LESSON 37.1

PRETEST

- 1. Palliative surgery is performed to
- a. diagnose a problem.
- b. cure a problem.

b. leg exercises.

- c. prevent serious consequences. d. provide pain relief.
- 2. To prevent thrombophlebitis, the nurse focuses teaching on
 - a. deep breathing exercises.
- c. turning techniques. d. incentive spirometry.
- 3. The primary role of the scrub person is to
 - a. communicate with people outside of the operating room.
 - b. check equipment function.
 - c. set up the sterile instruments.
 - d. take charge of the specimens.
- 4. Marking the surgical site should be performed
 - a. using sterile technique.
 - b. in the operating room.
 - c. without the patient's awareness.
 - d. before the patient is given preoperative medications.
- 5. After surgery, patients remain in the postanesthesia care recovery unit (PACU) until
 - a. vital signs are stable, and the patient is awake and responds to stimuli.
 - b. vital signs are stable, and the patient is sleeping soundly.
 - c. vital functions are depressed, and the patient is breathing irregularly.
 - d. fluids and electrolytes are balanced, and the patient is able to eat.
- 6. The four types of anesthesia are general, regional, conscious sedation, and
- a. palliative. c. local. b. curative. d. perioperative. 7. An important concern for both infant and elderly surgical patients is c. inability to communicate with the surgeon. a. use of street drugs. b. low body weight. d. maintaining core body temperature. 8. The four phases of surgical care are preoperative care, intraoperative care, postanesthesia care, and a. perioperative care. c. PACU care. b. recovery care. d. postoperative care. 9. A document that indicates the patient's desires regarding lifesaving measures in the event of a cardiac arrest or other complication that threatens basic function is called a(n) a. surgical consent. c. advance directive. b. living will. d. do not resuscitate order. 10. A postoperative device that is helpful to prevent atelectasis and hypoventilation is a(n) a. nasogastric tube. c. sequential compression device. b. pulse oximeter. d. incentive spirometer.

Answers

2. b 4. d 6. c 8. d 10. d	1. d	3. c	5. a	7. d	9. c
	2. b	4. d	6. c	8. d	10. d

BACKGROUND ASSESSMENT

Question: Maintaining fluid balance is an important element of care for the postoperative surgical patient. The patient's urinary output must be closely monitored to detect fluid imbalances. What measures should the nurse use to determine if the patient's urinary output is appropriate?

Answer: The nurse should use a urinometer on the urinary collection device to accurately monitor urine output every hour. If the urine output is less than 60 mL over a two-hour period, notify the charge nurse. The nurse should check the catheter to ensure that it is not kinked and that the patient is not lying on any part of it, obstructing urine outflow. Also, monitor the patient's fluid intake, and note the color of the urine. Urine should be pale yellow and clear when fluid intake is adequate.

