# Annual Update & Orientation Post-test

**GENERAL INFORMATION**

1. ALOS, LOS, DOS, DOD - these abbreviations are used in the acute and the ASC. ALOS is an acronym for average length of stay, LOS is for length of stay, DOS is for date of service, and DOD is for date of discharge. You can assume these are the same for the surgery center. T or F

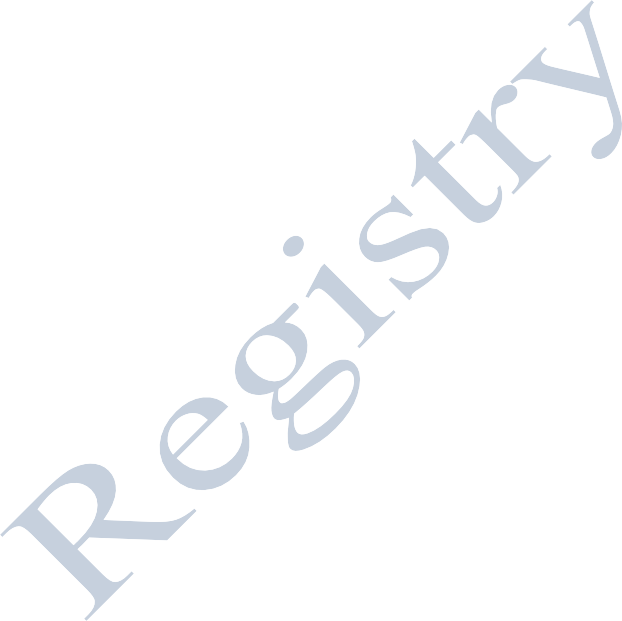
2.

A staff member transporting a patient on a gurney and talking or texting on a phone at the same time is demonstrating:

* 1. Backstage behavior in front of a patient which is a violation behavior expectation
  2. Onstage Behavior, which is professional and appropriate.
  3. No respect for patient, self, or his/her job. Termination would be best fitted for this person.

1. If the patient has a concern, you should do everything in your power to address it. If necessary, have your supervisor get involved. Patients also have the right to contact the California Department of Public Health (CDPH) if they feel their concerns are not being addressed.
   1. True
   2. False

\**State Licensed ASCs are under the jurisdiction of the Dept of Public Health, Physician owned, and licensed ASCs are under the jurisdiction of the CA Medical Board*

1. You may also report any concerns about the safety or quality of care provided in the ASC to administration or directly to The Joint Commission or to the California Department of Public Health (CDPH), following the chain of command for reporting.
   1. True
   2. False
   3. This ASC is committed to providing compassionate, quality care to the patients and families we serve in a family-friendly environment.
      1. True
      2. False
2. If English is a second language for a patient and consent is needed for a procedure, then what device should be used?
   1. Internet as in Google Translator
   2. Facility Translator person or service
   3. Vital signs monitor
   4. Pulse oximeter
   5. Dictionary

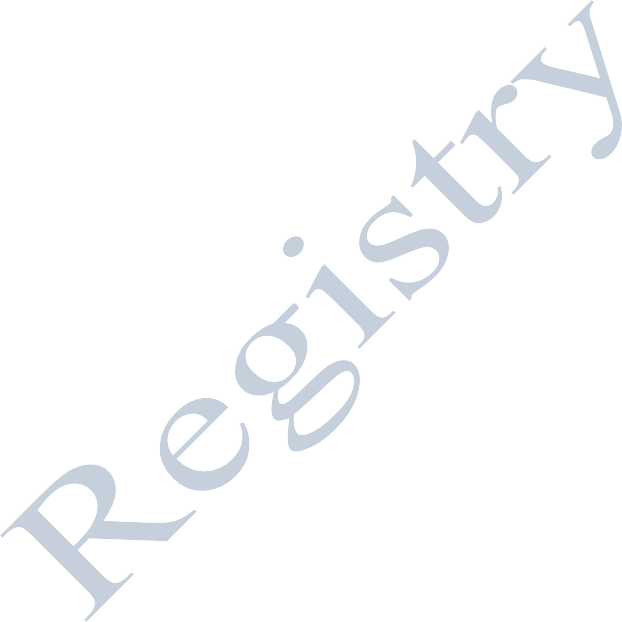
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1. Patients do not have a right to refuse treatment.
   1. True
   2. False

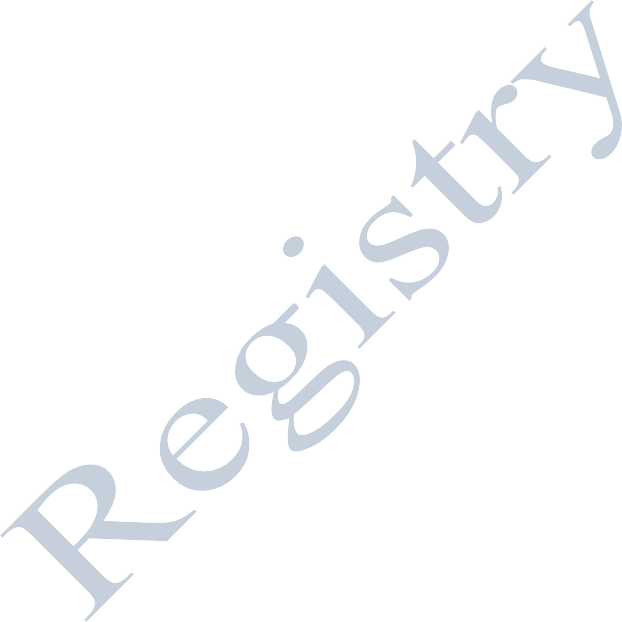
# INFORMATION SYSTEMS

1. What are the items that will breech Information Security?
   1. Computers for personal use
   2. Sharing passwords
   3. Accessing records that do not pertain to your work
   4. All of the above
2. What do you do when one or more computer systems are not working?
   1. Notify supervisor
   2. Reach out to third party IT staff
   3. Follow downtime procedures established for your department
   4. All of the above
   5. None of the above

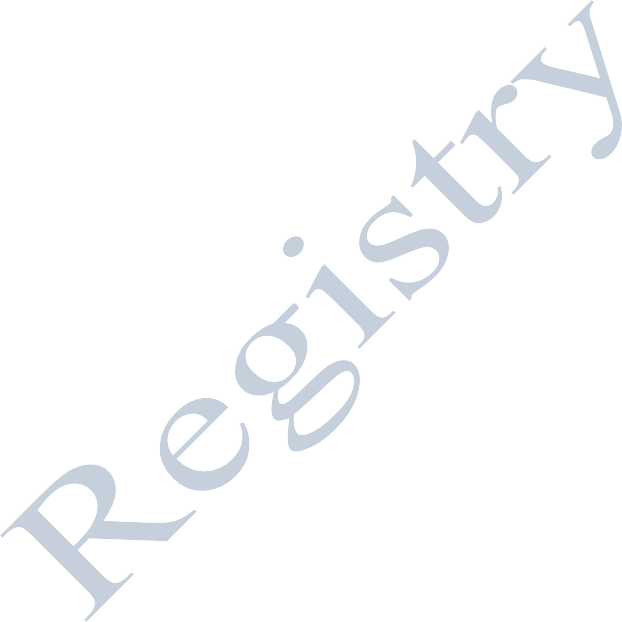
# HUMAN RESOURCES

1. Verbal outbursts, physical threats, reluctance or refusal to answer questions, condescending attitudes, language or tone, and impatience with questions are examples of:
   1. Poor patient satisfaction
   2. Appropriate behavior
   3. High turnover rates
   4. Disruptive behavior
   5. All of the above
2. Harassment is any action that makes the receiver feel uncomfortable.
   1. True
   2. False
3. You must report all incidents of aggressive behavior whether it involves an injury or not.
   1. True
   2. False
4. Which of the following is **NOT** an outcome of disruptive behavior/anti-bullying?
   1. Positive patient experience
   2. Endanger patient safety
   3. Hostile and unproductive work environment
   4. Endanger employee safety
   5. None of the above
5. When a member of the healthcare team (staff, physician, other) use profanity on a regular basis during “normal” conversation, this is an example of:
   1. Positive employee relations
   2. Good customer service
   3. Disruptive behavior
   4. Bullying
   5. Both C & D

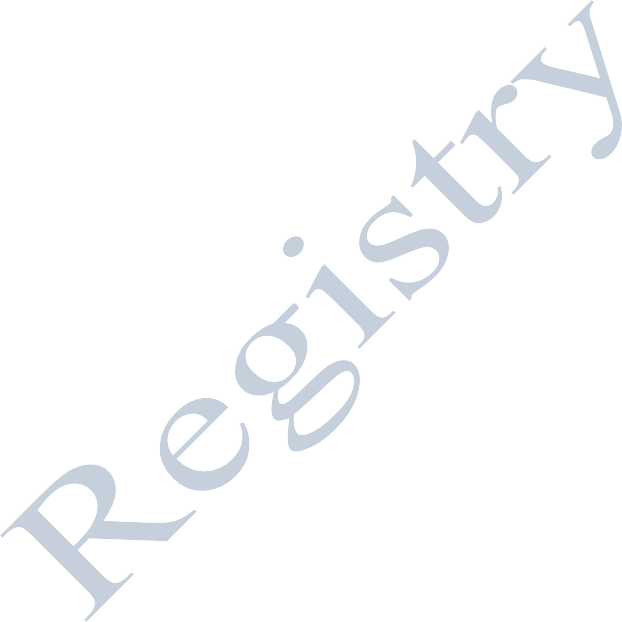
15 The following are true about Teamwork in the ASC:

1. It is an expectation for all employees
2. It uses our diversities, talents and experiences to achieve a better outcome for our patients
3. It crosses all disciplines
4. It improves the culture within the organization, provides an encouraging environment, and improves patient safety and patient outcomes.
5. All of the above
6. Which is the **BEST** example of the “Chain of Command”?
   1. Talking to co-workers to seek direction, guidance, and/or resolution.
   2. Talking to the CEO to seek direction, guidance, and/or resolution.
   3. Talking to the Chief Medical Officer to seek direction, guidance, and/or resolution.
   4. Going one level above your position to seek direction, guidance, and/or resolution.
   5. Talking to a Security Officer to seek direction, guidance, and/or resolution.
7. Employees must take a MINIMUM of 30 minutes for their meal break after working 5 hours.
   1. True
   2. False
8. Appropriate attire in the ASC includes all the following *EXCEPT:*
   1. Closed toe shoes
   2. Employee badge
   3. Acrylic nails for clerical staff
   4. Acrylic nails for clinical caregivers
9. The Safe Patient Handling Program and Classifications policy defines the equipment, transfer techniques, and expectations for staff when working with patients who require transfer and/or movement.
   1. True
   2. False
10. All employees at this ASC are expected to follow the Safe Handling Program and Classifications policy and practice good body mechanics – always utilizing lifting equipment when possible. When Hoyer lifts are not readily available, another team member should be requested. Never try to transfer a patient that cannot assist in his/her own transfer without another member of the team or mechanical medium.
    1. True
    2. False
11. It’s okay to combine meal and rest periods to take a longer break.
    1. True
    2. False
12. It’s okay to talk to my friends during working hours on my cell phone, so long as no one catches me.
    1. True
    2. False

# ENVIRONMENT OF CARE

1. Medical grade plugs should have prongs.
   1. Two
   2. Three
   3. Two or three
   4. none of the above
2. Who is the Facility Safety Officer?
3. Safety Data Sheets (SDS) have important information about hazardous materials used in the facility and what to do should an employee/patient be exposed to toxic materials.
   1. True
   2. False
4. All Staff are responsible to report unsafe or hazardous situations to their supervisor.
   1. True
   2. False
5. The P.A.S.S. acronym is used for fire extinguisher use. It means the following:
   1. Push, Alarm, Shout, Sweep
   2. Pull, Aim, Squeeze, Sweep
   3. Pull, Alarm, Sweep, Shout
6. The amount of radiation received depends directly on three factors: time, distance and shielding. However, as a rule of thumb you should stand at least 6 feet away from any radiation source given that radiation levels decrease with an increase in distance.
   1. True
   2. False
7. Who is our Radiation Safety Officer?
8. If a radioactive spill were to occur and/or radioactive material is found, you should,
   1. Secure or contain the area
   2. Cover the leakage
   3. Call the Radiation Safety Officer
   4. All of the above
9. Which of the following statements are true when dealing with C-ARM Technology?
   1. The C-ARM requires special licenses/permits to operate
   2. Moving the C-ARM is simple, and anyone trained can do it
   3. A copy of the physician's and the Technician's permits and licenses must be posted in public view on the wall of your lobby, they should never be expired.
   4. Department of Radiological Branch of the Dept of Public Health, separately licenses C-ARMs
   5. Radiation exposure is important to a patient; however, it is not important to staff whether pregnant or not.
   6. It is a requirement that staff in the room with the C-ARM always wear their dosimetry badges
   7. It is o.k. that staff share their shielding gear and badges with one another.
   8. The only acceptable time for a staff member to refuse patient assignment is if radiation is involved and she happens to be pregnant.
   9. All of the above
10. Electrical fires are the #1 cause of fires in ASCs. The code to page in the event of a **fire** is CODE:
    1. Red
    2. Blue
    3. Green
    4. Help
11. The code to page for **Adult Medical Emergency** is CODE .
    1. Red
    2. Blue
    3. Green
    4. Dr. Strong
12. A patient label, sticker of sort affixed to each, and every page of the medical record will have all of these noted except for one. Which one is it? Why is that?
    1. Allergy alert
    2. Fall precaution
    3. DNR (do not resuscitate)
    4. No blood transfusion
13. The code to page for patient found not breathing, no responsiveness, cardiac event, respiratory event, we use CODE ?
    1. Red
    2. Gray
    3. Blue
    4. Purple
14. It is expected that when the time out procedure is being held in the OR, staff are to remain

quiet and not participating in any other discussions. All eyes and ears are on the patient. T or F



Scenario: You and the anesthesia provider are looking at the OR schedule and see a busier than normal day. To save yourself some time, the anesthesia provider and you decide to pre-draw your meds for the cases What are the correct steps to take if you so choose to pre-draw meds?

Material Safety Data Sheets or Safety Data Sheets:

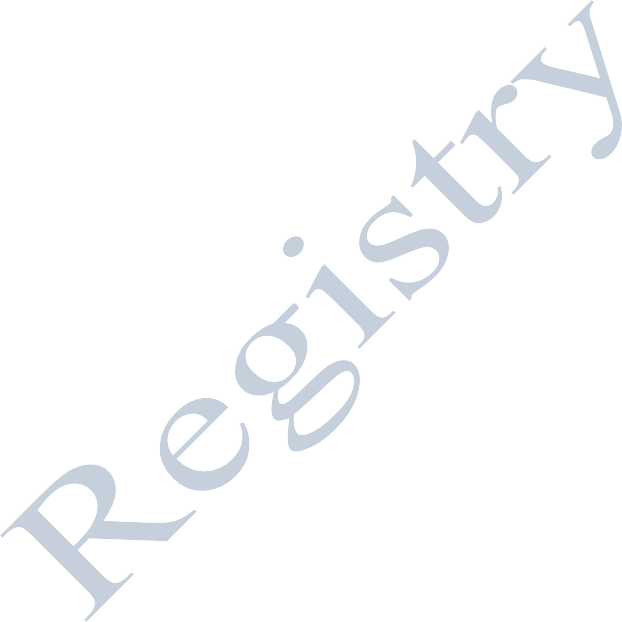
* 1. Have information staff need to know should a spill or exposure occur
  2. Are available on the internet listed as "SDS Clorox All-purpose spray" ex.
  3. Master lists are located in the recovery room and the materials management staff are responsible for maintaining its accuracy.
  4. OSHA can fine the ASC for up to $10K for each missing SDS sheet not identified
  5. All of the above

1. If a fire were to occur in your work area, you should be prepared to act. The following are all things you should do, *EXCEPT:*
   1. Protect patients and staff
   2. Pull the nearest fire pull station
   3. Yell “Fire” and run
   4. Implement R.A.C.E. response
   5. Obtain a fire extinguisher and use the P.A.S.S. technique

39.5 When you observe an electrical cord and it shows signs of wear, you see naked wires not covered by the manufacturer's covering, it is o.k. to do the following: T or F

1. due to the nature of the next case, you need that cord, so you use electrical tape to make it safer than you found it to be
2. you contact the surgeon for the next case and explain what is going on, if no replacement is located, then the case will be considered postponed or canceled

## For questions 40 through 50, use responses below to identify the type of Medical Waste:

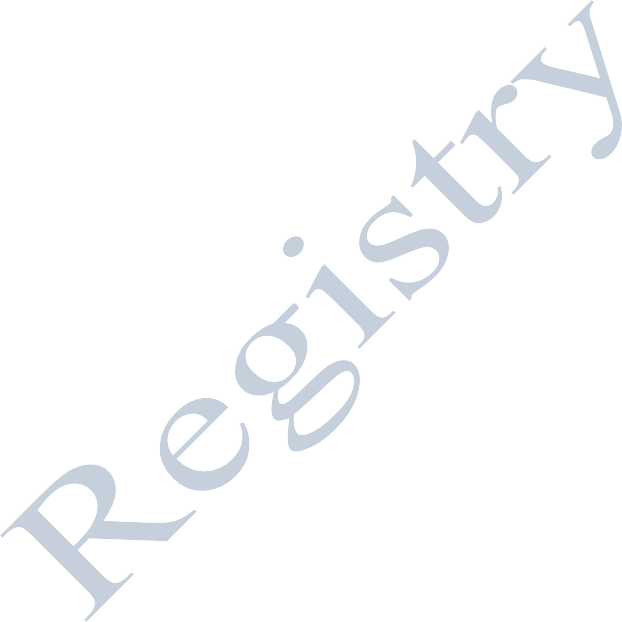
1. Blue Bin – Confidential Paper Trash/Shredding
2. Red Bin – Biohazardous Waste
3. Sharps Container
4. White Container with Blue Lid – Pharmaceutical Waste
5. Clear Bags – Regular Trash
6. Paper towels or any other paper waste ()
7. Empty bags with Biohazardous label ()
8. Medication that a patient refused ()
9. Syringe with blood in it, no needle ()
10. IV needle after activation ()
11. Patient face sheet ()
12. IV bag with med additive that is half filled and cannot be emptied ()
13. Laboratory printout ()
14. Gauze that is dripping wet with blood or body fluids ()
15. Suction tubing with blood or body fluids still inside ()
16. Scalpels, Trocars, guide wires ()
17. Non-sharp medical waste is:
    1. Material heavily soiled with visible liquid or caked blood
    2. Should be disposed of in containers marked with the biohazard label
    3. Should be disposed of in containers lined with a red bag with the lid completely closed
    4. All of the above
18. There must be an order from the surgeon with the procedure that is to be done and the procedure name/description is specific and allows for no misunderstanding across the spectrum of care?
    1. True
    2. False
19. The patient arrives and the admitting nurse reads the order and writes out the consent forms with "Vascular Ablation". The nurse fails to identify the adjective necessary. R, L, B. She calls the surgeon and the two of them re-write the procedure as Bilateral Varicose Vein Procedure OR should it have been re-written to say, "Bilateral Vascular Ablation?"

Is it true or false that ASCs cannot do any type of blood transfusion? All transfusions must be transferred to the acute hospital to be transfused.

# QUALITY/PERFORMANCE IMPROVEMENT/RISK MANAGEMENT

1. Identify the performance improvement model utilized:
   1. Plan, Design, Coordinate, Analyze
   2. Perform, Design, Collect Data, Action
   3. Plan, Do, Check, Act
   4. Plan, Do, Check, Analyze
2. Performance improvement is the responsibility of .
   1. Your manager
   2. Yourself
   3. Administration
   4. Everyone
3. Which statements are TRUE about Occurrence Reports:
   1. Occurrence reports are not part of the medical record
   2. Occurrence reports are legal documents between client and attorney
   3. Occurrence reports should NEVER be photocopied
   4. Occurrence reports are to be completed on issues involving patients
   5. All of the above are true

59 The National Patient Safety Goals include which of the following?

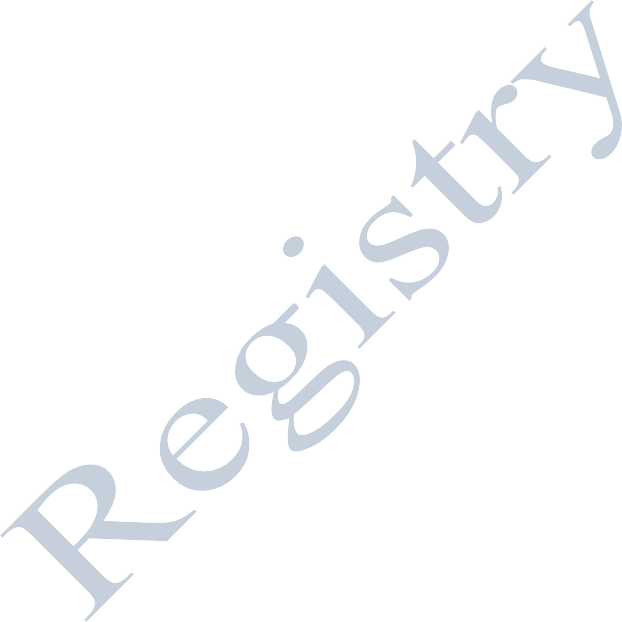
1. Patient identification
2. Communication effectiveness
3. Involve patients in their own care as a safety strategy.
4. All of the above
5. A and B only
6. National Patient Safety Goals are only the responsibility of the Nursing Department
   1. True
   2. False
7. Never 28 reporting refers to a list compiled by the National Quality Forum describing medical mistakes that are so serious they should never happen to patients, personnel or visitors and must be reported to the California Department of Public Health (CDPH).
   1. True
   2. False
8. Never 28 events must be reported to the department director and administration immediately.
   1. True
   2. False

63 A sentinel event is an unexpected occurrence which may involve the death or serious injury of a patient while in the ASC setting. Examples are:

1. Healthy 4 yo dies after arriving home from tonsillectomy
2. Small Bowel perforation secondary to an error made during a colonoscopy
3. 6-month post-op leaky silicone breast implant remove and replace
4. Black patient develops a keloid secondary to incision line infection
5. A & B
6. A & B & C G. All the above
7. Culture of Safety means:
   1. Observing processes that could lead to an unsafe situation
   2. Reporting errors, delays, throughput issues, equipment issues
   3. Working as a team to improve the ASC for our patients
   4. All of the above
8. The Joint Commission requires all accredited ASCs to collect and submit performance data. Beginning July 2022, ASCs reimbursement will be affected by how well the ASC performs on the designated Core Measures (canceled procedures, transfers to the ER, patients admitted into the acute)
   1. True
   2. False
9. The patient identifiers used include:
   1. Patient’s full name and date of birth only
   2. Patient’s full name and MR #
   3. Patient’s full name, date of birth, and if one of the previous are not available, then the patient’s account number.
   4. A secret name that is hidden and unshared with anyone
   5. None of the above

# HEALTH INFORMATION MANAGEMENT (HIM)

1. Patient information can be shared with any physician who asks for it.
   1. True
   2. False
2. Patients have the right to have their name removed from the general census.
   1. True
   2. False
3. I cannot be prosecuted for comments made about my patients on my social networking page.
   1. True
   2. False
4. HIPAA Guidelines do not have to be followed if you know the patient.
   1. True
   2. False
5. You may be held criminally responsible for breaching HIPPA regulations.
   1. True
   2. False
6. All of the following are true about documentation in the medical record *EXCEPT:*



* 1. All pertinent findings and significant negatives are to be documented
  2. Each entry must be date, timed and signed
  3. All entries must be legible, including the signatures
  4. If a documentation error is made, it can be scratched out or whited out
  5. Documentation should be done at the time of the occurrence

1. Abbreviations used in the medical record are approved by the Medical Staff and cannot be on the “Do Not Use Abbreviation List”.
   1. True
   2. False
2. Who is the Chief Privacy Officer?

# INFECTION PREVENTION

1. Hepatitis B is caused by a virus and can be prevented by getting the Hepatitis B vaccine.
   1. True
   2. False
2. The following are true about hand sanitizing and hand washing:
   1. Hand hygiene must be done even if gloves are worn
   2. Hand washing is our first line of defense for the prevention of infection and transmission of disease
   3. Hand hygiene must occur before entering the patient room
   4. Hand hygiene must occur upon leaving the patient room



* 1. All of the above

1. Proper hand washing techniques include:
   1. Using warm running water
   2. Rub hands together and scrub for a minimum of 15-20 seconds using soap.
   3. Clean under nails, rings and between fingers.
   4. All of the above
2. All employees are responsible for patient safety.
   1. True
   2. False
3. Alcohol based hand sanitizers are not effective against C-Difficile, therefore soap and water must be used.
   1. True
   2. False
4. Gown and gloves can be worn in common areas such as elevator, nurse’s station, hallway, etc.
   1. True
   2. False

## For questions 81 through 84, choose transmission-based precaution that should be followed using the responses below: (Use each only once)

1. Applies to all patients in the healthcare setting regardless of their diagnosis or presumed infection status.
2. Is used for organisms that are spread by contact such as C-Diff, MRSA and Scabies.
3. Is used for organisms spread by large droplets such as Meningitis and Influenza.
4. Is used for organisms that are airborne such as Tuberculosis, Measles, Chickenpox, Covid-19, and Novel Viruses.
5. Standard Precaution ( )
6. Airborne ( )
7. Contact ( )
8. Droplet ( )

# Lasers

1. Lasers can be used in surgery centers, and they require no special handling or precautions.
   1. True
   2. False

**Interoperative:**

1. The circulator in the OR can be an unlicensed person, i.e., surgical technician? T or F

86.25 CMS requires that either the surgeon or anesthesia provider remain in the facility until the last patient has been discharged? T or F

86.50 Before any patient is taken into the operating room, there must be a valid H&P on the patient’s chart? T or F

86.75 It is acceptable to use the history and physical from a physician in whom does not have surgical privileges. T or F

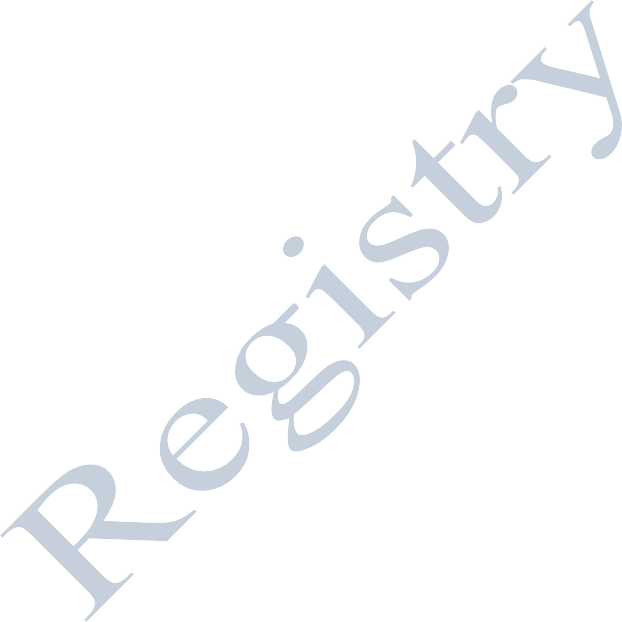
86.90 There is only one patient scheduled for a long in duration procedure. Staffing would look like this for this day: (1) RN {admitting nurse, circulator nurse, and pacu nurse}, (1) ORT, (1) Fluoroscopy tech if C-Arm is necessary, (1) Admin/Reception, admitting staff person. T or F

86.95 Same scenario above, can this nurse also take care of a second patient that presents and is added to the surgery schedule? Yes or no, if not, then explain:

# LABORATORY/PATHOLOGY

1. When sending out pathology specimens to the contracted lab, what is your mechanism for tracking the requisition when it goes out and the pathology findings and report when it comes back into the facility?

# SOCIAL SERVICES

1. It is important to consider the patients age in order to identify special needs for care.
   1. True
   2. False
2. A patient, family member or staff may initiate a concern about the patient’s home living conditions?
   1. True
   2. False
3. Health care practitioners are mandated reporters of suspected abuse:
   1. True
   2. False
4. In addition to being physical, abuse can also be emotional, fiduciary (money) or sexual.
   1. True
   2. False
5. Medicare patients have a process that can be followed if they feel they are not medically ready to be discharged from the ASC.
   1. True
   2. False
6. When providing care to a homeless patient, California law now expects that the ASC will discharge the patient to an appropriate shelter or other suitable accommodations.
   1. True
   2. False
7. ASCs must honor all patient advanced directives?
   1. True
   2. False
8. All patients should be asked if they have an advance directive upon admission to the ASC.
   1. True
   2. False
9. In the event of a patient death, the ASC staff must call One Legacy (the organ procurement agency) within one hour of the death.
   1. True
   2. False
10. All deaths are required to be reported to One Legacy within what time frame?
    1. Within 30 minutes of death
    2. Within 1 hour of death
    3. Within 8 hours of death
    4. There is no time requirement

# PATIENT CARE

1. Using Standardized Procedures and Standing orders, all patients must have basic blood work up that may or may not include EKG and Pregnancy Testing. What is the determine factor that would eliminate the need to do a pregnancy test on a 50 yo female?
2. An insulin dependent patient failed to bring with her the morning of surgery, her insulin, therefore we notified the surgeon of this and proceeded with the surgery as planned. T or F
3. Before using the facility glucometer, you must first run a quality check on the machine before getting the sugar level reading. T or F
4. The recovery room nurse drew up a narcotic to give the patient post-op. In route to give the medication, the nurse was stopped to ask for assistance in transferring another patient. She slid the narcotic into her front pocket. Explain all that is wrong with this scenario:
5. What is the #1 most commonly present drug that is known for triggering an MH crisis?
6. Restraints are never used as a convenience to staff. They are used when other alternatives have been unsuccessful using an appropriate type of restraint to protect the patient.
   1. True
   2. False
7. When a patient is present, there should always be 2 ACLS certified staff members present in the facility. Doctors, Nurses, and other staff can make up this 2-member team. T or F