

# Comfort Examination and Assessment Questionnaire (EAQ) Practice Exam (Sample)

## Study Guide



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## **Questions**

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- 1. What is a potential benefit of open-ended questions in the EAQ?**
  - A. They require more time to analyze**
  - B. They can provide in-depth insights into patient needs**
  - C. They simplify the assessment process**
  - D. They are easier to categorize**
- 2. Which method is the most suitable for assessing pain in a client with low-functioning Down syndrome?**
  - A. Numeric rating scale**
  - B. Wong-Baker FACES Pain Rating Scale**
  - C. Visual analog scale**
  - D. Clinical observation**
- 3. Which medication is commonly prescribed for intervertebral disc disease?**
  - A. Cyclobenzaprine**
  - B. Etidronate**
  - C. Zoledronic acid**
  - D. Salmon calcitonin**
- 4. What is the most likely conclusion if a client rates their pain as an 8 before medication and 7 after?**
  - A. The medication is adequately effective.**
  - B. The medication is not adequately effective.**
  - C. The client is experiencing low pain tolerance.**
  - D. The pain has been significantly reduced.**
- 5. Which of the following is a key component of ensuring the success of the EAQ?**
  - A. Limiting feedback from healthcare providers**
  - B. Integrating the questionnaire into regular patient care processes**
  - C. Focusing solely on nurse assessments**
  - D. Avoiding discussions around patient comfort**

- 6. What might an open-ended question in the EAQ ask?**
- A. What is your current pain level?**
  - B. Describe any discomfort you are experiencing right now.**
  - C. How satisfied are you with your care?**
  - D. Can you list your symptoms?**
- 7. How does the EAQ contribute to holistic patient care?**
- A. By focusing solely on physical aspects of care**
  - B. By considering all dimensions of the patient's experience**
  - C. By prioritizing medical interventions over comfort**
  - D. By collecting demographic data only**
- 8. Which of the following is important in enhancing patient comfort as per the EAQ?**
- A. Family involvement in clinical choices**
  - B. Standardized treatment protocols**
  - C. Awareness of environmental factors**
  - D. Greater hospital visitation hours**
- 9. Why is relevance critical in the design of the EAQ?**
- A. It determines the length of the questionnaire**
  - B. It ensures that the questions are meaningful to the patient's experience**
  - C. It allows for the inclusion of redundant questions**
  - D. It enables the use of complicated medical terminology**
- 10. In the case of a patient experiencing a stroke, which action should the nurse prioritize?**
- A. Ensure an IV line is established.**
  - B. Perform a complete neurological assessment.**
  - C. Call for a rapid response team.**
  - D. Document patient history.**

## **Answers**

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1. B
2. B
3. A
4. B
5. B
6. B
7. B
8. C
9. B
10. B

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## **Explanations**

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**1. What is a potential benefit of open-ended questions in the EAQ?**

- A. They require more time to analyze**
- B. They can provide in-depth insights into patient needs**
- C. They simplify the assessment process**
- D. They are easier to categorize**

Open-ended questions are particularly valuable in the Context of the Comfort Examination and Assessment Questionnaire (EAQ) because they allow respondents to express their thoughts, feelings, and experiences in their own words. This approach can uncover a broader range of responses and provide deeper insights into patient needs, preferences, and concerns. Unlike closed questions, which limit answers to predefined options, open-ended questions encourage the individual to elaborate on their unique circumstances, leading to a more comprehensive understanding of their situation. This depth of information is crucial for healthcare providers to tailor interventions and support effectively. By understanding the nuances of a patient's experience, care can be more personalized and relevant. The richness of qualitative data gathered from open-ended responses can significantly enhance the quality of care and contribute to better health outcomes.

**2. Which method is the most suitable for assessing pain in a client with low-functioning Down syndrome?**

- A. Numeric rating scale**
- B. Wong-Baker FACES Pain Rating Scale**
- C. Visual analog scale**
- D. Clinical observation**

The Wong-Baker FACES Pain Rating Scale is particularly suitable for assessing pain in a client with low-functioning Down syndrome due to its intuitive, visual representation that allows individuals to express their feelings about pain in a simple and relatable manner. This scale uses faces with varying expressions to depict different levels of pain, making it easy for those who might struggle with verbal communication, such as individuals with cognitive challenges, to convey their discomfort. Many individuals with low-functioning Down syndrome may find it difficult to understand or articulate a numerical scale or a more abstract measurement like a visual analog scale. The facial expressions provide clear, visual cues that facilitate recognition and understanding, allowing clients to point to the face that best matches their pain level. This not only aids in more accurate pain assessment but also respects the individual's ability to communicate their experiences in an accessible way. Although clinical observation can also be valuable in assessing pain—especially for those who cannot verbalize it—relying solely on observations may lead to missing subtle indicators of pain that a more direct reporting method could capture.

**3. Which medication is commonly prescribed for intervertebral disc disease?**

- A. Cyclobenzaprine**
- B. Etidronate**
- C. Zoledronic acid**
- D. Salmon calcitonin**

Cyclobenzaprine is commonly prescribed for intervertebral disc disease because it is a muscle relaxant that helps to relieve muscle spasms associated with pain conditions, including those caused by disc issues. When the intervertebral discs become herniated or degenerative, they can cause pain and discomfort that lead to muscle tightening and spasms in the surrounding areas. Cyclobenzaprine works by acting on the central nervous system to produce muscle relaxation, providing relief from muscle-related pain and improving mobility for patients experiencing the discomfort associated with intervertebral disc disease. Other medications mentioned, such as etidronate, zoledronic acid, and salmon calcitonin, are more specifically used for conditions related to bone health or osteoporosis management and are not typically indicated for managing the pain and muscle spasms associated with intervertebral disc issues. Therefore, they would not be first-line treatments for this particular condition.

**4. What is the most likely conclusion if a client rates their pain as an 8 before medication and 7 after?**

- A. The medication is adequately effective.**
- B. The medication is not adequately effective.**
- C. The client is experiencing low pain tolerance.**
- D. The pain has been significantly reduced.**

When a client rates their pain as an 8 before taking medication and then a 7 after taking the medication, it indicates that there has only been a minimal change in their pain level—specifically a 1-point reduction on a scale of 0 to 10. While any reduction in pain can be seen as positive, a decrease from 8 to 7 does not reflect a significant or adequate response to pain management. In pain assessment, a higher numerical score typically indicates a greater level of discomfort. Since the client still rates their pain as relatively high (at 7), it suggests that the current medication may not be sufficiently effective for their level of pain, implying a need to reevaluate treatment options or dosages. The expectation after administering pain relief medication would generally be a more noticeable decrease in pain, leading to the conclusion that the medication is not adequately effective in managing the client's pain. This understanding distinguishes the client's pain management outcome from those that suggest adequate effectiveness or significant pain reduction, which would require a greater change in pain score. Therefore, the most logical conclusion from the shift in pain rating is that the medication has not achieved the necessary relief for the client.

**5. Which of the following is a key component of ensuring the success of the EAQ?**

- A. Limiting feedback from healthcare providers**
- B. Integrating the questionnaire into regular patient care processes**
- C. Focusing solely on nurse assessments**
- D. Avoiding discussions around patient comfort**

Integrating the questionnaire into regular patient care processes is crucial for the success of the Comfort Examination and Assessment Questionnaire (EAQ) because it ensures that patient comfort is continuously monitored and prioritized throughout their care. By making the questionnaire a part of routine procedures, healthcare providers can gather important data on patient comfort levels, leading to timely interventions and improved patient outcomes. This integration fosters a culture that values patient feedback and promotes communication between patients and providers. It emphasizes that assessing comfort is an ongoing responsibility rather than a one-time assessment. Consequently, this approach can enhance patient satisfaction and engage healthcare teams in consistently prioritizing comfort as a fundamental aspect of care. The other options, such as limiting provider feedback or focusing solely on nurse assessments, would hinder the collaborative effort needed to gain a holistic understanding of patient comfort. Avoiding discussions around patient comfort would contradict the very purpose of the EAQ, which is to enhance the patient's experience by addressing their comfort needs directly.

**6. What might an open-ended question in the EAQ ask?**

- A. What is your current pain level?**
- B. Describe any discomfort you are experiencing right now.**
- C. How satisfied are you with your care?**
- D. Can you list your symptoms?**

An open-ended question is designed to encourage a detailed and subjective response from the patient, allowing them to express their thoughts and feelings in their own words. The question "Describe any discomfort you are experiencing right now" invites the patient to elaborate on their experiences, providing a richer and more nuanced understanding of their comfort and discomfort. This type of question fosters a dialogue that can reveal specific issues, underlying feelings, and personal perceptions of discomfort, which are essential for effective assessment and subsequent care planning. In contrast, the other options are examples of closed-ended questions which typically require brief, specific answers and often limit the depth of information gathered. For instance, asking about current pain levels or how satisfied a patient is with their care tends to result in ratings or simple acknowledgments rather than the comprehensive insights that a patient might provide in response to an open-ended prompt. Similarly, asking patients to list their symptoms may restrict their responses to a checklist format rather than allowing them to express the complexity of their experiences.

**7. How does the EAQ contribute to holistic patient care?**

- A. By focusing solely on physical aspects of care**
- B. By considering all dimensions of the patient's experience**
- C. By prioritizing medical interventions over comfort**
- D. By collecting demographic data only**

The EAQ contributes to holistic patient care by considering all dimensions of the patient's experience. This comprehensive approach recognizes that patient care extends beyond merely addressing physical symptoms; it incorporates emotional, psychological, social, and spiritual aspects as well. By evaluating these various components, healthcare providers can gain a deeper understanding of the patient's overall well-being and create a tailored care plan that meets individual needs. In holistic care, it's essential to acknowledge how factors like stress, mental health, and social support can impact a patient's recovery and comfort. This broad perspective allows for more effective communication and rapport between patients and healthcare providers, ultimately leading to improved patient satisfaction and outcomes. By embracing this comprehensive approach, the EAQ becomes a valuable tool for ensuring that patients are seen and treated as whole individuals.

**8. Which of the following is important in enhancing patient comfort as per the EAQ?**

- A. Family involvement in clinical choices**
- B. Standardized treatment protocols**
- C. Awareness of environmental factors**
- D. Greater hospital visitation hours**

Enhancing patient comfort is a multifaceted approach, and awareness of environmental factors plays a crucial role in this. Environmental factors include elements such as lighting, noise levels, room temperature, and overall cleanliness, all of which can significantly influence a patient's comfort and well-being during their hospital stay. By being mindful of these aspects, healthcare providers can create a more serene and conducive atmosphere for healing, thereby reducing anxiety and promoting relaxation. Factors such as family involvement in clinical choices, standardized treatment protocols, and greater hospital visitation hours certainly contribute to the overall patient experience but may not directly impact the physical comfort in the same immediate way that environmental considerations do. Understanding and addressing the environment in which a patient is situated enables healthcare professionals to make adjustments that can lead to improved comfort levels, which is essential in fostering a positive recovery journey.

**9. Why is relevance critical in the design of the EAQ?**

- A. It determines the length of the questionnaire
- B. It ensures that the questions are meaningful to the patient's experience**
- C. It allows for the inclusion of redundant questions
- D. It enables the use of complicated medical terminology

Relevance is critical in the design of the EAQ because it ensures that the questions included are meaningful to the patient's experience. When questions are directly related to what the patient is going through or has experienced, it enhances the likelihood of obtaining valuable insights into their comfort levels, concerns, and overall well-being. This connection is essential for accurately assessing the patient's needs and informing care strategies that can effectively address them. Meaningful questions are more likely to elicit honest and thoughtful responses, thus providing more reliable data for healthcare professionals to use in tailoring their approach to each patient's unique circumstances. In contrast, questions that lack relevance may confuse patients or fail to capture important factors affecting their comfort, ultimately compromising the effectiveness of the assessment.

**10. In the case of a patient experiencing a stroke, which action should the nurse prioritize?**

- A. Ensure an IV line is established.
- B. Perform a complete neurological assessment.**
- C. Call for a rapid response team.
- D. Document patient history.

In the context of a patient experiencing a stroke, prioritizing a complete neurological assessment is crucial because it helps determine the extent of the stroke and lays the groundwork for immediate interventions. A thorough neurological assessment allows the healthcare team to identify key symptoms, such as level of consciousness, motor function, speech, and sensory functions. This information is vital for deciding on appropriate treatments, such as the administration of thrombolytics or other alternatives, and can significantly affect patient outcomes. Early and accurate assessment enables timely identification of stroke type (ischemic vs. hemorrhagic) and helps in tailoring management strategies that are time-sensitive. Given that stroke has a limited therapeutic window during which interventions can be most effective, the nurse's focus on a complete neurological assessment ensures that decisions can be made quickly and appropriately to improve patient care. While actions like establishing an IV line or calling for a rapid response team are also important, they come after the initial assessment in terms of prioritization. Documenting patient history, although necessary, is less urgent than performing an assessment that will inform immediate care decisions.