Chapter 33 Review
1. The LEAST common cause of death in patients over 65 years of age is:
   A. stroke.
   B. diabetes.
   C. heart attack.
   D. drug overdose.
Answer: D

Rationale: The leading causes of death in patients over 65 years of age are heart disease, diabetes, stroke, cancer, pulmonary diseases, and trauma. Drug overdose—intentional or unintentional—is not a leading cause of death in this age group.
1. The LEAST common cause of death in patients over 65 years of age is:
   A. stroke.
      **Rationale:** This is one of the common causes of death.
   B. diabetes.
      **Rationale:** This is one of the common causes of death.
   C. heart attack.
      **Rationale:** This is one of the common causes of death.
   D. drug overdose.
      **Rationale:** Correct answer
2. According to the GEMS diamond, a person’s activities of daily living are evaluated during the:

A. SAMPLE history.
B. social assessment.
C. medical assessment.
D. environmental assessment.
**Answer:** B

**Rationale:** The GEMS diamond was created to help you remember what is unique to older people. During the social assessment (the “S” in the GEMS diamond), the patient’s activities of daily living (eg, eating, dressing, bathing, toileting) are evaluated. Are these activities being provided? If so, by whom? Are there delays in obtaining food, medication, or other necessary items?
2. According to the GEMS diamond, a person’s activities of daily living are evaluated during the:

A. SAMPLE history.
   **Rationale:** This is a mnemonic used when obtaining information during a focused history and physical exam.

B. social assessment.
   **Rationale:** Correct answer
2. According to the GEMS diamond, a person’s activities of daily living are evaluated during the:

C. medical assessment.
   **Rationale:** “M” is obtained by a thorough medical history. It is important and is completed before the social assessment.

D. environmental assessment.
   **Rationale:** “E” is the assessment of the environment. It considers if the home is well kept, too hot or too cold, or poses any hazards.
3. A condition that clouds the lens of the eye is called:

A. cataract.
B. nystagmus.
C. astigmatism.
D. glaucoma.
Answer: A

Rationale: As people get older, cataracts, or clouding of the lens of the eye, may interfere with vision. Glaucoma is a condition caused by increased intraocular pressure (IOP). Nystagmus is characterized by involuntary movement of the eyes. Astigmatism is an optical defect that causes blurred vision due to the inability of the eye to focus an object into a sharp, focused image on the retina.
3. A condition that clouds the lens of the eye is called:

A. cataract.
   **Rationale:** Correct answer

B. nystagmus.
   **Rationale:** This is a horizontal, involuntary movement of the eyes.

C. astigmatism.
   **Rationale:** This is an optical defect that causes blurred vision.

D. glaucoma.
   **Rationale:** This is a condition caused by increased intraocular pressure (IOP).
4. You are called to a neatly kept residence for an 80-year-old woman who lives by herself. She burned her hand on the stove and experienced a full-thickness burn. When treating this patient, it is important to note that:

A. there is a high likelihood that she has been abused.
B. isolated full-thickness burns to the hand are not critical burns.
C. this patient should probably be placed in an assisted-living center.
D. slowing of reflexes causes a delayed pain reaction in older people.
Answer: D

Rationale: In older patients, the sense of touch decreases due to a loss of the end-nerve fibers. This loss, in conjunction with slowing of the peripheral nervous system, causes a delayed reaction to pain. In this particular scenario, there is no indication that the patient has been abused. Partial- and full-thickness burns to the hands, feet, face, and genitalia are considered critical burns—regardless of the patient’s age.
4. You are called to a neatly kept residence for an 80-year-old woman who lives by herself. She burned her hand on the stove and experienced a full-thickness burn. When treating this patient, it is important to note that:

A. there is a high likelihood that she has been abused.

**Rationale:** There is no indication of abuse in this situation.
4. You are called to a neatly kept residence for an 80-year-old woman who lives by herself. She burned her hand on the stove and experienced a full-thickness burn. When treating this patient, it is important to note that:

B. isolated full-thickness burns to the hand are not critical burns.

**Rationale:** Any full-thickness burns of the hands, face, feet, or genitalia are considered critical.
4. You are called to a neatly kept residence for an 80-year-old woman who lives by herself. She burned her hand on the stove and experienced a full-thickness burn. When treating this patient, it is important to note that:

C. this patient should probably be placed in an assisted-living center.
   **Rationale:** This is no indication that the patient cannot take care of herself.

D. slowing of reflexes causes a delayed pain reaction in older people.
   **Rationale:** Correct answer
5. The slow onset of progressive disorientation, shortened attention span, and loss of cognitive function is called:

   A. senility.
   B. delirium.
   C. dementia.
   D. delusion.
Answer: C

Rationale: Dementia is defined as the slow onset of progressive disorientation, shortened attention span, and loss of cognitive function. Alzheimer disease is an example of dementia. In contrast to dementia, delirium is an acutely altered mental status, such as that caused by hypoglycemia.
5. The slow onset of progressive disorientation, shortened attention span, and loss of cognitive function is called:

A. senility.
   **Rationale:** Senility causes forgetfulness and confusion. The person is mentally less acute in later life.

B. delirium.
   **Rationale:** Delirium is an acutely altered mental status.
5. The slow onset of progressive disorientation, shortened attention span, and loss of cognitive function is called:

C. dementia.

**Rationale:** Correct answer

D. delusion.

**Rationale:** Delusion is a fixed belief that is not shared by others and cannot be changed by reasonable argument.
6. A 71-year-old man with a history of hypertension and vascular disease presents with tearing abdominal pain. His blood pressure is 80/60 mm Hg, his heart rate is 120 beats/min, and his respirations are 28 breaths/min. Your assessment reveals that his abdomen is rigid and distended. Considering his medical history and vital signs, you should be MOST suspicious for a(n):
   A. aortic aneurysm.
   B. hemorrhagic stroke.
   C. acute myocardial infarction.
   D. infarction of the large intestine.
Answer: A

Rationale: Arteriosclerosis is a vascular disease in which the arteries thicken, harden, and calcify. This places the patient at risk for stroke, heart disease, bowel infarction, and hypertension, among other conditions. Hypertension and vascular disease are significant risk factors for an aneurysm—a weakening in the wall of an artery. The patient’s vital signs; abdominal pain; and rigid, distended abdomen should make you highly suspicious for a leaking abdominal aortic aneurysm.
6. A 71-year-old man with a history of hypertension and vascular disease presents with tearing abdominal pain. His blood pressure is 80/60 mm Hg, his heart rate is 120 beats/min, and his respirations are 28 breaths/min. Your assessment reveals that his abdomen is rigid and distended. Considering his medical history and vital signs, you should be MOST suspicious for a(n):

A. aortic aneurysm.
   **Rationale:** Correct answer

B. hemorrhagic stroke.
   **Rationale:** This is when the patient complains of the worst headache of his life, loses the ability to speak, and eventually becomes difficult to arouse. It tends to worsen over time.
6. A 71-year-old man with a history of hypertension and vascular disease presents with tearing abdominal pain. His blood pressure is 80/60 mm Hg, his heart rate is 120 beats/min, and his respirations are 28 breaths/min. Your assessment reveals that his abdomen is rigid and distended. Considering his medical history and vital signs, you should be MOST suspicious for a(n):

C. acute myocardial infarction.

**Rationale:** Although the patient history could predispose him to an acute MI, the symptoms would be pain in the chest or shoulder, nausea, vomiting, a feeling of shortness of breath, and sweating.
6. A 71-year-old man with a history of hypertension and vascular disease presents with tearing abdominal pain. His blood pressure is 80/60 mm Hg, his heart rate is 120 beats/min, and his respirations are 28 breaths/min. Your assessment reveals that his abdomen is rigid and distended. Considering his medical history and vital signs, you should be MOST suspicious for a(n):

D. infarction of the large intestine.

Rationale: If the large intestine ruptures, it would present with signs of peritonitis.
7. Which of the following is a physiologic change that occurs during the process of aging?

A. Increased elasticity of the alveoli
B. A gradual decrease in blood pressure
C. A decline in kidney function
D. 10% to 15% increase in brain weight
Answer: C

Rationale: As a person gets older, certain anatomic and physiologic changes occur. The alveoli in the lungs become less elastic, even though their overall size increases. Blood pressure gradually increases secondary to the process of arteriosclerosis (hardening of the arteries). A decline in kidney function occurs because of a decrease in the number of nephrons. By the age of 85 years, a 10% reduction in brain weight occurs, which causes an increased risk of head trauma.
7. Which of the following is a physiologic change that occurs during the process of aging?

A. Increased elasticity of the alveoli  
   **Rationale:** With aging, alveoli lose some of their elasticity.

B. A gradual decrease in blood pressure  
   **Rationale:** Blood pressure generally increases due to arteriosclerosis.
7. Which of the following is a physiologic change that occurs during the process of aging?

C. A decline in kidney function  
   **Rationale:** Correct answer

D. 10% to 15% increase in brain weight  
   **Rationale:** The brain decreases in weight by 5% to 10%.
8. Which of the following conditions makes the elderly patient prone to fractures from even minor trauma?

A. Hypertension
B. Osteoporosis
C. Arteriosclerosis
D. Rheumatoid arthritis
Answer: B

Rationale: Osteoporosis, a decrease in bone density that causes the bones to become brittle, makes elderly patients prone to fractures, even from minor trauma. It is especially common in postmenopausal women.
8. Which of the following conditions makes the elderly patient prone to fractures from even minor trauma?

A. Hypertension  
   **Rationale:** This is high blood pressure.

B. Osteoporosis  
   **Rationale:** Correct answer
8. Which of the following conditions makes the elderly patient prone to fractures from even minor trauma?

C. Arteriosclerosis  
**Rationale:** This is the stiffening or hardening of the arteries.

D. Rheumatoid arthritis  
**Rationale:** This is an inflammatory disorder that affects the entire body and leads to degeneration and deformation of joints.
9. Polypharmacy is a term used to describe a patient who takes:

A. multiple medications.
B. other people’s medications.
C. a medication more than once a day.
D. medication only when he or she feels the need to.
Answer: A

Rationale: Polypharmacy is a term used to describe a patient who takes multiple medications every day. The more medications a patient takes, the greater the risk of a negative drug interaction.
9. Polypharmacy is a term used to describe a patient who takes:

A. multiple medications.
   **Rationale:** Correct answer

B. other people’s medication.
   **Rationale:** This is incorrect.

C. a medication more than once a day.
   **Rationale:** Many medications are taken more than once a day.

D. medication only when he or she feels the need to.
   **Rationale:** This is considered noncompliant.
10. Inflicted bruises are commonly found in all of the following areas, EXCEPT:

A. the buttocks.
B. the lower back.
C. the inner thighs.
D. the forearms.
Answer: D

Rationale: Inflicted bruises are typically found on the buttocks and lower back, genitalia and inner thighs, cheek or earlobe, upper lip and inside the mouth, and neck. Bruises to these areas should increase your index of suspicion for abuse.
10. Inflicted bruises are commonly found in all of the following areas, EXCEPT:

A. the buttocks.
   **Rationale:** This is an area where bruises are typically inflected.

B. the lower back.
   **Rationale:** This is an area where bruises are typically inflected.

C. the inner thighs.
   **Rationale:** This is an area where bruises are typically inflected.

D. the forearms.
   **Rationale:** Correct answer