->>>>Preparing the patient for surgery

Psychological preparation - $\sqrt{4}$ ANSWER $\sqrt{4}$ ->>>>relieve anxiety and fear

Therapeutic communication - $\sqrt{ANSWER}\sqrt{\sqrt{->>>>>}}$ Establish and maintain a therapeutic relationship Allow patient to verbalize fears and concerns Use active listening skills, answer questions, validate messages, use touch appropriately

False reassurance - √√ANSWER√√->>>>>"You're going to be fine"

What is EBP? - $\sqrt{4}$ ANSWER $\sqrt{4}$ ->>>>evidence-based practice

Pain management teaching - √√ANSWER√√->>>>>The pain reported by the patient is the determining factor of pain control Pain assessment every 2 hours post-op Older patients at greater risk for over/under treatment of pain Little addiction concern with post-op pain meds Understanding timing of pain meds for best effect Splinting the incision

Examples of timing pain meds - $\sqrt{4}$ ANSWER $\sqrt{4}$ ->>>>q4h q6h prn

How do you splint an incision? - $\sqrt{4}$ ANSWER $\sqrt{4}$ ->>>>>coughing with pillow covering incision

Older adults have greater concern - $\sqrt{4}$ ANSWER $\sqrt{4}$ ->>>>addiction of pain meds

Pre-op interventions - $\checkmark \checkmark$ ANSWER $\checkmark \checkmark$ ->>>>Teach about physical activities- how much they cant walk, what they can do, etc. Deep breathing exercises Coughing