

57. As noted in the article, neonates with meconium aspiration also have an increased chance of complications such as
- myocardial infarction.
  - liver failure.
  - seizures.
58. In the ineffectively- or non-breathing infant without airway obstruction, the focus in the first minute of life should be on
- intubating.
  - ventilating.
  - suctioning.
59. For newborns 35 weeks' gestation or older, if positive-pressure ventilation is necessary it should start with
- room air (21% oxygen).
  - 30% oxygen.
  - 50% oxygen.
60. A nonvigorous infant is characterized by the Neonatal Resuscitation Program as meeting 1 or more criteria, including
- heart rate  $\leq$  120 beats per minute.
  - decreased muscle tone.
  - heel stick blood sugar  $<$  80 mmol/L.
61. The goal for the neonatal axillary temperature should be about
- 36.5°C (97.7°F).
  - 37°C (98.6°F).
  - 37.5°C (99.5°F).
62. In addition to information required by hospital protocol, the authors recommend that the identification band on the neonate should include the
- infant's medical record number.
  - infant's first and last name.
  - date and time of birth.
2. Research by Anglemeyer et al. (2014) revealed when people have access to firearms, the risk of completed suicide increases more than a minimum of
- 3-fold.
  - 4-fold.
  - 5-fold.
3. In the study described in this article, the factor participants ranked as the most significant when deciding to ask about in-home access to firearms was
- ED colleagues' attitudes about gun ownership.
  - state and local laws regulating gun ownership.
  - news stories about incidents of gun violence in their community.
4. When considering the risk for firearm injury or death, the firearm safety task most frequently part of the nurses' regular care to identify risk (e.g., if the patient was suicidal) was a current/past history of
- gang violence.
  - firearm injury.
  - substance abuse.
5. The nurses in this study were the most likely to assess the level of risk (e.g., if firearms were present in the home) if a patient presented with a current/past history of
- a behavioral health diagnosis.
  - intimate partner violence.
  - violent behavior.
6. As a reflection of knowledge, attitudes, and beliefs related to firearms, the highest percentage of nurses strongly agreed with which statement?
- People should be allowed to have handguns in their homes.
  - I am comfortable discussing firearm safety with patients and families.
  - Gun violence is a problem in the community where my emergency department is located.
7. Of the following statements, the highest percentage of nurses strongly disagreed with which statement related to their knowledge, attitudes, and beliefs?
- The number of completed suicides is high because handguns are readily available.
  - Regardless of the potential for injury, everyone has the right to own a gun.
  - There is sufficient time during an ED visit to discuss firearm safety with patients.

### RESEARCH TEST QUESTIONS

#### Emergency Nurses' Perceptions of Risk for Firearm Injury and Its Effect on Assessment Practices: A Mixed Methods Study (pp. 54-66)

1. As noted in the article, which statement is true regarding the restriction of firearms?
- It has not been shown to lower the rate of firearm-caused suicide.
  - There is no apparent effect on the overall rates of suicide.
  - It lowers the rate of firearms suicides with the greatest effects among children ages 0 to 19 years.

8. As reflected in linear regression modeling, nurses who were more likely to ask patients about in-home access to firearms were those who had
- A. recent experience treating patients with firearms injuries.
  - B. some education about firearms safety.
  - C. experience treating pediatric firearms victims.
9. A barrier to inquiring about access to firearms consistently identified in the focus group data was that
- A. staff were afraid for their own safety.
  - B. staff did not feel that a policy related to asking about firearms was necessary.
  - C. there was minimal or no gun violence in the nurses' communities.

#### **Use of Group Concept Mapping to Identify Patient Domains of Uncertainty That Contribute to Emergency Department Use (pp. 46-53)**

10. Among the patients in the group concept mapping (GCM) groups, the most commonly reported chronic condition was
- A. hypertension.
  - B. high cholesterol.
  - C. depression or anxiety.
11. External domains of uncertainty identified in the study described in this article include
- A. consequences.
  - B. causation.
  - C. finances.
12. The internal domains of uncertainty include which of the following?
- A. treatment plan
  - B. trust in institution
  - C. primary care options
13. A domain from this study that has not been documented in other published conceptual models of emergency care use is
- A. severity.
  - B. psychological concerns.
  - C. alternative care options.
- Triangulation: A Method to Increase Validity, Reliability, and Legitimation in Clinical Research (pp. 103-105)**
14. What type of triangulation helps to ensure individual bias is better controlled in the research process?
- A. investigator
  - B. theory
  - C. data source
15. What type of triangulation helps to guide research design, research study implementation, and interpretation of data?
- A. data source
  - B. theory
  - C. method
16. Which driving factor influences the type of triangulation that should be incorporated into a research study?
- A. the research budget
  - B. the researcher's experience
  - C. the research question(s)
17. Which approach supports the belief that knowledge is constructed through lived and shared experiences?
- A. positivist
  - B. post-positivist
  - C. constructivist
18. Which of the following must be included in a study to assist the reader in deciding the quality of a study's outcome?
- A. a plan for how data will be used in triangulation
  - B. research supporting the particular type of triangulation used
  - C. other studies that used the same triangulation style
19. Which statement is true regarding the use of triangulation in research?
- A. Using triangulation prevents errors in data collection.
  - B. Triangulation can help to identify data that does not fit the expected outcomes.
  - C. Data analysis will be accurate, depending on the type of triangulation employed.

20. Research data must be as rigorous and as unbiased as possible, in part because the average delay in implementing research into practice is
- 7 months.
  - 7 years.
  - 17 years.

### PRACTICE IMPROVEMENT TEST QUESTIONS

#### Does a Provider in Triage and Rapid Medical Evaluation Help With Left Without Being Seen Rates and ED Crowding? (pp. 38-45)

- In the project described in this article, nurse protocol interventions were not performed if wait times were less than a maximum of
  - 20 minutes.
  - 30 minutes.
  - 45 minutes.
- What received the greatest priority in this project?
  - initiating nurse protocols
  - patient discharges
  - patients awaiting triage
- Staffing during the rapid medical evaluation (RME) required
  - 1 more ED technician.
  - 1 less ED nurse.
  - 1 more ED nurse.
- The RME with provider in triage (PIT) required the addition of a dedicated
  - 3<sup>rd</sup>-year emergency medicine resident.
  - ED nurse practitioner.
  - ED physician assistant.
- In the RME with PIT, nurses did not use protocol orders except for patients warranting the
  - abdominal pain protocol.
  - seizure protocol.
  - chest pain protocol.
- The RME with PIT in triage differed from the RME without PIT because the PIT
  - physically brought the patients to the triage bay.
  - monitored labs.
  - collected blood specimens.
- Which statement is true regarding the results obtained during the RME?
  - The left without being seen rate was significantly lower.
  - The door-to-MD time decreased significantly for the ESI 3 group.
  - The average door-to-disposition time decreased significantly for ESI 5 patients.
- Compared to the post-RME without PIT days, on post-RME with PIT days the
  - ESI 4 door-to-disposition times decreased.
  - ED length of stay of admitted patients increased.
  - ED length of stay for discharged patients decreased.

#### Educating Emergency Department Staff on the Identification and Treatment of Human Trafficking Victims (pp. 16-23)

- Which statement is true regarding human trafficking in the United States?
  - About 92% of victims are women.
  - Approximately 30% of victims are minors.
  - The majority of victims are used in labor trafficking.
- In the 2014 study by Lederer & Wetzel, of the 88% of trafficking victims who received medical care during their captivity, what percentage were seen and treated in hospital emergency departments?
  - 42%
  - 63%
  - 81%
- According to the Coalition to Abolish Slavery and Trafficking, what percentage of victims who accessed health care services while in captivity, reported they were provided with information and/or resources about trafficking?
  - 3.3%
  - 13.3%
  - 23.3%
- The online education described in this article could be completed in about
  - 20 minutes.
  - 45 minutes.
  - 1 hour.
- The training module increased staff's confidence in identifying trafficking victims in the emergency department from an average level of 4/10 to
  - 7/10.
  - 8/10.
  - 9/10.