

Kaplan NCLEX-RN Medication Flashcards

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Welcome to your reviewer and NCLEX practice quiz guide about therapeutic communication techniques in nursing! This nursing test bank tests your knowledge and understanding of therapeutic communication. This quiz aims to help student nurses how to answer therapeutic communication questions in the NCLEX.

Therapeutic Communication Techniques in Nursing Practice Quiz

In this section are the NCLEX practice questions to help you familiarize yourself with therapeutic communication items. Included in this nursing test bank are 50 questions divided into two parts. We hope that this practice quiz will help you understand the essential elements and concepts of therapeutic communication.

Quizzes included in this guide are:

Want a full copy? If you want to print a copy of this quiz, please visit [FULL-TEXT: Therapeutic Communication Techniques NCLEX Practice Quiz \(50 Questions\)](#).

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Therapeutic Communication in Nursing NCLEX Practice | Quiz #1: 25 Questions This is the first part of your therapeutic communication quiz. Be sure to read the rationales after each question. Good luck, and we hope you learn a lot! Time limit: 0 Quiz Summary 0 of 25 Questions completed Questions: Information You have already completed the quiz before. Hence you can not start it again. Quiz is loadingâ€¦| You must sign in or sign up to start the quiz. You must first complete the following: Results Quiz complete. Results are being recorded. Results 0 of 25 Questions answered correctly Your time: Time has elapsed You have reached 0 of 0 point(s), (0) Earned Point(s): 0 of 0, (0)

0 Essay(s) Pending (Possible Point(s): 0)

Categories Not categorized 0% Congratulations, you have completed this quiz! Where are the rationales? Please click the View Questions button below to review your answers and read through the rationales for each question. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 Current Review Answered Correct Incorrect Question 1 of 25 1 . Question A patient with a diagnosis of major depression who has attempted suicide says to the nurse, "I should have died! I've always been a failure. Nothing ever goes right for me." Which response demonstrates therapeutic communication? A. "You have everything to live for."

B. "Why do you see yourself as a failure?"

C. "Feeling like this is all part of being depressed."

P

D. "You've been feeling like a failure for a while?" Correct Incorrect Question

2 of 25 2 . Question When the community health nurse visits a patient at home, the patient states, "I haven't slept the last couple of nights." Which response by the nurse illustrates a therapeutic communication response to this patient? A. "I see."

B. "Really?"

C. "You're having difficulty sleeping?"

D. "Sometimes, I have trouble sleeping too." Correct Incorrect Question 3 of 25 3 . Question A patient experiencing disturbed thought processes believes that his food is has been poisoned. Which communication technique should the nurse use to encourage the patient to eat? A. Using open-ended questions and silence

B. Sharing personal preference regarding food choices

C. Documenting reasons why the patient does not want to eat

D. Offering opinions about the necessity of adequate nutrition Correct Incorrect Question 4 of 25 4 . Question A patient admitted to a mental health unit for treatment of psychotic behavior spends hours at the locked exit door shouting. "Let me out. There's nothing wrong with me. I don't belong here." What defense mechanism is the patient implementing? A. Denial

B. Projection

C. Regression

D. Rationalization Correct Incorrect Question 5 of 25 5 . Question A patient diagnosed with terminal cancer says to the nurse "I'm going to die, and I wish my family would stop hoping for a cure! I get so angry when they carry on like this. After all, I'm the one who's dying." Which response by the nurse is therapeutic? A. "Have you shared your feelings with your family?"

B. "I think we should talk more about your anger with your family."

C. "You're feeling angry that your family continues to hope for you to be cured?"

D. "You are probably very depressed, which is understandable with such a diagnosis." Correct Incorrect Question 6 of 25 6 . Question On review of the patient's record, the nurse notes the admission was voluntary. Based on this information, the nurse anticipates which patient's behavior? A. Fearfulness regarding treatment measures.

B. Anger and aggressiveness directed toward others.

C. An understanding of the pathology and symptoms of the diagnosis.

D. A willingness to participate in the planning of the care and treatment plan. Correct Incorrect Question 7 of 25 7 . Question A patient admitted voluntarily for the treatment of an anxiety disorder demands to be released from the hospital. Which action should the nurse take initially? A. Contact the patient's health care provider (HCP).

B. Call the patient's family to arrange for transportations.

C. Attempt to persuade the patient to stay for only a few more days.

D. Tell the patient that leaving would likely result in an involuntary commitment. Correct Incorrect Question 8 of 25 8 . Question When reviewing the admission assessment, the nurse notes that a patient was admitted to the mental health unit involuntarily. Based on this type of admission, the nurse should provide which intervention for this patient? A. Monitor closely for harm to self or others.

B. Assist in completing an application for admission

C. Supply the patient with written information about their mental illness.

D. Provide an opportunity for the family to discuss why they felt the admission was needed. Correct Incorrect Question 9 of 25 9 . Question The nurse is preparing a patient for the termination phase of the nurse-patient relationship. The

nurse prepares to implement which nursing task that is most appropriate for this phase? A. Planning short-term goals

B. Making appropriate referrals

C. Developing realistic solutions

D. Identifying expected outcomes Correct Incorrect Question 10 of 25 10 . Question The nurse employed in a mental health clinic is greeted by a neighbor in a local grocery store. The neighbors ask the nurse, "How is Mary doing? She is my best friend and is seen at your clinic every week." Which is the most appropriate nursing response? A. "I can not discuss any patient situation with you."

B. "If you want to know about Mary, you need to ask her yourself."

C. "Only because you're worried about a friend, I'll tell you that she is improving."

D. "Being her friend, you know she is having a difficult time and deserves her privacy." Correct Incorrect Question 11 of 25 11 . Question The nurse calls security and has physical restraints applied when a client who is admitted voluntarily becomes both physically and verbally abusive while demanding to be discharged from the hospital. Which represents the possible legal ramifications for the nurse associated with these interventions? Select all that apply.

A. Libel

B. Battery

C. Assault

D. Slander

E. False Imprisonment Correct Incorrect Question 12 of 25 12 . Question The nurse in the mental health unit recognizes which of the following as therapeutic communication techniques? Select all that apply. A. Restating

B. Listening

C. Asking the patient "Why?"

D. Maintaining neutral responses

E. Providing acknowledgment and feedback

F. Giving advice and approval or disapproval Correct Incorrect Question 13 of 25 13 . Question A patient being seen in the emergency department immediately after being sexually assaulted appears calm and controlled. The nurse analyzes this behavior as indicating which defense mechanism? A. Denial

B. Projection

C. Rationalization

D. Intellectualization Correct Incorrect Question 14 of 25 14 . Question A patient's unresolved feelings related to loss would be most likely observed during which phase of the therapeutic nurse-patient relationship? A. Trusting

B. Working

C. Orientation

D. Termination Correct Incorrect Question 15 of 25 15 . Question Which statement demonstrates the best understanding of the nurse's role regarding ensuring that each client's rights are respected? A. "Autonomy is the fundamental right of each and every client."

B. "A patient's rights are guaranteed by both state and federal laws."

C. "Being respectful and concerned will ensure that I'm attentive to my patient's rights."

D. "Regardless of the patient's conditions, all nurses have the duty to respect patient rights." Correct Incorrect Question 16 of 25 16 . Question Which therapeutic communication technique is being used in this nurse-client

interaction? Client: "When I get angry, I get into a fistfight with my wife, or I take it out of the kids." Nurse: "I notice that you are smiling as you talk about this physical violence." A. Encouraging comparison

B. Exploring

C. Formulating a plan of action

D. Making observations Correct Incorrect Question 17 of 25 17 . Question Which therapeutic communication technique is being used in this nurse-client interaction? Client: "My father spanked me often." Nurse: "Your father was a harsh disciplinarian." A. Restatement

B. Offering general leads

C. Focusing

D. Accepting Correct Incorrect Question 18 of 25 18 . Question Which therapeutic communication technique is being used in this nurse-client interaction? Client: "When I am anxious, the only thing that calms me down is alcohol." Nurse: "Other than drinking, what alternatives have you explored to decrease anxiety?" A. Reflecting

B. Making observations

C. Formulating a plan of action

D. Giving recognition Correct Incorrect Question 19 of 25 19 . Question Nurse Patrick is interviewing a newly admitted psychiatric client. Which nursing statement is an example of offering a general lead? A. "Do you know why you are here?"

B. "Are you feeling depressed or anxious?"

C. "Yes, I see. Go on."

D. "Can you chronologically order the events that led to your admission?" Correct Incorrect Question 20 of 25 20 . Question A nurse states to a client, "Things will look better tomorrow after a good night's sleep." This is an example of which communication technique? A. The therapeutic technique of "giving advice"

B. The therapeutic technique of "defending"

C. The nontherapeutic technique of "presenting reality"

D. The nontherapeutic technique of "giving false reassurance" Correct Incorrect Question 21 of 25 21 . Question A client diagnosed with post-traumatic stress disorder is admitted to an inpatient psychiatric unit for evaluation and medication stabilization. Which therapeutic communication technique used by the nurse is an example of a broad opening? A. "What occurred prior to the rape, and when did you go to the emergency department?"

B. "What would you like to talk about?"

C. "I notice you seem uncomfortable discussing this."

D. "How can we help you feel safe during your stay here?" Correct Incorrect Question 22 of 25 22 . Question A nurse is assessing a client diagnosed with schizophrenia for the presence of hallucinations. Which therapeutic communication technique used by the nurse is an example of making observations? A. "You appear to be talking to someone I do not see."

B. "Please describe what you are seeing."

C. "Why do you continually look in the corner of this room?"

D. "If you hum a tune, the voices may not be so distracting." Correct Incorrect Question 23 of 25 23 . Question A nurse maintains an uncrossed arm and leg posture. This nonverbal behavior is reflective of which letter of the SOLER acronym for active listening? A. S

B. O

C. L

D. E

E. R Correct Incorrect Question 24 of 25 24 . Question An instructor is correcting a nursing student's clinical worksheet. Which instructor statement is the best example of effective feedback? A. "Why did you use the client's name on your clinical worksheet?"

B. "You were very careless to refer to your client by name on your clinical worksheet."

C. "Surely you didn't do this deliberately, but you breached confidentiality by using the client's name."

D. "It is disappointing that after being told, you're still using client names on your worksheet." Correct Incorrect Question 25 of 25 25 . Question After assertiveness training, a formerly passive client appropriately confronts a peer in group therapy. The group leader states, "I'm so proud of you for being assertive. You are so good!" Which communication technique has the leader employed? A. The non-therapeutic technique of giving approval

B. The non-therapeutic technique of interpreting

C. The therapeutic technique of presenting reality

D. The therapeutic technique of making observations Correct Incorrect

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Therapeutic Communication in Nursing

The guide below is your reviewer of the concepts of therapeutic communication in nursing. We've made it as condensed as possible by including only the key facts to help you refresh your memory!

Learning therapeutic communication techniques is an important skill that nurses should possess since communication is

an integral part of being a nurse. This is a study guide about the basic principles of therapeutic communication, its purpose, differences in verbal and nonverbal communication, and lastly, the different therapeutic communication techniques.

What is Therapeutic Communication?

Therapeutic communication is an interpersonal interaction between the nurse and the client during which the nurse focuses on the client's specific needs to promote an effective exchange of information. Skilled use of therapeutic communication techniques helps the nurse understand and empathize with the client's experience.

Goals of Therapeutic Communication

Therapeutic communication can help nurses to accomplish many goals:

Establish a therapeutic nurse-client relationship.

Identify the most important client concern at that moment (the client-centered goal).

Assess the client's perception of the problem as it unfolds; this includes detailed actions (behaviors and messages) of the people involved and the client's thoughts and feelings about the situation, others, and self.

Facilitate the client's expression of emotion.

Teach the client and the family necessary self-care skills.

Recognize the client's needs.

Implement interventions designed to address the client's needs.

Guide the client toward identifying the plan of action to a satisfying and socially acceptable resolution.

Verbal Communication Skills

Verbal communication consists of the words a person uses to speak to one or more listeners.

Using concrete messages. The nurse should use words that are as clear as possible when speaking to the client so that the client can understand the message; in a concrete message, the words are explicit and need no interpretation, the speaker uses nouns instead of pronouns; concrete questions are clear, direct, and easy to understand.

The nurse should use words that are as clear as possible when speaking to the client so that the client can understand the message; in a concrete message, the words are explicit and need no interpretation, the speaker uses nouns instead of pronouns; concrete questions are clear, direct, and easy to understand. Using therapeutic communication techniques. The choice of technique depends on the intent of the interaction and the client's ability to communicate verbally; overall, the nurse selects techniques that facilitate the interaction and enhance communication between client and nurse.

The choice of technique depends on the intent of the interaction and the client's ability to communicate verbally; overall, the nurse selects techniques that facilitate the interaction and enhance communication between client and nurse. Avoiding nontherapeutic communication. In contrast, there are many nontherapeutic techniques that nurses should avoid; these responses cut off communication and make it more difficult for the interaction to continue.

In contrast, there are many nontherapeutic techniques that nurses should avoid; these responses cut off communication and make it more difficult for the interaction to continue. Interpreting signals or cues. To understand what a client means, the nurse watches and listens carefully for cues; cues are verbal or nonverbal messages that signal keywords or issues for the client; finding cues is a function of active listening often, cue words introduced by the client can help the nurse to know what to ask next or how to respond to the client.

Nonverbal Communication Skills

Therapeutic communication also involves nonverbal communication is behavior that a person exhibits while delivering verbal content.

Facial expression. The human face produces the most visible, complex, and sometimes confusing nonverbal messages; facial movements connect with words to illustrate meaning; this connection demonstrates the speaker's internal dialogue.

The human face produces the most visible, complex, and sometimes confusing nonverbal messages; facial movements connect with words to illustrate meaning; this connection demonstrates the speaker's internal dialogue. Body language. Body language (gestures, postures, movements, and body positions) is a nonverbal form of communication; closed body positions, such as crossed legs or arms folded across the chest, indicate that the interaction might threaten the listener who is defensive or not accepting; a better, more accepting body position is to sit facing the client with both feet on the floor, knees parallel, hands at the side of the body, and legs uncrossed or crossed only at the ankle.

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Therapeutic Communication Techniques

Choosing the appropriate therapeutic communication technique is critical in establishing and maintaining the nurse-patient relationship. These techniques are discussed below:

Therapeutic Communication Technique Example Rationale Accepting.

Indicating reception "Yes."

"I understand what you said."

Nodding An accepting response indicates the nurse has heard and followed the train of thought. Broad openings.

Allowing the client to take the initiative in introducing the topic. "Is there something you'd like to talk about?"

"Where would you like to begin?" Broad openings make explicit that the client has the lead in the interaction. Consensual validation.

Searching for mutual understanding, for accord in the meaning of the words. "Tell me whether my understanding of it agrees with yours." For verbal communication to be meaningful, the words used must have the same meaning for both (all) participants. Encouraging comparison.

Asking that similarities and differences be noted. "Was it something like that? Have you had similar experiences?" Comparing ideas, experiences, or relationships brings out many recurrent themes. Encouraging description of prescriptions.

Asking the client to verbalize what they perceive. "Tell me when you feel anxious."

"Do tell me what is happening?"

“What does the voice seem to be saying?” To understand the client, the nurse must see things from their perspective. Encouraging expression.

Asking the client to appraise the quality of their experiences. “What are your feelings regarding?”

“Does this contribute to your distress?” The nurse asks the client to consider people and events in light of their own values. Exploring.

Delving further into a subject or idea. “Tell me more about that.”

“Would you describe it more fully?” When clients deal with topics superficially, exploring can help them examine the issue more fully. Focusing.

Concentrating on a single point. “This point seems worth looking at more closely.” The nurse encourages the client to concentrate their energies on a single point, preventing many factors or problems from overwhelming the client. Formulating a plan of action.

Asking the client to consider the kinds of behavior likely to be appropriate in future situations. “What could you do to let your anger out harmlessly?” It may be helpful for the client to plan what they might do in future similar situations. General leads.

Encouraging to continue. “Go on.”

“And then?” General leads indicate that the nurse is listening and following what the client is saying without taking away the initiative for interaction. Giving information.

Making available the facts that the client needs. “My name is?”

“These are your medications?”

“Visiting hours are?” Informing the client of facts increases their knowledge about a topic or lets them know

what to expect. Giving recognition.

Acknowledging, indicating awareness. "Good morning Mr. |".

"You've finished your list of things to do." Greeting the client by name, indicating awareness of change, or noting efforts the client has made all show that the nurse recognizes the client as a person, as an individual. Making observations.

Verbalizing what the nurse perceives. "You appear tense."

"Are you uncomfortable when..?" Sometimes clients cannot verbalize or make themselves understood. Offering self.

Making oneself available. "I'll sit with you awhile." The nurse can offer their presence, interest, and desire to understand. Placing events in time or sequence.

Clarifying the relationship of events in time. "What seemed to lead up to?" Putting events in proper sequence helps both the nurse and client to see them in perspective. Presenting reality.

Offering for consideration that which is real. "I see no one else in the room." When it is obvious that the client is misinterpreting reality, the nurse can indicate what is real. Reflecting.

Directing client actions, thoughts, and feelings back to the client. Client: "Do you think I should tell the doctor?"

Nurse: "Do you think you should?" Reflection encourages the client to recognize or accept their own feelings. Restating.

Repeating the main idea expressed. Client: "I can't sleep. I stay awake all night."

Nurse: "You have difficulty sleeping." The nurse repeats what the client has said in approximately the same words the client has used. Seeking information.

Seeking to make clear that which is not meaningful or that which is vague. "I'm not sure that I follow. Could you tell me more?" The nurse should seek clarification through interactions with clients. Silence.

The absence of verbal communication allows the client to put thoughts or feelings into words, regain composure, or continue talking. The nurse says nothing but continues to make eye contact and conveys interest. Silence often encourages the client to verbalize, provided that it is interesting and expectant. Suggesting collaboration.

Offering to share, to strive, to work with the client for their benefit. "Perhaps you and I can discuss and discover the triggers for your anxiety." The nurse seeks to offer a relationship in which the client can identify problems in living with others, grow emotionally, and improve the ability to form satisfactory relationships. Summarizing.

Organizing and summing up that which has gone before. "So, in summary"

"Have I got this straight?" Summarization seeks to bring out the important points of the discussion and increase both participants' awareness and understanding. Translating into feelings.

Seeking to verbalize client's feelings that they express only indirectly. Client: "I'm dead."

Nurse: "Are you suggesting that you feel lifeless?" Often what the client says, when taken literally, seems meaningless or far removed from reality. Verbalizing the implied.

Voicing what the client has hinted or suggested. Client: "I can't talk to you or anyone. It's a waste of time."

Nurse: "Do you feel that no one understands?" Putting into words what the client has implied or said indirectly tends to make the discussion less obscure. Voicing doubt.

Expressing uncertainty about the reality of the client's perception. "Isn't that unusual? Really?" Another means of responding to distortions of reality is to express doubt. Open-ended comments.

Unfinished sentences prompt the client to continue. Questions that cannot be answered with a one-word answer. "Tell

me more about your pain.â€•

â€œTell me about your family.â€• Allows the client to decide what content is relevant. Clarifying.

It makes the meaning of the clientâ€™s message clear. Client: â€œWhenever I talk to my doctor, I feel so upset.â€•

Nurse: â€œTell me what is making you upset?â€• It prevents nurses from making assumptions about the clientâ€™s message. Confronting.

Nurseâ€™s verbal response to incongruence between clientâ€™s words and actions. Client: â€œI am so angry at her!â€• (Stated while smiling).

Nurse: â€œYou said you are angry, yet you are smiling?â€• Encourages client to recognize potential areas for change. Setting limits.

Stating expectations for appropriate behavior. Nurse: â€œIt seems that you are feeling unsure of how to behave right now.â€•

Client: â€œWhat do you mean?â€•

Nurse: â€œWell, you are asking me a lot of personal questions. The reason you are here is that you have some health issues and problems. Tell me more clearly what brought you here to the clinic so I can help you.?â€• Establishing behavioral parameters.

Non-Therapeutic Communication

Non-Therapeutic communication involves words, phrases, actions, and tones that make patients feel uncomfortable, increase their stress, and worsen their mental and even physical wellbeing.

Non-Therapeutic Responses Examples Rationale Reassuring â€œI would not worry about that.â€• Indicating that there is no cause of anxiety. Giving approval â€œThatâ€™s good!â€• On the other hand, offering unnecessary approval implies

that the behavior being praised is the only acceptable one. Rejecting "Let's not discuss that!" Refusing to consider or showing contempt for the client's ideas or behavior. Disapproving "That's bad!" Denouncing the client's ideas or behavior. Agreeing "That's right!"

"I agree!" Indicating accord with the client. Disagreeing "I definitely disagree with what you're saying!"

"I don't believe that!" Opposing to client's idea. Advising "I think you should..."

"Why don't you..." Telling the client what to do. Probing "Tell me more about your love story from the day you fell in love!" Persistent questioning the client. It is invasive, uncomfortable for most clients, and a threat to their right to privacy and confidentiality. Probing the client with questions that are not relevant to their health care and health-related concerns is never appropriate. Indicating the existence of an external source. "Who told you that you were God?!" Attributing the source of thoughts, feelings, and behavior to others or outside influence. Belittling feelings expressed. Client: "I have nothing to live for. I wish I were dead!"

Nurse: "Everybody gets down in the dumps!" Misjudging the degree of client's discomfort. Using denial Client: "I'm nothing!"

Nurse: "Don't be silly!" Refusing to admit that problem exists. Interpreting "What you really mean is..."

"Unconsciously, you're saying..." Seeking to make conscious that which is unconscious, telling the client the meaning of his experiences. Introducing an unrelated topic Client: "I'd like to die!"

Nurse: "Did you have visitors this weekend?" Changing the subject.

Tips in Answering Therapeutic Communication Questions

Getting the client's response or the way you communicate with them is a mainstay of the NCLEX. The psychosocial focus of nursing is a central thread throughout all of the clinical areas. Effective communication is an essential way to establish therapeutic relationships. These types of questions are relatively easy to answer especially if you read these five principles on answering therapeutic communication questions:

1. Responses that focus on the client's feelings

Most clients sometimes find it difficult to express their feelings whether they have a terminal illness, are pregnant, or are scheduled for surgery. Any nursing response that elicits these feelings would be therapeutic. Listen and attend to those client cues. For example, the question below:

SITUATION: A 20-year-old college student is admitted to the medical ward because of sudden onset of paralysis of both legs. Nikki reveals that the boyfriend has been pressuring her to engage in premarital sex. The most therapeutic response by the nurse is: a. "I can refer you to a spiritual counselor if you like."

b. "You shouldn't allow anyone to pressure you into sex."

c. "It sounds like this problem is related to your paralysis."

d. "How do you feel about being pressured into sex by your boyfriend?"

For this question, the correct answer is D. The statement focuses on expressing feelings and is therapeutic. Option A is not therapeutic because the nurse passes the responsibility to the counselor. Option B. is giving advice is not therapeutic as it virtually terminates the conversation. Option C is not also therapeutic because it confronts the underlying cause.

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When it seems as if clients would like to discuss fears, concerns, angry feelings, then encourage their expression.

2. Responses that are honest and direct

The nurse must be honest with her responses to encourage trust and build a therapeutic relationship. Honesty will support a trustful and firm relationship.

Situation: An old woman was brought for evaluation due to the hospital for evaluation due to increasing forgetfulness

and limitations in daily function. She says to the nurse who offers her breakfast, "Oh no, I will wait for my husband. We will eat together." The therapeutic response by the nurse is: a. "Your husband is dead. Let me serve you your breakfast."

b. "I've told you several times that he is dead. It's time to eat."

c. "You're going to have to wait a long time."

d. "What made you say that your husband is alive?"

The correct answer is option A. Since the client has signs of dementia, she should be reoriented to reality and focused on here and now. Option B is not a helpful approach because of the short-term memory of the client. Option C indicates a pompous response. Option D is a cognitive limitation of the client that makes the client incapable of explaining.

3. Responses that involve active listening

Encouraging clients to talk through verbal and nonverbal techniques is supportive and serves to further the relationship.

The nurse observes a client pacing in the hall. Which statement by the nurse may help the client recognize his anxiety? A. "I guess you're worried about something, aren't you?"

B. "Can I get you some medication to help calm you?"

C. "Have you been pacing for a long time?"

D. "I notice that you're pacing. How are you feeling?"

The answer here is D. By acknowledging the observed behavior and asking the client to express his feelings. The nurse can best assist the client in becoming aware of his anxiety. In option A, the nurse is offering an interpretation that

may or may not be accurate; the nurse also asks a question that may be answered by a "yes" or "no" response, which is not therapeutic. In option B, the nurse is intervening before accurately assessing the problem. Option C, which also encourages a "yes" or "no" response, avoids focusing on the client's anxiety, which is the reason for his pacing.

4. Responses that indicate acceptance of the client

Accept the client whatever or how he is regardless of his condition and verbalizations. Additionally, you would not want to reject the client even if you could not condone or accept his behavior.

A male client tells the nurse he was involved in a car accident while he was intoxicated. What would be the most therapeutic response from nurse Julia? A. "Why didn't you get someone else to drive you?"

B. "Tell me how you feel about the accident."

C. "You should know better than to drink and drive."

D. "I recommend that you attend an Alcoholics Anonymous meeting."

Choosing option A would make the client feel defensive and intimidated. Option C is judgemental. Remember, any judgemental approach is not therapeutic. Option D is about giving advice, and here, the nurse suggests that the client isn't capable of making decisions, thus fostering dependency. For this question, option B is the correct answer as it encourages the widest range of client responses and makes the client be an active participant in the conversation.

5. Responses that pick up or relate to the client's cues

Responding to an important cue is an essential therapeutic communication technique if the nurse focuses on the client and maintains a goal-focused interaction.

A newly admitted client diagnosed with obsessive-compulsive disorder (OCD) washes hands continually. This behavior prevents unit activity attendance. Which nursing statement best addresses this situation? A. "Everyone diagnosed

with OCD needs to control their ritualistic behaviors.â€•

B. â€œIt is important for you to discontinue these ritualistic behaviors.â€•

C. â€œWhy are you asking for help if you wonâ€™t participate in unit therapy?â€•

D. â€œLetâ€™s figure out a way for you to attend unit activities and still wash your hands.â€•

The most appropriate statement by the nurse is, â€œLetâ€™s figure out a way for you to attend unit activities and still wash your hands.â€• This statement reflects the therapeutic communication technique of formulating a plan of action. The nurse attempts to work with the client to develop a plan without damaging the therapeutic relationship or increasing anxiety.

Recommended Resources

Recommended books and resources for your NCLEX success:

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effort to provide you with the most challenging questions along with insightful rationales for each question to reinforce learning.

Sources and References

The following are the sources and references used for this article. Including some articles and journals we find interesting:

Reference

[The Therapist's Guide to Psychopharmacology: Working with Patients, Families, and Physicians to Optimize Care](#)

[Mosby's Pharmacology in Nursing](#)