

Chapter 03: Patient Safety, Communication, and Record Keeping Test Bank

MULTIPLE CHOICE

1. Which of the following is/are a potential area of risk to patients receiving respiratory care?
 - a. movement or ambulation
 - b. electrical shock
 - c. fire hazards
 - d. all the above

ANS: C

The key areas of potential risk are (1) patient movement and ambulation, (2) electrical hazards, and (3) fire hazards.

DIF: Recall REF: p. 42 OBJ: 2|3

2. Lifting heavy objects is best done with which of the following techniques?
 - a. straight spine, bent legs
 - b. straight spine, straight legs
 - c. bent spine, bent legs
 - d. bent spine, straight legs

ANS: A

Note that the correct technique calls for a straight spine and use of the leg muscles to lift the object.

DIF: Application REF: p. 42 OBJ: 1

3. Which of the following factors are most critical in determining when a patient can be ambulated?
 1. willingness of patient
 2. stability of vital signs
 3. absence of severe pain
 - a. 2 and 3
 - b. 1 and 2
 - c. 1, 2, and 3
 - d. 1 and 3

ANS: A

Ambulation should begin as soon as the patient is physiologically stable and free of severe pain.

DIF: Application REF: p. 42 OBJ: 2

4. Which of the following statements is false about patient ambulation?
 - a. Ambulation is necessary for normal body functioning.
 - b. Patients must be carefully monitored during ambulation.
 - c. Chairs or emergency supports must available during ambulation.
 - d. Patients with intravenous (IV) lines should not be ambulated.

ANS: D

Place all equipment (e.g., intravenous [IV] equipment, nasogastric tube, surgical drainage tubes) close to the patient to prevent dislodging during ambulation.

DIF: Application REF: p. 42 OBJ: 2

5. Which of the following parameters should be monitored during ambulation?
1. skin color
 2. breathing rate and effort
 3. level of consciousness
 4. urine output
- a. 1 and 2
 - b. 3 and 4
 - c. 1, 2, and 3
 - d. 1, 2, 3, and 4

ANS: C

Skin color, breathing rate and effort, and level of consciousness provide clues to how well the patient is tolerating ambulation.

DIF: Application REF: p. 43 OBJ: 2

6. Which of the following terms describes the power potential behind electrical energy?
- a. voltage
 - b. current
 - c. Ohms
 - d. resistance

ANS: A

Voltage is the power potential behind the electrical energy.

DIF: Recall REF: p. 44 OBJ: 3

7. Which of the following is used to report electrical current?
- a. Ohms
 - b. voltage
 - c. amps
 - d. cycles

ANS: C

Current is the flow of electricity from a point of higher voltage to one of lower voltage and is reported in amperes (or amps).

DIF: Recall REF: p. 44 OBJ: 3

8. What is the primary factor determining the effect of an electrical shock?
- a. current
 - b. temperature
 - c. resistance
 - d. voltage

ANS: A

It is important to note that current represents the greatest danger to you or your patients when electrical shorts occur.

DIF: Recall REF: p. 45 OBJ: 4

9. Which of the following is/are key factor(s) determining the extent of harm caused by an electrical current?
1. duration for which the current is applied
 2. path the current takes through the body
 3. amount of current flowing through the body
- a. 1 and 2
 - b. 2 and 3
 - c. 1, 2, and 3
 - d. 1 and 3

ANS: C

The harmful effects of current depend on (1) the amount of current flowing through the body, (2) the path it takes, and (3) the duration the current is applied.

OBJ : 4

DIFF: Application

REF : Pg: 45

DIF: Application REF: p. 45 OBJ: 4

10. If 120 Volts are applied to a system with 1,000 Ohms of resistance, what is the current?
- a. 100 amps
 - b. 100 Ohms
 - c. 120 milliamps
 - d. 120 amps

ANS: C

The current is now calculated as $\text{amps} = 120 \text{ V} / 1,000 \text{ Ohms} = 0.12 \text{ amps}$ or 120 milliamps.

DIF: Analysis REF: p. 45 OBJ: 3

11. Which of the following organs is the most sensitive to the effects of electrical shock?
- a. liver
 - b. heart
 - c. kidneys
 - d. lungs

ANS: B

Because the heart is susceptible to any current level above 100 milliamps, the 120 milliamps represents a potentially fatal shock.

DIF: Recall REF: p. 45 OBJ: 4

12. In which of the following clinical situations is the normally high resistance of the skin bypassed?
1. in patients with external pacemaker wires
 2. in patients with saline-filled catheters
 3. in patients with intact, dry skin

- a. 2 and 3
- b. 1, 2, and 3
- c. 1 and 2
- d. 3

ANS: C

Current can readily flow into the body, causing damage to vital organs when the skin is bypassed via conductors such as pacemaker wires or saline-filled intravascular catheters.

DIF: Application REF: p. 45 OBJ: 4

13. When a relatively high current (usually greater than 1 mA, or 1/1000 A) is applied externally to the skin, which of the following conditions exists?
- a. macroshock hazard
 - b. grounding hazard
 - c. microshock hazard
 - d. isolation hazard

ANS: A

A macroshock exists when a high current (usually greater than 1 milliamp) is applied externally to the skin.

DIF: Application REF: p. 46 OBJ: 4

14. When a small, usually imperceptible current (usually less than 1 mA) is allowed to bypass the skin and follow a direct, low resistance pathway into the body, which of the following conditions exists?
- a. macroshock hazard
 - b. grounding hazard
 - c. isolation hazard
 - d. microshock hazard

ANS: D

A microshock exists when a small, usually imperceptible current (less than 1 milliamp) bypasses the skin and follows a direct, low-resistance path into the body.

DIF: Application REF: p. 46 OBJ: 4

15. High amperage (6 amps or more) applied externally to the skin can cause which of the following?
- 1. sustained myocardial contraction
 - 2. respiratory paralysis
 - 3. skin burns
- a. 1 and 2
 - b. 2 and 3
 - c. 1, 2, and 3
 - d. 1 and 3

ANS: C

Table 3-1 summarizes the different effects of these two types of electrical shock.

DIF: Recall REF: p. 47 OBJ: 4

16. Which of the following currents passing through the chest can cause ventricular fibrillation, diaphragm dysfunction (due to severe, persistent contraction), and death?
- 100 mA
 - 100 A
 - 100 μ A
 - 10 μ A

ANS: A

Higher currents (exceeding 100 milliamps [mA]) that pass through the chest can cause ventricular fibrillation, diaphragm dysfunction (due to severe, persistent contraction), and death. Table 3-1 summarizes the different effects of these two types of electrical shock.

DIF: Analysis REF: p. 45 OBJ: 4

17. What is the primary purpose of grounding all electrical equipment used in the hospital setting?
- to prevent the dangerous buildup of voltage in the equipment
 - to make the equipment more secure and less likely to break down
 - to avoid excessive energy costs
 - to convert electrical power from DC to AC

ANS: A

In these cases, the third (ground) wire prevents the dangerous buildup of voltage that can occur on the metal frames of some electrical equipment.

DIF: Application REF: p. 46 OBJ: 3

18. Where do most hospital fires initially start?
- clinical laboratory
 - kitchen
 - electrical engineering post
 - patient's room

ANS: B

About 90% of fires in health care facilities occur in hospitals and the most common site for the origin of the fire is the kitchen.

DIF: Recall REF: p. 47 OBJ: 6

19. Which of the following is true about fires in oxygen-enriched atmospheres?
- They are more difficult to put out.
 - They burn more quickly.
 - They burn more intensely
- 1 and 2
 - 2 and 3
 - 1 and 3
 - 1, 2, and 3

ANS: D

Fires in oxygen-enriched atmospheres are larger, more intense, faster burning, and more difficult to extinguish.

DIF: Application REF: p. 47 OBJ: 7

20. Which of the following conditions must be met for a fire to occur?
1. temperature high enough for combustion
 2. presence of oxygen
 3. presence of flammable material
- a. 1 and 2
 - b. 2 and 3
 - c. 1 and 3
 - d. 1, 2, and 3

ANS: D

For a fire to start, three conditions must exist: (1) flammable material must be present, (2) oxygen must be present, and (3) the flammable material must be heated to or above its ignition temperature.

DIF: Application REF: p. 48 OBJ: 7

21. Which of the following statements is/are true regarding the use of oxygen?
1. Oxygen is flammable.
 2. Oxygen accelerates the rate of combustion.
 3. Increased oxygen concentration accelerates the rate of combustion.
- a. 1 and 2
 - b. 2 and 3
 - c. 1 and 3
 - d. 1, 2, and 3

ANS: B

Although oxygen is nonflammable, it greatly accelerates the rate of combustion. Burning speed increases with an increase in either the concentration or partial pressure of oxygen.

DIF: Recall REF: p. 48 OBJ: 7

22. How can the risk of fire because of static electrical discharge in the presence of oxygen be minimized?
- a. Use only wool or polyester fabrics in the area of use.
 - b. Keep oxygen concentrations well below 21%.
 - c. Maintain high relative humidity in the area of use.
 - d. Keep oxygen in high-pressure storage cylinders.

ANS: C

The minimal risk that may be present can be further reduced by maintaining high relative humidity (greater than 60%).

DIF: Application REF: p. 48 OBJ: 7

23. In the standard approach to hospital fires, the RACE plan has been suggested. What does the letter "C" stand for in this approach?
- a. capture
 - b. contain
 - c. call for help

d. collapse

ANS: B

The third step is to contain the fire as much as possible by closing doors and turning oxygen zone valves off.

DIF: Application REF: p. 48 OBJ: 7

24. Nonverbal communication includes all of the following except:
- gesture
 - touch
 - discussion
 - space

ANS: C

Nonverbal communication includes gestures, facial expressions, eye movements and contact, voice tone, space, and touch.

DIF: Recall REF: p. 49 OBJ: 9

25. Which of the following components of communication is a method used to transmit messages?
- sender
 - channel
 - receiver
 - feedback

ANS: B

The channel of communication is the method used to transmit messages.

DIF: Application REF: p. 49 OBJ: 9

26. Which of the following is a method for communicating empathy to your patients?
- use of touch
 - use of key words
 - use of eye contact
 - use of the authority
- 1, 2, and 3
 - 1 and 3
 - 1, 2, 3, and 4
 - 2, 3, and 4

ANS: A

The use of touch and proper eye contact can demonstrate genuine concern for your patient. Key words and phrases such as "I understand" can let the patient know you are listening and interested.

DIF: Application REF: p. 50 OBJ: 9

27. Which of the following factors can have an impact on the outcomes of therapeutic communication between patient and practitioner?
- verbal and nonverbal components of expression

2. environmental factors (e.g., noise, privacy)
 3. values and beliefs of both patient and practitioner
 4. sensory and emotional factors (e.g., fear, pain)
- a. 1, 2, and 3
 - b. 1 and 3
 - c. 1, 2, 3, and 4
 - d. 2, 3, and 4

ANS: C

Many factors affect communication in the health care setting (Figure 3-11).

DIF: Application REF: p. 50 OBJ: 9

28. Basic purposes of communication include all of the following except:
- a. change others' values orientation
 - b. obtain or relay information
 - c. give instructions (teach)
 - d. persuade others to take action

ANS: A

Key purposes of communication are summarized in Box 3-1.

DIF: Application REF: p. 51 OBJ: 11

29. All of the following techniques can be used to improve one's effectiveness as a sender of messages except:
- a. share information rather than telling
 - b. emphasize agreement over disagreement
 - c. eliminate threatening behavior
 - d. use effective nonverbal communication

ANS: B

Others will not always agree with what you say. Do not become defensive when others disagree with you; simply try to understand their perspective and be open to their input.

DIF: Application REF: p. 52 OBJ: 12

30. All of the following techniques can be used to improve one's listening skills except:
- a. resist distractions
 - b. maintain composure and control emotions
 - c. keep an open mind (be objective)
 - d. judge the sender's delivery, not the content

ANS: D

The content of what is being said is the issue to focus on. How it is delivered is not that important. Some people are more articulate than others but the message is most important.

DIF: Application REF: p. 52 OBJ: 12

31. Maintaining eye contact, leaning toward the patient, and nodding your head are all good examples of what communication technique?
- a. clarifying

- b. empathizing
- c. attending
- d. reflecting

ANS: C

Attending involves the use of gestures and posture that communicate one's attentiveness. Attending also involves confirming remarks such as, "I see what you mean."

DIF: Application REF: p. 52 OBJ: 12

32. Techniques to help ensure that understanding is taking place between the parties involved in an interaction include which of the following?
- 1. clarifying
 - 2. paraphrasing
 - 3. perception checking
 - 4. attending
- a. 1, 2, and 3
 - b. 1 and 3
 - c. 1, 2, 3, and 4
 - d. 2, 3, and 4

ANS: C

All four techniques can be useful to enhance communication.

DIF: Application REF: p. 52 OBJ: 12

33. A therapist who says "Please explain that to me again" to a patient during an interview is using what interpersonal communication technique?
- a. clarifying
 - b. paraphrasing
 - c. perception checking
 - d. reflecting feelings

ANS: A

Requesting clarification lets the patient know you are trying to understand him or her.

DIF: Recall REF: p. 52 OBJ: 12

34. A patient's response to an interview question is initially unclear. Which of the following responses on your part would be most appropriate?
- a. "Please go on."
 - b. "You seem to be anxious."
 - c. "Please explain that to me again."
 - d. "Yes, I think I understand."

ANS: C

Requesting clarification is done by asking the patient to explain his or her thought again.

DIF: Application REF: p. 52 OBJ: 12

35. A therapist who says "You seem to be anxious about your surgery" to a patient just admitted for bypass surgery is using what interpersonal communication technique?

- a. clarifying
- b. paraphrasing
- c. perception checking
- d. reflecting feelings

ANS: D

Reflecting feelings is the process of telling patients about how you perceive their feelings. It encourages patients to discuss their feelings further.

DIF: Application REF: p. 53 OBJ: 11

36. Key barriers to effective interpersonal communication include all of the following except:
- a. use of symbols or words with different meanings
 - b. value systems that are different or not accepted
 - c. similar perceptions of the problem
 - d. feelings of personal insecurity by one or both parties

ANS: C

Similar perceptions of the problem promote communication and are not a barrier.

DIF: Application REF: p. 52 OBJ: 13

37. Which of the following strategies for conflict resolution represents a middle-ground strategy that combines assertiveness and cooperation?
- a. avoiding
 - b. competing
 - c. compromising
 - d. accommodating

ANS: C

Compromising is a middle-ground strategy that combines assertiveness and cooperation.

DIF: Recall REF: p. 54 OBJ: 13

38. What form of patient record is most designed to succinctly report data in a time-oriented format and to decrease time needed for documentation?
- a. subjective, objective, assessment, and plan (SOAP) record
 - b. problem-oriented, medical record (POMR) record
 - c. flowsheet
 - d. progress note

ANS: C

Flowsheets are designed to briefly report data and to decrease time spent in documentation.

DIF: Recall REF: p. 55 OBJ: 14

39. The elements of a POMR entry would include which of the following?
1. patient's subjective complaints and concerns
 2. objective data gathered by the health professional
 3. assessment of the subjective and objective data
 4. plan to address the identified problem(s)
- a. 1, 2, and 3

- b. 1 and 3
- c. 1, 2, 3 and 4
- d. 1, 3, and 4

ANS: C

The POMR progress notes contain the findings (subjective and objective data), assessment, plans, and orders of the doctors, nurses, and other practitioners involved in the care of the patient. The format used is often referred to as SOAP. “S” = subjective information; “O” = objective information; “A” = assessment; “P” = plan of care.

DIF: Application REF: p. 58 OBJ: 14

40. Information about a patient’s nearest kin, physician, and initial diagnosis can be found in which section of the medical record?
- a. history and physical exam
 - b. admission sheet
 - c. physician’s orders
 - d. consultation sheet

ANS: B

See Box 3-3.

DIF: Recall REF: p. 55 OBJ: 14

41. To confirm a physician’s prescription for a drug that you need to give to a patient, you would go to which section of the medical record?
- a. history and physical exam
 - b. laboratory sheet
 - c. physician’s orders
 - d. medication record

ANS: C

See Box 3-3.

DIF: Recall REF: p. 55 OBJ: 14

42. To determine the most recent medical status of a patient whom you are about to start treating, you would go to which section of the medical record?
- a. progress sheet
 - b. nurses’ notes
 - c. physician’s orders
 - d. history and physical exam

ANS: A

See Box 3-3.

DIF: Recall REF: p. 55 OBJ: 14

43. To find out what drugs or intravenous fluids a patient has received recently, you would go to which section of the medical record?
- a. progress sheet
 - b. nurses’ notes

- c. physician's orders
- d. medication record

ANS: D
See Box 3-3.

DIF: Recall REF: p. 55 OBJ: 14

44. What is a time-based record of measurement during a specialized procedure such as mechanical ventilation?
- a. consultation sheet
 - b. specialized flowsheet
 - c. progress notes
 - d. graphic sheet

ANS: B
See Box 3-3.

DIF: Recall REF: p. 55 OBJ: 14

45. A pulmonary specialist has been called in by an internist to examine a patient and help make a diagnosis. Where in the patient's medical record would you look for the pulmonary specialist's report?
- a. progress sheet
 - b. consultation sheet
 - c. physician's orders
 - d. history and physical exam

ANS: B
See Box 3-3.

DIF: Recall REF: p. 55 OBJ: 14

46. To determine any recent trends in a patient's pulse, respiration, or blood pressure, you would go to which section of the medical record?
- a. progress sheet
 - b. nurses' notes
 - c. anesthesia record
 - d. vital signs sheet

ANS: D
See Box 3-3.

DIF: Recall REF: p. 55 OBJ: 14

47. To check on the results of a patient's recent blood work, you would go to which section of the medical record?
- a. vital signs sheet
 - b. laboratory sheet
 - c. flowsheet
 - d. progress notes

ANS: B

See Box 3-3.

DIF: Recall REF: p. 55 OBJ: 14

48. To determine the amount of urine excreted by a patient in the last 24 hours, you would go to which section of the medical record?
- vital signs sheet
 - laboratory sheet
 - nurses' notes
 - intake and output (I & O) sheet

ANS: D
See Box 3-3.

DIF: Recall REF: p. 55 OBJ: 14

49. Which of the following is the correct way to sign a medical record entry?
- CAW, LRCP, CRT
 - CAW, Respiratory Department
 - C. White, LRCP, CRT
 - Cathy White, Therapist, Respiratory Department

ANS: C
See Box 3-4.

DIF: Application REF: p. 58 OBJ: 15

50. Which of the following is an acceptable practice in medical recordkeeping?
- leaving blank lines
 - erasing incorrect entries
 - using ditto marks
 - using standard abbreviations

ANS: D
See Box 3-4.

DIF: Recall REF: p. 58 OBJ: 15

51. If you make a mistake when charting a patient treatment, what should you do?
- Make a new entry (called "correction") just below the mistake.
 - Erase the mistake and have your supervisor countersign it.
 - Draw a line through the mistake and write "error" above it.
 - Have your supervisor make the chart correction later.

ANS: C
See Box 3-4.

DIF: Recall REF: p. 58 OBJ: 15

52. Which of the following are unacceptable practices in medical recordkeeping?
- specifying when you will return to provide patient therapy
 - providing your own interpretation of a patient's symptoms

3. recording the patient's complaints and general behavior
4. charting several separate tasks under a single chart entry
 - a. 2 and 4
 - b. 1 and 2
 - c. 1 and 4
 - d. 1, 2, and 4

ANS: A
See Box 3-4.

DIF: Recall REF: p. 58 OBJ: 15

53. What is the role of the RT during a disaster situation?
 - a. transporting the critically ill patients to safety first
 - b. shutting of the main oxygen supply in the hospital
 - c. getting themselves to safety
 - d. going to look for a backup generator

ANS: A
Part of the RT's role of disaster preparedness includes transport and transfer of the critically ill patients.

DIF: Application REF: p. 48 OBJ: 8

54. A patient who is on a ventilator is going to be transported to MRI. Which of the following is the most important piece of equipment to have available in the MRI suite?
 - a. a MRI compatible ventilator
 - b. laboratory flowsheet
 - c. intubation box
 - d. sedatives

ANS: A
The RT needs to have an MRI-compatible ventilator available and set up in the MRI suite.

DIF: Analysis REF: p. 49 OBJ: 8

55. All health care personnel must use the "two patient identifiers" before initiating care, which include all of the following, except?
 - a. patient name
 - b. patient birth date
 - c. patient medical record number
 - d. patient room number

ANS: D
All health care personnel must use the "two patient identifiers" before initiating care, which include patient name, birth date, and medical record number

DIF: Application REF: p. 50 OBJ: 10

56. Medical records are strictly confidential and are protected under what law?
 - a. HIPPA
 - b. HESSA

- c. Record's law
- d. Patriot Act

ANS: A

Medical records are strictly confidential and are protected under the Health Insurance and Portability Act (HIPPA).

DIF: Recall REF: p. 54 OBJ: 15

57. What was one of the Joint Commission's (TJC) goals for 2010?
- a. to improve accuracy of patient identification
 - b. to lessen costs
 - c. to enforce proper infection control
 - d. to have more case studies

ANS: A

TJC's goals for 2010 were to improve accuracy of patient identification.

DIF: Recall REF: p. 50 OBJ: 10

58. Improper storage or handling of medical gas cylinders can result in which of the following?
- 1. increased risk of fire
 - 2. explosive releases of high pressure gas
 - 3. toxic effects of some gases
 - 4. a contained environment
- a. 1, 2 and 4
 - b. 1 and 2
 - c. 1 and 4
 - d. 1, 2, and 3

ANS: D

All of the above and result from improper storage and handling of medical gas cylinders.

DIF: Recall REF: p. 49 OBJ: 8

59. Which group or organizations regulates the storage of medical gases?
- a. NBRC
 - b. National Fire Protection Association (NFPA)
 - c. The Joint Commission (TJC)
 - d. HIPPA

ANS: B

National Fire Protection Association (NFPA) regulates the storage of medical gases. Monitoring is done by the Joint Commission.

DIF: Recall REF: p. 49 OBJ: 8

60. An RT is instructing a patient on a particular piece of equipment, and should use which scenario on educating the patient?
- a. Call Back
 - b. Read Back
 - c. Teach Back

d. A short quiz

ANS: C

A Teach Back scenario will be helpful for the RT to know if the patient understands what is being explained regarding equipment use.

DIF: Application REF: p. 51 OBJ: 12