

# Post Tests

**pt091106draft**

# RNP Post Test

# LEADERSHIP

052706  
090906

RNA/RNPC Name \_\_\_\_\_ Dates \_\_\_\_\_

1. The RNP is designed to (circle all that apply):
  - a. Help with self care
  - b. Promote resident's ability to adapt and adjust to living independently and safely.
  - c. Assist resident in achieving and maintaining optimal physical, mental and psychosocial functioning
  - d. Provide therapeutic intervention by Licensed Therapists
2. The RNP scope of service may include (circle all that apply):
  - a. Ambulation, transfer training, positioning
  - b. Exercise programs
  - c. Dining program
  - d. Social program
3. A resident may be admitted into the RNP program when (circle all that apply):
  - a. Referred by Therapy Department
  - b. Referred by caregivers
  - c. Referred by IDT/Nursing
  - d. Referred by families
4. Admission criteria to the RNP may include (circle all that apply):
  - a. Skilled therapy not indicated
  - b. No potential for improvement
  - c. Decline in physical and/or mental functioning
  - d. Unsteady gait, frequent falls and/or weight loss, for example
5. A resident may be discharged from the RNP when (circle all that apply):
  - a. Resident meets the goal of the program
  - b. Resident frequently refuses to participate
  - c. Resident has too much pain
  - d. Resident doesn't like the RNA
6. RNPC is responsible for (circle all that apply):
  - a. Oversight for the RNP
  - b. Oversight or participation in initiating or updating resident care plans related to RNP
  - c. Monitoring completion of charting and quality of charting
  - d. Scheduling meetings with the RNA
  - e. Completing annual reviews of the RNA
7. RNA should report to the RNPC when (circle all that apply):
  - a. The resident complains of pain while doing the activity
  - b. The RNA cannot complete assignments
  - c. The RNA does not think she or he know how to do the activity ordered
  - d. RNA observes a decline in function in a resident who has been discharged from the RNP
8. Documentation requirements may include (circle all that apply):
  - a. The RNA who provided the activity must complete the charting
  - b. The RNA may wait until the end of the week to chart
  - c. Weekly progress notes that include resident's response to treatment/status/progress
  - d. Legible documentation
9. Effective leadership strategies for the RNP include (circle all that apply):
  - a. Effective RNP training with periodic skill checks
  - b. Allowing RNAs to function independently
  - c. Participating in IDT care plan meetings for residents in RNP
  - d. Allowing time for documentation and resident care
  - e. Celebrating success of RNP and resident outcomes

Instructor \_\_\_\_\_ Title \_\_\_\_\_ Initials \_\_\_\_\_ Date \_\_\_\_\_

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**RNP Post Test****COGNITION**

RNA/RNPC Name \_\_\_\_\_

Dates \_\_\_\_\_

1. A type of memory cueing system that is effective with an Alzheimer residents is:
  - a. Verbal reminders
  - b. Daily diary by hour
  - c. Rubber band around the wrist
2. Which of the following is the most effective strategy for talking to a dementia resident who has gotten upset and is resisting when you try to help her brush her teeth?
  - a. Tell the resident that her family expects her to brush her teeth
  - b. Try to tell her why it is important that she brush her teeth
  - c. Force the toothbrush into her mouth and begin brushing
  - d. Stop what you are doing and come back to try again once the resident has calmed down
3. Circle the best environment for working with the cognitively impaired resident (choose three):
  - a. Keep noise as loud as possible
  - b. Use adequate lighting
  - c. Establish structure and routine
  - d. Speak to the resident in a noisy room
  - e. Use words that frequently occur in the English language
4. When working with an Alzheimer resident, you should:
  - a. Quiz the resident
  - b. Give long, complex directions
  - c. Use patience
  - d. Use anger and frustration in your voice
5. Which of the following is an example of *reversible* dementia:
  - a. Huntington disease
  - b. Alzheimer disease
  - c. Depression
  - d. Parkinson disease
6. To help an Alzheimer resident in the middle stage, ask her or him to repeat and remember information:
  - a. True
  - b. False
7. To help a resident calm down, tell her or him to:
  - a. Calm down or she/he will be transferred
  - b. Agree with her/him and say you understand
  - c. Correct the resident and give her/him the correct information, then ask the resident to repeat.
8. Keeping a daily log of events helps an Alzheimer resident:
  - a. Become oriented to place and time
  - b. Have something meaningful to talk about
  - c. Return his memory to normal
9. How can you help the Alzheimer resident who is \_\_\_\_? (Put the number in the blank which describes the solution.)
  - a. Bed-bound – unable to talk or follow any directions (late stage) # 4
  - b. Wandering all day without resting (late stage) # 3
  - c. Yelling and stating, “You stole my money” (middle stage) # 5
  - d. Having trouble finding the right words to explain himself (middle stage) # 2
  - e. Denying she had any difficulty with her memory # 1
  - #1. Don't embarrass them by correcting them and saying they are wrong and that they just don't remember the correct information.
  - #2. Say, “I can't think of the right words sometimes either.” Then help her complete her message – but quickly change the subject if frustration begins.
  - #3. Have the resident sit down to do an activity such as folding towels and supply a snack.
  - #4. Provide touch and communicate with dignity and respect.
  - #5. Say, “I put your money in a safety box up front under lock and key so no one can steal it from you.” Then quickly distract the resident or change the subject.
10. When an Alzheimer resident states that you are his mother/father or brother/sister, you should –
  - a. Correct him, tell him who you are and ask him to repeat your name – then check in five minutes to quiz him to make sure he remembers.
  - b. Just smile and begin a conversation about something that would be of interest to him.

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## RNP Post Test

## HEARING

RNA/RNPC Name \_\_\_\_\_ Dates \_\_\_\_\_

1. Listening to very loud music or working around loud machines can cause nerve damage:

- a. True
- b. False

2. When a resident receives a new hearing aid, it should be worn:

- a. From 8 a.m. to 6 p.m. for the first week
- b. Every other day
- c. For two to three hours the first day, gradually increasing the time over a week

3. Talk loudly with anyone who wears a hearing aid:

- a. True
- b. False

4. The light from a window should always shine toward the resident's face:

- a. True
- b. False

5. Wax in an ear:

- a. Can cause nerve damage
- b. Will cause a decrease in loudness only

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**RNP Post Test****COMMUNICATION**

RNA/RNPC Name \_\_\_\_\_ Dates \_\_\_\_\_

1. Which three communication strategies are best used with a person who has paralysis on the right side of the body?
  - a. Speak slowly
  - b. Allow resident time to respond
  - c. Use a foreign language
  - d. Speak to the resident in a noisy room
  - e. Use words that frequently occur in their native language
2. If the left side of the body is paralyzed, the communication problems would be (circle all that apply):
  - a. Aphasia
  - b. Disorientation
  - c. Anomia
  - d. Denial of deficits
3. If the left side of the body is paralyzed, the communication problems would be (circle all that apply):
  - a. Good safety judgment
  - b. Good ability to concentrate and focus on tasks
  - c. Slurred speech
  - d. None of the above
4. To help a resident communicate who has weakness or paralysis on the left side of the body (circle all that apply):
  - a. Orient the resident throughout the day
  - b. Provide poor lighting
  - c. Provide tactile and verbal reminders
  - d. Ask short, clear, concrete questions
  - e. Always work and communicate in a busy environment
5. Regarding communication boards (circle the correct *true* or *false*):
  - a. Repetition is helpful – *true* or *false*
  - b. Objects are easier than pictures to identify – *true* or *false*
6. Encourage a resident with dysarthria to:
  - a. Talk a little quicker
  - b. Exaggerate the beginning and ending sound on each word
7. To help an apraxic resident communicate, ask him to:
  - a. Repeat himself over and over until he can say his thought
  - b. Choose different words or try to sing what he wants to say

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## RNP Post Test

**DYSPHAGIA AND EATING**

RNA/RNPC Name \_\_\_\_\_ Dates \_\_\_\_\_

1. A swallowing problem is called:

- a. Dysarthria
- b. Choking
- c. Dysphagia

2. Circle three stages of swallow:

- a. Larynx
- b. Pharyngeal
- c. Epiglottis
- d. Esophageal
- e. Oral

3. Circle two anatomical sites of the larynx that protect the airway:

- a. Epiglottis
- b. Tongue
- c. Vocal folds
- d. Lips

4. Circle the areas of health that dysphagia may impact (circle all that apply):

- a. Weight
- b. Urinary tract health
- c. Skin integrity
- d. Heart problems
- e. Brain tumor

5. Diagnosis associated with dysphagia may be (circle all that apply):

- a. Stroke
- b. Cold
- c. Parkinson disease
- d. Alzheimer disease

6. Circle five common problems with swallowing:

- a. Resident reports difficulty with swallowing
- b. Resident does nothing with food in the mouth
- c. Spitting food out
- d. Resident is sleeping in her/his chair
- e. A "wet" voice
- f. Kicking legs under the table
- g. Frequent throat clearing
- h. Eating food from another resident's plate

7. To prevent aspiration the RNA should (circle all that apply):

- a. Have the resident lie flat on his back after meals
- b. Wait for a swallow before giving the next bite of food
- c. Offer the resident a drink through a straw if he starts to cough
- d. Keep the resident positioned upright at 90 degrees during meals
- e. Alternate sips and bites
- f. b, d and e

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**RNP Post Test****JOINT MOBILITY**

RNA/RNPC Name \_\_\_\_\_ Dates \_\_\_\_\_

1. The purpose of joint ROM includes which of the following (circle all that apply):
  - a. To prevent contractures or reduce current contractures.
  - b. To maintain or increase the motion of a joint.
  - c. To increase the functional use of the extremity.
  - d. To decrease functional use of the extremity.
2. When assisting ROM, the resident should (circle all that apply):
  - a. Be comfortably positioned.
  - b. Be informed of what you are doing and why.
  - c. Be given only as much assistance as needed to perform each movement pattern.
  - d. All of the above.
3. Stop PROM *if* (circle all that apply):
  - a. The resident is unable to move by himself.
  - b. The joint moves freely without bony obstruction.
  - c. The resident complains of unusual pain.
  - d. It is time for your break.
4. Active ROM (circle all that apply):
  - a. Is exercise performed by the resident without physical assistance.
  - b. Is less important for the resident than passive ROM.
  - c. Can be performed as part of ADLs.
  - d. a and c.
5. Identify four reasons for the RNA to assist in a routine exercise/maintenance program:
  - a. Improve balance and mobility.
  - b. Keep residents busy.
  - c. Improve strength or ROM.
  - d. Increase endurance and ambulation tolerance.
  - e. Promote independence of the resident.
6. Which of these devices and techniques can be used to prevent contractures?
  - a. Mobilization of the affected joint
  - b. Use of a splint
  - c. Active and/or passive ROM
  - d. Encouraging active function
  - e. All of the above

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**RNP Post Test**

**FUNCTIONAL MOBILITY – ORTHO**

RNA/RNPC Name \_\_\_\_\_ Dates \_\_\_\_\_

1. Standard total hip precautions include (circle all that apply):

- a. No hip extension greater than 60-90 degrees
- b. No hip flexion greater than 60-90 degrees
- c. No hip abduction
- d. No hip adduction past midline
- e. No hip external rotation
- f. No hip internal rotation

2. Dr. Sawbones ordered 25% weight bearing on the left LE during transfers/ambulation activities. What is the term used to identify this level of weight bearing?

- a. NWB
- b. TDWB
- c. PWB
- d. WBAT
- e. FWB

3. What assistive device would be most appropriate for the resident in question 2 above?

- a. SPC
- b. II bars
- c. Hemi walker
- d. FWW
- e. Platform walker

4. Good body mechanics requires that you... (circle all that apply):

- a. Get close to the object/person being moved
- b. Bend knees – let the legs do the work, not your back
- c. Assess the situation before taking action
- d. Push – don't pull
- e. Turn – don't twist
- f. Use a wide base of support

5. Match the following definitions to the levels of assist:

- |  |          |
|--|----------|
| <u>  c  </u> Resident requires 25% assist with task                  | a. Max A |
| <u>  f  </u> Resident performs 100% without assist or instruction    | b. Mod A |
| <u>  e  </u> Resident requires verbal cue and/or setup               | c. Min A |
| <u>  a  </u> Resident requires 75% or more assist with task          | d. CGA   |
| <u>  b  </u> Resident requires 50% assist with task                  | e. S     |
| <u>  d  </u> Resident requires hands on but no weight bearing assist | f. I     |

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## RNP Post Test

## FUNCTIONAL MOBILITY – NEURO

RNA/RNPC Name \_\_\_\_\_ Dates \_\_\_\_\_

1. Your residents may have some common medical problems, such as:
  - a. Respiratory problems
  - b. Parkinson symptoms
  - c. Deficits resulting from a stroke (CVA)
  - d. Fractures of the hip, wrist, vertebrae
  - e. All of the above
2. When supervising an ADL program with a hemiplegic patient, which side do you instruct/assist the patient to dress first?
  - a. It doesn't matter – the resident can dress either side first
  - b. Dress the affected (weak) side first
  - c. Dress the unaffected (strong) side first
3. When performing a partial assist transfer from bed to chair with a hemiplegic resident (circle all that apply):
  - a. Get close to the object/person being moved
  - b. Bend knees – let the legs do the work, not your back
  - c. Assess the situation before taking action
  - d. Push – don't pull
  - e. Turn – don't twist
  - f. Use a wide base of support
4. When assisting a resident with right hemiplegia to ambulate with an assistive device (circle all that apply):
  - a. Use a gait belt
  - b. Place the assistive device in the resident's *right* hand
  - c. Place the assistive device in the resident's *left* hand
  - d. Instruct gait pattern as: Cane, left leg, right leg
  - e. Instruct gait pattern as: Cane, right leg, left leg

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