CNE Quiz: Comparison of Nurses’ Self-Reported and Objectively Measured Evidence-Based Practice Knowledge

1. The statement that accurately reflects the study methodology is:
   A. Nurses self-rated their knowledge before and after an educational program.
   B. Nurses at multiple study sites were assessed once, using subjective and objective measures of evidence-based practice (EBP) knowledge.
   C. Nurses’ EBP knowledge was manipulated with an educational intervention.
   D. The same nurses were studied over time to monitor EBP knowledge development.

2. The correlations between subjective and objective measures of EBP knowledge, ranging from \( r = .017 \) to \( r = .123 \ (p > .05) \), indicate:
   A. Statistically significant positive relationships.
   B. Statistically significant negative relationships.
   C. Statistically nonsignificant, positive relationships.
   D. Statistically nonsignificant, negative relationships.

3. The relationship between the subjects’ level of education and self-rated EBP knowledge, practices, and attitudes is:
   A. Higher levels of education were associated with lower self-ratings.
   B. Higher levels of education were associated with higher self-ratings.
   C. Nurses with a doctoral degree had the highest self-ratings.
   D. There was no relationship between level of education and self-ratings.

4. The type of instrument most desirable to accurately assess practicing nurses’ EBP knowledge is:
   A. Objective knowledge measure with documented psychometric testing in practicing nurses.
   B. Objective knowledge measure with documented psychometric testing in nursing students.
   C. New objective knowledge measure without documented psychometric testing in practicing nurses.
   D. Subjective knowledge measure with documented psychometric testing in practicing nurses.

5. The construct that best measures with self-report instruments is:
   A. Attitudes.
   B. Knowledge.
   C. Skills.
   D. Competence.
6. The importance of directly measuring EBP knowledge using measures with robust validity and reliability evidence is to:
   A. Understand nurses’ attitudes toward EBP.
   B. Develop and test educational strategies aimed at increasing EBP skills.
   C. Assess nurses’ ability to implement EBP.
   D. Develop and test educational strategies aimed at increasing EBP knowledge.

7. To gain insight on the durability of nurses’ EBP knowledge (across educational levels, roles, settings, and years of experience) is to:
   A. Support a standardized plan and approach to educating all nurses on EBP.
   B. Guide the frequency and content of EBP educational offerings for nurses based on education, role, setting, and experience.
   C. Support the need for EBP education every 6 months for all nurses.
   D. Enable EBP competency assessment of nurses, based on education, role, setting, and experience.

8. The main reason that self-report measures of knowledge or ability should not be used interchangeably with objective measures is:
   A. Self-reports and objective measures usually measure the same thing.
   B. Self-report measures are available to use free of charge.
   C. Self-reports and objective measures correspond poorly with each other.
   D. Self-reports and objective measures are usually equally valid and reliable.

9. To enable the development and testing of organizational structures that support nurses’ EBP knowledge, it is vital to:
   A. Assess nurses’ self-reported EBP knowledge/skills, attitude, and practice/use to inform organizational change.
   B. Engage a consultant for an outside perspective on effectiveness in other settings.
   C. Increase nurses’ access to technology for education.
   D. Rigorously apply ongoing objective evaluations of nurses’ EBP knowledge to inform organizational change.

10. Regression analysis, showing that educational level was a statistically significant predictor of EBP knowledge scores ($F[1,149] = 30.43, p < .001, R^2 = .170$), supports:
    A. Requiring all nurses to attend an annual EBP educational offering.
    B. Providing an accessible EBP mentor with advanced education.
    C. Encouraging nurses to advance their educational level.
    D. Requiring nurse administrators and leaders to complete a doctoral degree.