

Chapter 1: Clinical Decision Making

1. When planning a patient intervention, the physical therapist should
 - A) coordinate care of the patient with other professionals.
 - B) allow the case manager to coordinate the discharge.
 - C) choose only one intervention for the patient.
 - D) follow protocols without consideration of the patient's needs.

2. When providing patient/client-related instruction the therapist should
 - A) direct all instruction to the patient only during the initial visit.
 - B) provide instruction to all patients/clients in the same manner.
 - C) provide instruction to facilitate understanding of the patient's condition.
 - D) plan all instruction for immediately prior to the patient's discharge.

3. Interventions to improve the patient's range of motion would be considered
 - A) restorative.
 - B) compensatory.
 - C) preventive.
 - D) facilitative.

4. Interventions to facilitate wheelchair propulsion would be considered
 - A) restorative.
 - B) compensatory.
 - C) preventive.
 - D) facilitative.

5. When planning a patient intervention the physical therapist should
 - A) choose tasks the patient cannot accomplish so the need for therapy is clear.
 - B) identify interventions that allow the patient to meet one goal at a time.
 - C) follow a specific protocol developed for the patient's medical diagnosis.
 - D) consider the frequency, intensity, and duration of the intervention.

6. As the physical therapist is evaluating the patient's progress toward documented outcome goals, it is noted that the patient is not progressing as anticipated. What is the most appropriate question for the therapist to ask?
 - A) How did the patient's goals relate to the institution's goals?
 - B) Was this patient appropriate for physical therapy intervention?
 - C) Were the goals and outcomes realistic for this patient?
 - D) Should I document the patient's status at this time?

7. One reason for noncompliance with a prescribed intervention is
 - A) the therapist has communicated the expected outcomes well.
 - B) the patient and family were not involved in the planning process.
 - C) the patient is working toward personally meaningful goals.
 - D) the patient is not expected to return to prior level of function.

8. Evidence-based practice requires therapists to
 - A) weigh all research published in peer-reviewed journals equally.
 - B) integrate research evidence with clinical expertise and patient values.
 - C) use the newest interventions promoted in continued education courses.
 - D) use only interventions that have level 1 studies showing efficacy.

9. When documenting in the patient's medical record the therapist must
 - A) include all statements made by the patient to the clinician in the objective section.
 - B) abbreviate all medical terms so only other clinicians can read the record.
 - C) make all corrections to any errors using correction fluid or by erasure.
 - D) document all intervention provided including frequency, duration, and intensity.

Answer Key

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

1. During the physical therapy intervention the patient exhibits some signs of depression. The physical therapist should
 - A) monitor the patient because many patients have depression during an illness.
 - B) encourage the patient by pointing out all of the progress that has been made.
 - C) refer the patient to an appropriate team member such as a psychologist or social worker.
 - D) provide counseling to the patient during the physical therapy intervention.

2. Successful psychosocial adaptation to disability and chronic illness may be characterized by
 - A) participation in social, recreational, or vocational pursuits.
 - B) a sudden change in the individual's view of himself.
 - C) unrealistic views of one's functional capabilities.
 - D) avoidance of relationships with friends and family.

3. Children born with disabilities
 - A) demonstrate significant depression which causes them to isolate themselves.
 - B) have significant adjustment issues once they enter school and meet other children.
 - C) experience grief and loss when they see what other children can do.
 - D) develop their self-identity in ways that mirror that of children without disabilities.

4. Grief is characterized by
 - A) increased focus and concentration.
 - B) waves of physical distress.
 - C) feelings of empowerment.
 - D) increased ability to make decisions.

5. Grief that occurs following a disability that occurs as a consequence of a trauma
 - A) follows the same pattern as grief experienced as a result of other losses.
 - B) occurs in a predictable, linear fashion through a series of 10 stages.
 - C) may be prolonged as the patient must work toward accepting an altered self.
 - D) can improve that individual's immune system and facilitate recovery.

6. Generally the initial reaction to a physical or psychological trauma is
 - A) shock
 - B) denial
 - C) depression
 - D) anger

7. A patient presents in physical therapy demanding immediate assistance and becomes verbally aggressive with the staff when told he will need to wait. In what phase of psychosocial adaptation does this patient appear to be?
- A) Internalized denial
 - B) Externalized denial
 - C) Internalized hostility
 - D) Externalized hostility
8. What is an example of a behavior demonstrated by a patient who is in the internalized anger phase of psychosocial adaptation?
- A) Blaming others
 - B) Suicidal tendencies
 - C) Verbally abusive
 - D) Disaffected
9. What is one assumption about the adjustment phase of psychosocial adaptation?
- A) All individuals progress through each phase sequentially and at the same rate.
 - B) Once an individual has progressed through a stage, she cannot return to it.
 - C) Not all individuals will achieve adjustment; some fixate on earlier stages.
 - D) Adaptation occurs through internal processes and cannot be affected by external events.
10. Patients who experience disability as a result of chronic illness
- A) progress through the phases of psychosocial adaptation more rapidly.
 - B) experience shock more intensely than those who experience trauma.
 - C) do not experience regression through the stages once they have progressed.
 - D) may have more difficulty achieving adjustment to their disability.
11. During the early phases of rehabilitation, physical therapists should help patients through the phases of adaptation by
- A) telling the patient that he will make a full recovery no matter what the prognosis.
 - B) teach diaphragmatic breathing to facilitate self-control and relaxation.
 - C) push the patient so he can make rapid progress in their functional recovery.
 - D) encourage the patient to depend on the therapist and other caregivers.
12. Why is it important for the physical therapist to address issues of body image with the patient?
- A) Body image does not need to be adapted unless the patient has lost a limb.
 - B) Body image can be negatively influenced by the therapist's attention to the disability.
 - C) Body image is intimately related to the individual's sense of self-concept and self-esteem.
 - D) Body image stays the same after disability as before despite the changes in function.

13. Coping strategies that positively influence a patient's rehabilitation include what types of behaviors?
- A) Dependence on the physical therapist for direction in rehabilitation.
 - B) Ignoring changes in functional abilities and going on with life.
 - C) Blaming others for the problems encountered in rehabilitation.
 - D) Seeking information and problem solving with the physical therapist.
14. In rehabilitation settings, patients with an internal locus of control
- A) rely on the rehabilitation team to make decisions for them.
 - B) believe they can have the most influence over their situation.
 - C) influence their situation by determining who is to blame.
 - D) have high levels of anxiety and distress during treatment.
15. A patient in your rehabilitation setting criticizes each of the team members during a conference and states that they are incompetent. What type of a defensive mechanism is she exhibiting?
- A) Acting out
 - B) Autistic fantasy
 - C) Denial
 - D) Devaluation
16. A patient refuses to participate in discussions about his pending discharge with the rehabilitation team. The case manager has already informed the patient that the team doesn't believe the patient can go home independently. What type of a defensive mechanism is the patient exhibiting?
- A) Acting out
 - B) Altruism
 - C) Denial
 - D) Devaluation
17. Anxiety is caused by
- A) small irritations that occur when dealing with one's significant other.
 - B) irritations and frustrations that cause depression or sadness in the individual.
 - C) employment situations that are stressful to the individual on a weekly basis.
 - D) irritations and frustrations that occurs during everyday interaction with the environment.
18. The patient is an elderly woman who has spent the last two therapy sessions complaining of multiple aches and pains and expressing her fears about returning home from the hospital. What is the best way to manage this patient's anxiety?
- A) Have the patient participate in rhythmic gross motor movements that are calming.
 - B) Encourage the patient to express her fears and anxiety in the current manner.
 - C) Allow the patient to take a break from therapy until she feels more in control.
 - D) Provide treatment to the patient in a room where there are many distractions for the patient.

19. What might be the signs that a patient is experiencing posttraumatic stress disorder?
 - A) Manic state and euphoria
 - B) Increased focus on tasks in therapy
 - C) Nightmares about the traumatic event
 - D) Angry outbursts

20. What condition is often seen as a comorbidity of post-traumatic stress disorder?
 - A) Fibromyalgia
 - B) Bipolar disorder
 - C) Brain injury
 - D) Chronic pain

21. Which of the following is true about depression?
 - A) According to *Healthy People 2010*, more than 50% of men with disabilities experience depression.
 - B) Women are twice as likely as men to experience depression because of multiple factors.
 - C) Depression occurs less frequently in women because they are more verbal than men.
 - D) Men often become hypervocal when they are experiencing an episode of depression.

22. When working with patients with depression the physical therapist should
 - A) allow the patients to discontinue therapy until they feel better.
 - B) force the patients to be independent when performing all activities.
 - C) give the patients tasks they cannot perform so they see the need for therapy.
 - D) assist the patients to see their strengths and the reality of their situation.

23. If the physical therapist observes signs of agitation in a patient, what would be the most appropriate action?
 - A) Ask the patient to sit in a quiet area until he settles down.
 - B) Tell the patient he needs to stop his agitated behavior.
 - C) Acknowledge to the patient that he seems upset and ask why.
 - D) Obtain a consultation from a psychologist before the next treatment.

24. What would be the best action if the physical therapist observes signs of hypersexuality in a patient that have not been previously observed?
 - A) Allow the patient a time and place to express her desires verbally and physically.
 - B) Inform the patient that the behaviors are inappropriate and will not be tolerated.
 - C) Encourage the patient to engage in sexual activity with her partner.
 - D) Counsel the patient's partner that she needs to engage in sexual activity with the patient.

Answer Key

1. C
2. A
3. D
4. B
5. C
6. A
7. D
8. B
9. C
10. D
11. B
12. C
13. D
14. B
15. D
16. A
17. D
18. A
19. C
20. D
21. B
22. D
23. C
24. B