

## Chapter 02: Clinical Judgment and Systems Thinking

### Ignatavicius: Medical-Surgical Nursing, 10th Edition

#### MULTIPLE CHOICE

1. A nurse asks the charge nurse to explain the difference between critical thinking and clinical judgment. What statement by the charge nurse is **best**?
  - a. "Clinical judgment is often clouded by erroneous hypotheses."
  - b. "Clinical judgment is the observable outcome of critical thinking."
  - c. "Critical thinking requires synthesizing interactions within a situation."
  - d. "Critical thinking is the highest level of nursing judgment."

ANS: B

Clinical judgment is the observable outcome of critical thinking and decision making. It can be, but most often is not, clouded by erroneous hypotheses. Recognizing, understanding, and synthesizing interactions and interdependencies in a set of components designed for a specific purpose is systems thinking. Critical thinking is not the highest level of nursing judgment.

DIF: Understanding

TOP: Integrated Process: Teaching/Learning

KEY: Clinical judgment

MSC: Client Needs Category: Safe and Effective Care Environment: Management of Care

2. The nurse understands which information regarding patient-centered care?
  - a. A competency recognizing the client as the source of control of his or her care
  - b. A project addressing challenges in implementing patient-centered care
  - c. Purposeful, informed, and outcome-focused care of clients or families
  - d. The ability to use best evidence and practice when making care-related decisions

ANS: A

Patient-centered care is a QSEN competency that recognizes the patient or caregiver as the source of control and full partner in providing compassionate and coordinated care based on respect for the patient's preferences, values, and needs. QSEN is a project addressing the challenge of preparing future nurses with the knowledge, skills, and attitudes (KSAs) necessary to continuously improve the quality and safety of the health care systems in which they work. Critical thinking is the application of purposeful, informed, and outcome-focused care. The ability to use best evidence and practice when making care-related decisions is evidence-based practice.

DIF: Understanding

TOP: Integrated Process: Teaching/Learning

KEY: Patient-centered care

MSC: Client Needs Category: Safe and Effective Care Environment: Management of Care

3. A nurse wishes to participate in an activity that will influence health outcomes. What action by the nurse **best** meets this objective?
  - a. Creating a transportation system for health care appointments
  - b. Lobbying with a national organization for health care policy
  - c. Organizing a food pantry in an impoverished community
  - d. Running for election to the county public health board

ANS: B

All options are good choices for an altruistic nurse wishing to influence health outcomes; however, being involved in policy creation and health care reform is an activity specifically recognized to improve health outcomes. This action will also affect a wider population than the more local options.

DIF: Applying TOP: Integrated Process: Communication and Documentation

KEY: Health outcomes

MSC: Client Needs Category: Safe and Effective Care Environment: Management of Care

4. What factor **best** predicts a nurse's willingness to employ critical thinking?
- Caring
  - Knowledge
  - Presence
  - Skills

ANS: A

All attributes are important in nursing, however; the nurse's willingness to think critically is predicted by caring behaviors, self-reflection, and insight.

DIF: Remembering

TOP: Integrated Process: Nursing Process: Assessment

KEY: Critical thinking

MSC: Client Needs Category: Safe and Effective Care Environment: Management of Care

5. To demonstrate clinical reasoning skills, what action does the nurse take?
- Collaborating with co-workers to buddy up for lunch breaks
  - Delegating frequent vital signs on a new postoperative patient
  - Documenting a complete history and physical on an admission
  - Requesting the provider order medication for a client with high potassium

ANS: D

The components of clinical reasoning include assessing, analyzing, planning, implementing, and evaluating. This nurse shows the ability to analyze by interpreting the meaning of the lab value, to plan by anticipating the consequences of the lab value, and to implement by taking action.

DIF: Analyzing TOP: Integrated Process: Nursing Process: Implementation

KEY: Clinical judgment

MSC: Client Needs Category: Safe and Effective Care Environment: Management of Care

6. The new nurse asks the preceptor how context affects clinical judgment. What response by the preceptor is **best**?
- "Context considers the whole of the patient's story and circumstances."
  - "It shouldn't, only nursing knowledge would affect clinical judgment."
  - "Outside influences such as environment in which you provide care, influence your decisions."
  - "The context of the situation provides an extra layer of complexity to consider."

ANS: C

The context of a situation considers and supports clinical judgment. The factors within this layer—such as environment, time pressure, availability or content of electronic health records, resources, and individual nursing knowledge—have a direct impact on clinical judgment. The other two options are too vague to provide appropriate information.

DIF: Understanding TOP: Integrated Process: Teaching/Learning  
 KEY: Clinical judgment  
 MSC: Client Needs Category: Safe and Effective Care Environment: Management of Care

7. Once the nurse has considered all possible collaborative and client problems, what action does the nurse take next?
- Act on the observed cues.
  - Determine desired outcomes.
  - Generate solutions.
  - Prioritize the hypotheses.

ANS: D

Analyzing cues lead to a list of potential hypotheses. The nurse prioritizes them, determines the desired outcomes, generates solutions, and acts. This is part of the six-step clinical judgment model.

DIF: Understanding TOP: Integrated Process: Nursing Process: Diagnosis  
 KEY: Clinical judgment  
 MSC: Client Needs Category: Safe and Effective Care Environment: Management of Care

8. A nurse working in a medical home would do which of the following as part of the job?
- Advocate with insurance companies.
  - Coordinate interprofessional care.
  - Hold monthly team meetings.
  - Provide out-of-network specialty referrals.

ANS: B

The medical home concept came into being to decrease the fragmentation of care. On a daily basis, this nurse would expect to coordinate with the interprofessional care team. Advocating with insurance companies would not be a daily function. Monthly team meetings may or may not be needed. Out of network referrals would not be needed as the interprofessional team strives to provide comprehensive care.

DIF: Remembering TOP: Integrated Process: Nursing Process: Implementation KEY: Medical home  
 MSC: Client Needs Category: Safe and Effective Care Environment: Management of Care

9. A nurse is confused on why systems thinking is important since working on the unit involves caring for a few specific clients. What explanation by the nurse manager is **best**?
- “It’s a good way to conduct root-cause analysis.”
  - “It is important for quality improvement and safety.”
  - “Systems thinking helps you see the bigger picture.”
  - “You may enter management 1 day and need to know this.”

ANS: B

A systems thinking approach to care reinforces the nurse’s role in safety and quality improvement while expanding clinical judgment to include the patient’s place within the greater health care system in the context of care decisions. Root-cause analyses would be a small portion of systems thinking. It does give the nurse a big-picture view, but this answer is vague. The nurse may or may not ever join management.

DIF: Understanding TOP: Integrated Process: Teaching/Learning  
 KEY: Systems thinking  
 MSC: Client Needs Category: Safe and Effective Care Environment: Management of Care

### MULTIPLE RESPONSE

1. The expert nurse understands that critical thinking requires which elements to be present? *(Select all that apply.)*
  - a. Based on logic, creativity, and intuition
  - b. Driven by needs
  - c. Focused on safety and quality
  - d. Grounded in a specific theory
  - e. Guided by standards
  - f. Requires forming options about evidence

ANS: A, B, C, E

Critical thinking must be based on logic, creativity, and intuition; driven by patient, family, or community needs; focused on safety and quality; guided by standards, policies, ethics, and laws; based on principles of nursing process, problem-solving, and the scientific method (requires forming opinions and making decisions based on evidence); centered on identification of the key problems, issues, and risks; and grounded in strategies that make the most of human potential. It is not dependent on using a specific theory.

DIF: Understanding TOP: Integrated Process: Nursing Process: Planning  
 KEY: Critical thinking  
 MSC: Client Needs Category: Safe and Effective Care Environment: Management of Care

2. The nurse manager is conducting an annual evaluation of a staff nurse and is appraising the nurse's clinical reasoning. What nurse actions does the manager observe to help form this judgment? *(Select all that apply.)*
  - a. Anticipating consequences of actions
  - b. Delegating appropriately
  - c. Interpreting data
  - d. Noticing cues
  - e. Setting priorities

ANS: A, C, D, E

The phases of clinical reasoning include assessing (noticing cues), analyzing (interpreting data), planning (anticipating consequences and setting priorities), implementing, and evaluating. Delegating appropriately is not included in this model.

DIF: Applying TOP: Integrated Process: Nursing Process: Evaluation  
 KEY: Clinical reasoning  
 MSC: Client Needs Category: Safe and Effective Care Environment: Management of Care

3. According to the WHO, what does primary care involve? *(Select all that apply.)*
  - a. Empowered people and communities
  - b. Essential public functions
  - c. Multisectoral policy and action
  - d. Primary care
  - e. Priority consideration of chronic diseases

f. Elimination of chronic diseases

ANS: A, B, C, D

According to the WHO, primary care involves three main areas: empowered people and communities, primary care and essential public functions, and multisectoral policy and action. Primary care focuses on both prevention and management of chronic disease.

DIF: Remembering

TOP: Integrated Process: Teaching/Learning

KEY: Primary care, Systems thinking

MSC: Client Needs Category: Safe and Effective Care Environment: Management of Care

4. A nurse wishes to work in a community-based practice setting. Which areas would this nurse explore for employment? (*Select all that apply.*)
- Hospice facility
  - “Minute clinic”
  - Mobile mammography unit
  - Small community hospital
  - Telehealth
  - Home health care

ANS: A, B, C, E, F

The multiple avenues providing community-based care include hospice, “minute” or retail clinics, mobile screening and diagnostic services, telehealth, private medical practices, outpatient services, freestanding points of care, home health care, long-term ambulatory care, public health, and free clinics. Inpatient services in a hospital are not considered primary care sites.

DIF: Remembering

NURSYTESTS.COM TOP: Integrated Process: NA

KEY: Community-based care

MSC: Client Needs Category: Safe and Effective Care Environment: Management of Care