



## **2020 - 2021 Orientation Essentials /Annual Update Post-test**

### **GENERAL INFORMATION**

1. “Whittier Hospital Medical Center is committed to providing compassionate, quality care to the patients and families we serve in a family-friendly environment”. This is known as our mission statement.
  - a. True
  - b. False
  
2. If English is a second language for a patient and consent is needed for a procedure, then what device should be used?
  - a. Internet translation software
  - b. Cyacom phone or Cyacom VIR through use of WOW's with webcam capacity for patients requiring sign language or who would benefit from seeing the translator face-to-face.
  - c. Vital signs monitor
  - d. Pulse oximeter
  - e. Dictionary

### **INFORMATION SYSTEMS**

3. Each employee is responsible to:
  - a. Maintain security of their computer password(s) and not tell anyone their password
  - b. Notify their supervisor and/or the Information Security Officer of any suspected breach of computer system securities
  - c. Know their department computer downtime procedures
  - d. Follow all hospital policies and procedures concerning computer use
  - e. All of the above.

### **HUMAN RESOURCES**

4. Appropriate attire in the hospital includes all the following *EXCEPT*:
  - a. Closed toe shoes
  - b. Employee badge
  - c. Acrylic nails for clerical staff
  - d. Acrylic nails for clinical caregivers

## **ENVIRONMENT OF CARE**

5. Hospital grade plugs should have \_\_\_\_\_ prongs.
  - a. Two
  - b. Three
  - c. Two or three
  - d. None of the above
  
6. The P.A.S.S. acronym is used for fire extinguisher use. It means the following:
  - a. Push, Alarm, Shout, Sweep
  - b. Pull, Aim, Squeeze, Sweep
  - c. Pull, Alarm, Sweep, Shout
  
7. Electrical fires are the #1 cause of fires in hospitals. The code to page in the event of a **fire** is CODE:
  - a. Red
  - b. Blue
  - c. Green
  - d. Help
  
8. The code to page for Active Shooter is CODE \_\_\_\_\_
  - a. Red
  - b. Gray
  - c. Active Shooter
  - d. Purple

## **QUALITY/PERFORMANCE IMPROVEMENT/RISK MANAGEMENT**

9. Which statements are TRUE about Occurrence Reports:
  - a. Occurrence reports are not part of the medical record
  - b. Occurrence reports are legal documents between client and attorney
  - c. Occurrence reports should be entered into the Incident Management Portal (IMP) system
  - d. Occurrence reports are to be completed on issues involving patients
  - e. All of the above are true.
  
10. Having a Culture of Safety means that we all:
  - a. Observe for and report processes that could lead to an unsafe situation
  - b. Reporting errors, delays, throughput issues, equipment issues
  - c. Working as a team to improve the hospital for our patients
  - d. All of the above

## **HEALTH INFORMATION MANAGEMENT (HIM)**

11. A reportable breach happens when providing the patient with information, such as prescription, discharging instructions and follow-up care for the wrong (another) patient.
- True
  - False

## **INFECTION PREVENTION**

12. Proper hand washing techniques include:
- Using warm running water
  - Rub hands together and scrub for a minimum of 15-20 seconds using soap.
  - Clean under nails, rings, and between fingers.
  - All of the above
13. Healthcare workers who decline the Influenza vaccine must wear a mask in all areas of the Hospital except:
- Main lobby
  - Cafeteria
  - Private offices
  - Hallway
  - A, B and C only
  - They are not required to wear a mask.
14. Alcohol based hand sanitizers are effective against killing C-Difficile, therefore, soap and water are not required.
- True
  - False
15. Gown and gloves can be worn in common areas such as elevator, nurse's station, hallway, etc.
- True
  - False

## **SOCIAL SERVICES**

16. Health care practitioners are mandated reporters of suspected abuse:
- True
  - False
17. EMTALA law requires that hospitals provide medical care, treatment, and stabilization to the patient prior to discharge or transfer, even if they cannot pay for the services.
- True
  - False

## PATIENT CARE

18. Suicide is a serious problem in hospitals, and in order to protect the patient, all patients are screened for suicide risk. Listed below are statements about suicide.
1. If a suicide risk is identified, then the patient is restrained.
  2. Risk factors for suicide are family history, financial strain, previous attempt, antidepressant medication.
  3. Methods typically used in a hospital to commit suicide include, but are not limited to, jumping off the roof, hanging from a light cord, suffocation.
  4. Interventions are not needed to protect the suicidal patient.
  5. Suicide is not a risk in our hospital.

Select all correct statements:

- a. 1 & 2 are correct
  - b. 2 & 4 are correct
  - c. 2 & 3 are correct
  - d. All are correct
  - e. None are correct
19. Patient identifiers at WHMC are:
- a. Name & Social Security number
  - b. Room number and disease
  - c. Name and room number
  - d. Name and birth date (and account number for Laboratory)
20. Restraints are never used as a convenience to staff. They are used when other alternatives have been unsuccessful, and require using an appropriate type of restraint to protect the patient.
- a. True
  - b. False