

41. In the 2018 literature review by Sambor comparing REBOA to resuscitative thoracotomy (RT) with aortic cross-clamping, patients treated with REBOA demonstrated
- fewer ischemic injuries.
  - greater systolic blood pressures.
  - shorter lengths of stay in the intensive care unit.
42. Nunez et al. (2017) reported that, compared to patients treated with RT, patients treated with REBOA
- required embolization in 26% of cases (RT, 9.6%).
  - required transfusions at a rate of 75% (RT, 86%).
  - had a mortality rate of 71.2% (RT, 78.1%).
43. The author reports that chief complications related to REBOA include
- catheter site infection.
  - pseudoaneurysm of the iliac artery.
  - dissection of the aorta.
44. The practice of using intermittent or partial occlusion with REBOA may mitigate the effects of
- reperfusion injury.
  - arterial perforation.
  - aortic stenosis.
45. Tyler, at the Harbor – University of California – Los Angeles Medical Center, reported that a critical aspect of insertion of the catheter for REBOA is the documentation of
- catheter size.
  - balloon up time.
  - hemodynamic wave form.
3. The educational intervention employed in this research study included a
- 2-minute video.
  - pocket card with reminders.
  - 30-minute lecture.
4. Results of this study revealed which of the following?
- There was an 8% increase in the therapeutic use of ondansetron for documented nausea or vomiting.
  - More patients who received hydromorphone than morphine were treated with prophylactic ondansetron.
  - There were no cases of documented rescue antiemetic therapy in the postintervention period.
5. The absolute reduction in antiemetic prophylaxis in the post-intervention period was
- 5%.
  - 10%.
  - 15%.

### What's in a Sample? Why Selecting the Right Research Participants Matters (pp. 332-334)

6. The author reports that the key principle to follow when choosing a research sample is to ensure that it is
- a large enough sample to accomplish the research goals.
  - a representative sample.
  - a random sample.
7. The difference between the sample and the population that it is meant to represent refers to
- sampling error.
  - sampling bias.
  - sampling randomization.
8. One common example of sampling bias is when a sample of participants is enrolled based on
- gender.
  - geographic location.
  - volunteering.
9. Which of the following techniques can reduce sampling error?
- probability sampling
  - qualitative sampling
  - snowball sampling
10. An example of probability sampling is
- quota sampling.
  - purposive sampling.
  - stratified random sampling.

### RESEARCH TEST QUESTIONS

#### Medical and Nursing Staff Education Reduces Use of Prophylactic Ondansetron with Opioids in the Emergency Department (pp. 273-277)

1. Even when no prophylactic antiemetic is offered, the incidence of nausea after IV opioid analgesia in the emergency department is
- 6.4%.
  - 10.4%.
  - 14.4%.
2. As noted in the article, use of ondansetron is associated with
- PR interval prolongation.
  - QTc prolongation.
  - ST segment elevation.

11. The most common method of nonprobability sampling is  
**A.** cluster sampling.  
**B.** convenience sampling.  
**C.** systematic sampling.
12. Strategies used in purposive sampling in qualitative research include  
**A.** criterion sampling.  
**B.** random sampling.  
**C.** probability sampling.

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**The Relationship Between Personality Characteristics, Tenure, and Intent to Leave Among Emergency Nurses (pp. 265-272)**

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13. In the 2008 meta-analysis by Zimmerman, what personality trait had the strongest (negative) relationship with intent to leave?  
**A.** conscientiousness  
**B.** emotional stability  
**C.** extraversion
14. Zimmerman (2008) reported that one of the 2 personality traits with the strongest (negative) relationship with actual turnover was  
**A.** agreeableness.  
**B.** extraversion.  
**C.** openness to experience.
15. Low levels on the Honesty/Humility scale on the HEXACO-PI-R depict characteristics such as  
**A.** lacking a desire for social status.  
**B.** possessing materialistic behaviors.  
**C.** avoiding manipulating others.
16. As noted on the HEXACO-PI-R, persons with high levels of emotionality  
**A.** tend not to experience anxiety due to stress.  
**B.** are confident and enthusiastic.  
**C.** require emotional support from others.
17. High levels of openness depict persons who are  
**A.** inquisitive.  
**B.** cooperative.  
**C.** organized.
18. Results from the research study outlined in this article indicate that ED nurses had significantly higher levels of humility when they also had  
**A.** less than 3 years ED tenure.  
**B.** 3 – 5 years ED tenure.  
**C.** more than 10 years ED tenure.
19. Compared to ED nurses who had tenures more than 10 years, nurses with tenures less than 2 years and intent to leave within 1 year had a high level of  
**A.** emotionality.  
**B.** extraversion.  
**C.** openness.

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**The Effect of Parental Presence on Pain and Anxiety Levels During Invasive Procedures in the Pediatric Emergency Department (pp. 278-285)**

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20. Results from the study described in this article reveal that children had significantly higher levels of pain at the time of an invasive procedure in which group?  
**A.** parental-involvement  
**B.** parental-presence  
**C.** parental-absence
21. As noted in the article, there is a direct relationship between the level of pain and the level of  
**A.** sadness.  
**B.** anxiety.  
**C.** loneliness.
22. This study demonstrated that the preprocedural pain levels and trait anxiety levels of children were higher when  
**A.** they were going to be admitted to the hospital.  
**B.** their parents had high trait anxiety levels.  
**C.** they had a history of undergoing painful procedures.

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**Emergency Nurses' Department Design Recommendations for Improved End-of-Life Care (pp. 286-294)**

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23. In the 2006 study by Heaston et al., the largest obstacles to providing EOL care in the emergency department included  
**A.** a lack of training.  
**B.** limited pastoral care.  
**C.** increased patient workload.
24. The most commonly identified ED obstacle identified in the study described in this article was  
**A.** angry family members.  
**B.** limited space.  
**C.** a lack of support staff.

25. What did several nurses in this study report was lacking for grieving family members?
- a private grieving room
  - adequate time to speak to the doctor
  - a social worker
26. What did one nurse report as limiting the amount of time a family could spend with the patient after death?
- the need for refrigeration for patients who were medical examiner cases
  - the discomfort of other patients when they heard the grieving family
  - a shortage of resuscitation rooms
27. What was specifically reported by 20.9% of the nurses in this study as a top obstacle to providing EOL care?
- the lack of a chapel
  - the lack of privacy
  - the lack of a dedicated family liaison
28. What was overwhelmingly viewed by nurses as an important supportive design element for EOL care?
- large private rooms with doors
  - comfortable chairs in a sufficient number for the family
  - acoustic panels on the walls and ceilings for auditory privacy
29. What was perceived as an obstacle to EOL care by some nurses and helpful for EOL care by other nurses in this study?
- overhead music to increase auditory privacy
  - a room furnished to resemble a bedroom
  - rooms near the nurses' station
3. Extrinsic risk factors for ED falls include the presence upon admission of
- mental illness.
  - multiple medical devices.
  - multiple comorbidities.
4. The authors note that a high number of patients who fell during this project
- fell in the bathroom.
  - sustained suturable lacerations.
  - fell with a staff member nearby.
5. The greatest number of patients who fell during this project had an acuity level of
- 2.
  - 3.
  - 4.
6. Most of the falls during this project occurred between
- 0700 – 1100.
  - 2300 – 0300.
  - 0300 – 0700.
7. The fall-risk assessment tool used in this project guides nurses to assess the
- distance between patients' rooms and restrooms.
  - impact of crowded hallways.
  - patients' sensory deficits.
8. Universal fall precautions at the facility described in this article include the use of
- gait belts.
  - "FALL RISK" stamped on hospital wristbands.
  - bright overhead lighting.

### PRACTICE IMPROVEMENT TEST QUESTIONS

#### Catching Quality Before It Falls: Preventing Falls and Injuries in the Adult Emergency Department (pp. 257-264)

- According to the Centers for Disease Control and Prevention, the number one predictor for a future fall is
  - confusion.
  - vision loss.
  - a previous fall.
- Common intrinsic risk factors for falls identified in the quality improvement project described in this article include
  - older Black women.
  - complaints of pain.
  - requires assistance with mobility.
- A survey distributed to staff post-implementation revealed which of the following?
  - About 85% of responders thought the sign and education were easy to locate and use.
  - The time required to initiate the fall sign and provide education did not interfere with overall patient care.
  - Almost 72% of responders thought the sign and education improved communication to reduce patient falls.
- For patients at high risk for falls, the intervention implemented in this project was a stop sign placed outside the patient's room that was
  - yellow.
  - red.
  - purple.
- A survey distributed to staff post-implementation revealed which of the following?
  - About 85% of responders thought the sign and education were easy to locate and use.
  - The time required to initiate the fall sign and provide education did not interfere with overall patient care.
  - Almost 72% of responders thought the sign and education improved communication to reduce patient falls.